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Religion and Subjective Well-being Among the Female Elderly People: A Focused Ethnography

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

4 comments · 30 Jul 2022 – 13 Aug 2022

Referee 1 Reviewer

MAJOR REVISION 30 Jul 2022

Dear Associate-Editor

Thank you for the opportunity to review this study. This can be an interesting qualitative study. I think that this study could be suitable for publication in a journal. But there are several issues that should be considered carefully by the authors. I have uploaded my comments and suggestions as a Word file.

Finally, the manuscript has several grammatical and writing errors and should be edited by a native English speaker.

Kind regards.

Referee 2 Reviewer

MAJOR REVISION 1 Aug 2022

Comments on Religion and Subjective Well-being among the Elderly People; An Ethnographic Study

The study explores the lived experiences of elderly people to examine the relationship between their religiosity and subjective well-being using a focused ethnographic method. In general, I think this work has potential. I provide some comments and suggestions to make the manuscript more transparent and better understood.

Title:
It seems that it would be better to mention the type of ethnographic study in the title, “a focused ethnography,” and use punctuation correctly.

Abstract:
The results and conclusion sections in the introduction should be expanded.

Objective:
 In the objective paragraph, only the first line should be indented.
 It is unclear to me precisely which research questions you sought to answer in your research. Write your research questions clearly.
Method:
 It seems that it would be better to move the first three lines of the method section, which address research gaps, to the background section.
 The inclusion and exclusion criteria for participants are not clear. The authors should write these more clearly.
 It appears that all participants were female. Was there a particular reason for this gender distribution of participants? Does this issue affect the results of your study?
 It has been mentioned that 4 data collection methods (in-depth interviews, participant observations, field notes, and analysis of documents) were used in the study, but no other explanation was provided about the field notes and analysis of documents.
 I found the paragraph on data collection (p. 7, line 86 onward) to be too short. The authors may want to consider providing more details about the observations and the average duration or number of observation sessions for each participant.

 It seems that it would be better for the authors to describe the process of transcription, coding, and data analysis in more detail.
 If possible, the authors should provide more information about the ethnographer's qualifications/experience and training for conducting observations and interviews.
 It is not clear to me whether the interview and observation data for each participant were integrated. It should be clearly stated how all the data for each participant were handled.
 It is mentioned that the thematic analysis method was used. The authors should provide more explanation about the classification, separation, and coding process used to extract the basic and fundamental concepts.
 If you have used techniques to increase the trustworthiness and credibility of the data analysis, this should be stated.
Limitation:
 The statement “Elderly people who were physically impaired with a disability that impeded their ability to see or hear did not participate, as participants were required to complete a research process” is presented as a limitation of your study. I don't think this can be a limitation. It can only be an exclusion criterion.

References:
 The referencing format should be modified based on the Vancouver style. Your referencing style must be consistent across the reference list, especially regarding the inclusion of abbreviated journal titles, punctuation, spacing, and capitalization.

Minor revisions:
 There are some editing mistakes in the manuscript. It is suggested that the manuscript be edited by a native English speaker.
 The font must be uniform throughout the manuscript (p. 4, lines 27-31 and line 54).
 You must be consistent in using the terminology: “Data gathering” OR “data collection”.

Associate Editor

MAJOR REVISION 10 Aug 2022

Dear Authors,
Thank you very much for submitting your manuscript to the MEJRH. Our reviewers and I read your article in depth. It has an interesting title and an important message to deliver; however, some issues make your manuscript unclear. Please consider our reviewers' comments and mine to resolve these issues and hopefully elevate the quality of your manuscript.
1- You focused only on female participants; highlight this in your title and emphasize this in your limitations, since studies that include both sexes may reach different perspectives.
2- I found many odd and awkward words in your text; please use more common terms and words to make your text easy to read and easy to understand.
3- I was confused about your aim and question. Please clearly state your aim and your question. Please remember that your title follows your aims and questions.
4- When you refine your title, aim, and question, revise the introduction accordingly.
5- Your abstract needs to be more detailed and informative. When the abstract stands alone, it should represent your whole article.
6- I think you need to provide a well-documented method for how you extract themes and subcategories. You may benefit from the approach described at https://pubmed.ncbi.nlm.nih.gov/14769454/ or another similar approach; when you follow such a method, you will probably need to revise your results section as well.
7- You need to be more specific in your discussion; start with your major findings and then compare your results with those of other studies in this field, either quantitative or qualitative.
8- Please give your readers a take-home message in your conclusion, especially those who are policymakers or

managers in residential homes for the elderly.
9- You MUST have references for each sentence in your manuscript.
10- Revise the references according to the Vancouver style.
11- When you finish revising the whole manuscript, ask a well-known institute to edit your article.
Best of luck, the AE

