

What Elderly Needs to Improve Their Quality of Life? A Qualitative Study

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Abstract—The Special Region of Yogyakarta is a province that has experienced an increase in the number of elderly people or known as the aged population boom. According to the National Economic Survey (SUSENAS) in 2007, it is known that Yogyakarta is the highest population of elderly in Indonesia with the index more than 10% of the national level (14.02%). Sleman regency is the district with the highest life expectancy in Indonesia, which is 75.6 years which exceeds the average age of the elderly in the Yogyakarta province ranging from 74 years and the average age of the elderly at the national level is 70.6 years. Elderly Family Development Community or “Bina Keluarga Lansia” is an effort carried out an elderly family member to increase the elderly quality of life. Method: This study is a qualitative study with a descriptive approach. This research was conducted at an elderly family development community or “Bina Keluarga Lansia” in Sleman regency using in-depth interview to elderly community leader and group members. Results: The elderly family development community has seven dimensions to increase the quality of life among elderly, they are: physical, intellectual, social, emotional, spiritual, vocational professional, and environmental dimensions. The involvement of group members in the elderly family community and it is need high attention of the elderly cadres. Conclusion: The elderly people need the activities to increase their skills which are improving their economic level.

Keywords—elderly in yogyakarta, elderly needs, quality of life

I. BACKGROUND

A. Background of The Study

In Indonesia the baby boom effect contributes to a new demographic reality that is aging population. Estimated in between 22 million population aged 60 years in 2017. It becomes rise to 48 million in 2035 [1]. The increase in the world's population occurs globally