Editor-in-Chief MAJOR REVISION 13 Aug 2022

Dear Authors
According to the reviewers' and associate editor's comments, your article requires major revision. When revising your manuscript, please consider all issues mentioned in the reviewers' comments carefully: please outline every change made in response to their comments and submit the required files.

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Reply to reviewers

Religion and Subjective Well-being among the Elderly People:

A Focused Ethnography

ID 129593

Corrections based on Reviewer viewpoint

No	Comments	Answers
1.	To mention the type of ethnographic study in the title “a focused ethnography”	Done
2.	The results and conclusion sections in the introduction should be expanded	Done
3.	In the objective paragraph, the indentation should only be for the first line.	Done
4.	It is unclear to me precisely what research questions you were looking for the answer to in your research. Write your research questions clearly.	Please explain your religious activities in this setting. What is your religious care needs? Are you required to participate in religious activities here? Can you please tell me about your schedule for worship? Do you read the Quran or pray here? (If yes) what are your feelings after prayer?
5.	It seems that it would be better to move the first three lines of the method section, which addresses research gaps, to the background section.	Done
6.	The inclusion and exclusion criteria for participants are not clear. Authors should write these more clearly.	Done
7.	It appears that all participants were female. Was there a particular reason for this gender distribution of participants? Does this issue affect the results of your study?	No particular reason. Never
8.	It has been mentioned that 4 data collection methods (in-depth interviews, participant observations, field notes, and analysis of documents) were used in the study, but no other explanation was provided about the field notes and analysis of documents.	Right. Analysis of documents deleted from data collection methods. Corrected throughout manuscript
9.	I found the paragraph on data collection (p. 7, line 86 onward) to be too short. Authors may want to consider providing more details about the observation and the average duration or the number of sessions each participant was observed.	Done
10.	It seems that it is better for the authors to mention in more detail the process of	Done

	transcription, coding, and data analysis.	
11.	It is not clear to me whether the interview and observation data of each participant were integrated. It should be clearly stated how to deal with the total data of each participant.	Yes integrated. Interview and observation data of each participant have been included under the umbrella. We organized data to analyze them question-by-question to find meaningful units, develop codes, code data, find sub-categories and categorize.
12.	The authors should provide more explanations about the classification, separation and coding process to extract the basic and fundamental concepts.	We done this process for coding: The first level was to open coding which concerns identifying, naming, categorizing and describing phenomena found in the text. The second level was axial coding which is the process of relating codes to each other through a combination of inductive and deductive thinking. The final, selective coding, which is a process of choosing one category to be the theme, and relating all other categories to that categories.
13.	If you have used techniques to increase the trustworthiness and credibility of the data analysis, this should be stated.	By source - Collecting data from different sources in Rose House, such as different participants in different times. By methodology - We utilized three data collection strategies; participant observation, in-depth interviews, and field notes. By researcher – Our colleagues was asked to comment on the findings to eliminate any bias. By theories – We considered multiple theories and opinions during data analysis and interpretation.
14.	The “Elderly people who were physically impaired ….. It can only be an exclusion criterion	Thank you for your comment. Deleted
15.	referencing format should be modified based on the Vancouver style	Done
16.	There are some editing mistakes in the manuscript.	Done
17.	The font must be uniform throughout the manuscript	Done
18.	You must be consistent in using the terminology	Done
19.		Done
20.		Done

Reply to associate editor 1

1.	You focused only on female, highlight this in your title and emphasize on this subject in your limitation	Done
2.	I found many odd and awkward words in your text,..	Done
3.	I was confused on your aim and question…	Done
4.	I was confused on your aim and question. Please clearly mention your aim and your question…	Done
5.	When you refine your title, aim, and question, revise the introduction accordingly	Done
6.	Your abstract needs to be more detailed and informative	Done
7.	I think you need to provide a well-documented method on how you extract themes	Done
8.	You need to be more specified in your discussion	Done
9.	Please give your readers a take-home message in your conclusion	Done
10.	You MUST have references for each sentence in your manuscript	Done
11.	Revise the references according to the Vancouver style	Done
12.	When you finish revising the whole manuscript, ask a well-known institute to edit your article	Done

Religion and Subjective Well-being among the Female Elderly People:

A Focused Ethnography

Type of manuscript: Qualitative Research

Running Title: Religion and Elderly People

Manuscript ID: 129593

Abstract

Background: Each religion has its own unique history, as well as specific life way for its follower based on beliefs, traditions, rules, and values.

Objectives: This study sought to explore the lived experiences of elderly people to determine their relationship between religiosity and subjective wellbeing.

Methods: This is a qualitative study employed a method known as ethnographic research. Data were collected using observations, field notes, and in-depth interviews. Purposive sampling was used to select 10 knowledgeable female elderly people within a residential home in the Kerman province in Iran. Collected data were analyzed through principles of thematic analysis.

Results: Two themes were identified: (A) Embedded beliefs: the religious world of key participants, religious activities and religious faith (B) Religiousness and personal beliefs: spiritual well-being and religious concerns. All older adults believed that praying can affect their feelings and make their hearts calm and peaceful, and enable them to cope with their problems in a peaceful way.

Conclusions: Participants have asserted the significance of religious faith and spiritual well-being in their everyday life. Having stronger religiosity gives them a meaning of life and satisfies them with all components of life, a feeling like one has finished something in one's life, accomplished happiness and peace.

Key words: Aged, Qualitative Research, Religion, Spiritual well-being

1. Background

Throughout all communities and across all of recorded human history, the conviction in extraordinary operators has been found as an effective force (1, 2). There is a considerable breadth of research dedicated that these beliefs encourage moral behavior and proliferated precisely due to the social utility served by these purported pro-social effects (3, 4). Further to this, each religion has its own unique history and as well as specific life way for its follower based on beliefs, traditions, rules and values (2). Considering this point, religion may be for the most part characterized as an organized framework of convictions, hones, ceremonies, and images outlined to encourage closeness to a sacrosanct reality and to cultivate an understanding of one's relationship and duty to others in living together in a community (5).

In view of the fact that Islam, as the largest and fastest-growing religion in the world has a complete way of life for Muslims (followers of Islam). Islam focuses on perfect way to conduct individual, social, ethical and spiritual affairs within the life of the person, society and Muslims consolidate religion in all perspectives of their lives (6). Religion dimensions of life have been an essential component of health and wellbeing among people. Iranian Muslims follow Islamic concepts and traditions and Islam plays a pivotal role in their life and culture (7). Always, the role of religion and spirituality in meeting care needs encompasses such practices as the use of prayer in preventing and healing of disease. Many authors begin their writing with emphasizes the importance of bringing spirituality and prayer into the healing process (8, 9). Some evidence suggests that religion has an important role to meeting care needs of elderly people (10-12). These studies revealed that elderly people usually using religion practices as a coping strategy to reduce rates of depression and loneliness.

Although more research is needed to explore how religion play a role in meeting quality of life of older adults, but administers and care providers are required to meet the religion care needs of their customers. Because, religion or spirituality can be a source of comfort, and it may prove to be beneficial to their sense of satisfaction and value to encourage elderly people to participate in the religious practices that employ symbols that are meaningful to them (13, 14). While for number of older persons, religion may play a key role for them to deal with life's challenges, serve as a conceptual framework for understanding the meaning and purpose of life. For this group of people, what is required is a sense of personal dignity and worthiness, which can capture through the presence of God in their lives (8).

Despite an increase in the quantitative and qualitative researches on the issues related to elderly and their spiritual and religious activities (15-19), to date, no ethnographic research has focused on the aspects of elderly individuals' religiosity and well-being within residential home in Kerman province in Iran.

2. **Objectives** The purpose of this study was to explore the lived experiences of older adults in order to determine their relationship between religiosity and subjective well-being among female institutionalized elderly people.

3. **Methods**

Current study was employed a focus ethnographic research in Rose institute (pseudonym) in the Kerman province (Iran) to elucidate the elderly people' perspectives regarding their religious activities and its effect on their quality of life. Ethnographic methods are a type of qualitative approach that elicits the elderly residents' care needs from their viewpoints to produce detailed of different social phenomena (11).

This type of qualitative research attempt to enter into the setting where the researcher spends an extended period of time to collect data on the experiences of elderly people in their natural setting. Ethnographic study assists researchers to see the world through the participants' eyes and what they perceive as meaningful important subject (20).

We purposefully recruited and interviewed with 10 female elderly people in 2019. Profile of participants is shown in Table 1. The age of all participants were between 60 and 72 with an average of 65.1 years.

Table 1: Demographic characteristics of participants

Name (Pseudonym)	Age	Number of Children	Educational Level	Disease diagnosis
Asra	62	7	High school	None
Fatemeh	61	5	Diploma	Stroke
Melika	66	4	High school	Heart Disease
Neda	60	0	University	None
Negar	69	5	Primary school	High Blood Pressure
Raha	70	3	Primary school	Diabetic
Rosa	60	5	None	Asthma
Sara	67	4	Primary school	Diabetic
Shirin	72	1	Diploma	Stroke
Zahra	64	6	Primary school	Diabetic

Median length of admitted to study setting was seven months. In terms of educational attainment of the elderly participants in this study, the majority have primary degrees.

At the beginning of the study, as a participant observer, principal researcher struggled to remain an outsider, or a “fly on the wall.” After few weeks, since the study took place, principal researcher assumed that he could establish rapport with key informants and have more interaction with them to grasp more information regarding their daily life while keeping a certain distance.

Ethnographic research instruments used for data collecting include in-depth interviews, participant observations, and field notes. Data collection process lasted about three months, most focusing on recording interactions and activities at the setting.

A semi-structured interview guide was used in this project. The sheet contains questions regarding demographic characteristics of informants including their age and education; and the second part was regarding research questions. In-depth interviews were performed in the form of a conversation with two major guiding questions and number of sub questions:

- Please explain your religious activities in this setting.
- What are your religious care needs?
- Are you required to participate in religious activities here?
- Can you please tell me about your schedule for worship?
- Do you read the Quran or pray here? (If yes) what are your feelings after prayer?

Interviews began with demographic questions and evolved into more open-ended exploratory questions related to research questions. The rationale for using semi-structured interviews was because this approach gives opportunities for the informants and researchers to explore unique experiences while still providing some framework for the interview (11). The average time of interviews with elderly people lasted about 42 minutes (30–55 minutes) depending on the participants' interest and ability. All interviews were recorded on a digital voice recorder.

Additional notes were recorded immediately following each interview by time and date to complete the information. Semi-structured interviews with participants completed in one session, but one of them concluded during two sessions. We organized data to analyze them question-by-question to find meaningful units, develop codes, code data, find sub-categories and categorize. The interview and observation data of each participant were integrated.

Data were analyzed by drawing upon the principles of thematic analysis for emergent themes.

For this, we used a systematic coding approach. The first level is open coding which concerns identifying, naming, categorizing and describing phenomena found in the text. The second level is axial coding which is the process of relating codes to each other through a combination of inductive and deductive thinking. The final, selective coding, which is a process of choosing one category to be the theme, and relating all other categories to that categories.

A computer software program (NVivo) was used to analyze the data to assign codes and data management.

Moreover, establishing trustworthiness or rigor increases the confidence of the reader and ensures the findings are worthy of attention. In the current study, we employed four main types of triangulation:

By source - Collecting data from different sources in Rose House, such as different participants in different times.

By methodology - We utilized three data collection strategies; participant observation, in-depth interviews, and field notes.

By researcher – Our colleagues was asked to comment on the findings to eliminate any bias.

By theories – We considered multiple theories and opinions during data analysis and interpretation.

4. Results

In our current ethnographic study, two themes were emerged from participant observations, field notes, and interview transcripts: (A) Embedded beliefs: the religious world of key participants، religious activities and religious faith (B) Religiousness and personal beliefs: spiritual well-being and religious concerns.

Table 1: Expectations of Religious Care Needs Fulfillment of Elderly People

Subtheme/ Selective coding	Themes/ Axial coding
The religious world of key participants Religious activities Religious faith	Embedded beliefs
Spiritual well-being Religious concerns	Religiousness and personal beliefs

A. Embedded beliefs

Although religion played an important role in the lives of the Muslims, but this factor seemed more pronounced and took on a new meaning for elderly people in the Rose institute.

a. The Religious world of key participants

The structure and social atmosphere of the daily routine in Rose institute reflects more on the presence of religious values among elderly people. Informants confirmed that, owing to their religious beliefs, they felt the need and obligation to help others who are in need.

> *I know what to put (on property documents), what to give. Because here (in Iran) we have so many orphans, poor people and old people. When I pass away, they can take (my belongings). I already signed (the papers). I have estates and pistachio garden (Ms. Asra).*

I like religious activities and giving alms. I want to do enough deeds in preparation for the next life. I have a good fortune so I give alms (Ms. Fatimah).

b. Religious activities

The management organizes some religious activities in Rose institute. Moreover, older persons also have their own schedule for religious practices to perform religious activities such as reciting the Quran or performing prayers. The key participants mentioned that these religious practices bring them closer to God, maintain a purpose for their lives and prepare them for an easy death. They believed that performing extra prayer will help them overcome fear or anxiety about the past, present and future.

Every Monday we have religious talks in the morning. Every days I have recitations of Quran. We also perform the usual prayers (Ms. Negar).

In a month, I will read the (whole) Quran. During the fasting month, I will go for terawih prayers every night to my neighborhood mosque (Ms. Raha).

One of elderly people stated that; there was Quran reciting competitions held in her neighborhood' mosque as a social religious activity.

They used to have Quran reciting competitions and for the first competition, I won the second prize and for the second competition, I won the first prize (Ms. Rosa).

c. Religious faith

Obviously, Islam plays an important role in the everyday life of Muslims. In Muslim societies, the lives of persons especially those who make it into old age are full of meaning because they have a greater opportunity to pray. While elderly people, are lonely in their later years, they do tend to

perform prayers as much as possible. This is a main activity for the majority of female to fill their idle time and draw themselves closer to God.

> *When I sit alone, what else can I do? I do Tasbih (Glorification of Allah); I can do hundreds or thousands. Sometimes I think I'm happy because I can give alms, perform my prayers and read the Quran, because I'm afraid of death. If I have enough preparation for the afterlife then I won't be afraid to die. Even if I die today, it is fine (Ms. Sara).*

> *I prefer to be alone, performing the pray and reciting the Quran rather than chatting with others. I don't like to chat with them. I just talk when I think it is important (Ms. Shirin).*

B. Religiousness and personal beliefs

Religiousness and personal beliefs were a major category in the older adults' perceptions about religion. All informants were believed that spiritual and religious beliefs have a powerful influence on their everyday life.

a. Spiritual well-being

Religious tenets are highly personal and important to elderly people especially at the end of their life. Additionally, all older adults who participated in the current study believed that praying can affect their feelings and make their hearts calm and peaceful, and enable them to cope with their problems in a peaceful way.

> *After prayer, I feel very peaceful, especially at night. You can forget all your problems. It's only me and God (Ms. Melika).*

Following this, there is a related example from one of field notes:

> *A woman who is a retired teacher mentioned that, "when I was lying in the bed I recite some Zikr". She said "If I don't do that, I think I'm wasting my time" (05.08.2019).*

b. Religious concerns

Elderly people had their own concerns regarding religious activities and also desired their life to be filled with religious activities without any disturbance to them.

> *I don't want anything; I just want people not to disturb me (laughs). That's all. Sometimes when I read the Quran, people come and disturb me. I don't like that (Ms. Neda).*

Additionally, the prayer books and the Quran provided in the setting have small letters, thus the elderly people cannot read them properly. Ms. Zahra, who participated in this study, acknowledged this:

> *I cannot read the Quran properly here, because the letters are too small. I cannot see with my impaired eyes. If the letters are bigger, then I can see and read it better.*

5. Discussion

Spiritual care needs were found to be the most important theme related to the elderly people' unmet care needs for this study. The key participants have asserted the significance of religious faith and spiritual well-being in their everyday life. For Muslims, religion functions as a crucial source of emotional support. Having stronger religiosity gives them a meaning of life and satisfies them with all components of life, a feeling like one has finished something in one's life, achieved peace, and happiness (6, 21).

Religion, as a potential resource for well-being, has received increasing attention in the social science field in recent years. There is widespread agreement among researchers regarding a higher perceived capacity to cope among Muslims compared to adherents of other religions (21-23).

These researchers believe that Muslims used religious coping methods such as reading the Quran or performing prayers after encounters with stress or loneliness to enhance their self-esteem and better navigate life's challenges. These results are similar to the current study as informants acknowledged that reading certain Quranic verses as well as having religious practices helped them to cope with stress and loneliness and made them persist despite trials happening in their lives. Performing extra prayers assist them in overcoming fear or anxiety about the past, present or future.

Furthermore, there is widespread agreement among researchers about the positive mutual connection between religion and well-being (24-26). They claim that individuals who attended religious activities had lower mortality rates than those who did not and these results have a potential influence on health in that it significantly reduces depression and general distress among patients. During the data collecting phase, we also found that elderly people believed in a variety of values. They pointed out that spirituality and belief in God has strongly influences their well-being and is a key factor. Similarly, another study tried to understand the relationship of religious activities with Iranian immigrants' health in later life (27). Researchers suggest that "a spiritual sense of connection to family, others, and a spiritual sense of unity and beliefs about God and God's will inspired their reflections and beliefs about life and the meaning of health and illness". Therefore, the Rose institute management must respect the values embedded in the elderly people' minds regarding religion and make the environment comfortable and suitable for them to practice their faith.

Actually, for the Iranian, religion is a crucial source of support and gives them another meaning in life. In other words, the most important factors that play a role in Iranian peoples' lives are religion and spiritual attitudes (27). In the present study, all participants stated that they attained a more

positive attitude towards the future after performing religious practices. Although a body of knowledge relating to elderly people' life is identified in literature (18, 28), less is known about the actual process by which Iranian perform extra religious activities and what their feeling are after performing these activities. Nonetheless, number of researchers indicated that the significance of religious faith and spiritual well-being to improve older persons quality of life' in other countries (29, 30). In another research done by Emami et al., (2010), the meaning of health among the elderly Iranian immigrants were reviewed; the main focus was on spirituality and its connection to health (31). The results were similar to the current study as participants mentioned that spiritual and religious beliefs and practices play a significant role in their current lives and in their future.

Additionally, religion and personal beliefs were identified by the elderly persons as care needs important to them. Transcripts indicated that the significance and usefulness of this need was supported by statements from residents. Performing prayers was shown to have a positive influence on elderly people everyday life and encouraged a feeling of being safe, calm, peaceful and more confident (32, 33). In elderly people' life, attending to their spiritual needs ensures that they have an opportunity to find meaning for the end of their life and draw themselves closer to God. Therefore, they attempt to participate in any formal and informal religion practices (34, 35). They believed that performing religious activities underpins their way of life and effectively feed their spiritual well-being.

5.1. Limitations

The results of this study only captured the perspectives of the female elderly people who were living in the Rose House.

5.2. Conclusion

Influence of religion on older persons was found to be the most important theme for this study. Participants have asserted the significance of religious faith and spiritual well-being in their everyday life. For the Iranian as Muslims, religion functions as a crucial source of emotional support. Having stronger religiosity gives them a meaning of life and satisfies them with all components of life, a feeling like one has finished something in one's life, accomplished happiness and peace. Moreover, it is also hoped that this research could provide information to assist policy makers and managers in making appropriate decisions on standards and regulations for residential homes to improve elderly quality of life.

Footnotes

Authors' Contribution: Study concept, design, data collection and data analysis: Seyed Zia Tabatabaei; Manuscript drafting: Fatemeh Ebrahimi; Critical revision of the manuscript for important intellectual content: Seyed Zia Tabatabaei. Both authors read and approved the final manuscript.

Conflict of Interests: The authors declare that they have no conflict of interest.

Ethical Permissions: IR.RUMS.REC.1398.176.

Funding/Support: This study was financially supported by the Research Deputy of the Rafsanjan University of Medical Sciences.

Informed Consent: The principles of ethical approval were respected during the whole research process. Moreover, their informed written consent was obtained.

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2 Revision 1

3 comments · 1 Feb 2023 – 20 Feb 2023

Referee 1 Reviewer

ACCEPT 1 Feb 2023

Dear Editor

I have reviewed the revised version of the manuscript titled "Religion and Subjective Well-being among the Elderly People: A Focused Ethnography". The authors have addressed all of my comments on the manuscript.

Best

Associate Editor

ACCEPT 13 Feb 2023

Well done

Editor-in-Chief

ACCEPT 20 Feb 2023

Dear Authors
We are pleased to inform you that your article is accepted for publication in the MEJRHS. We hope to receive other high-quality articles from your group.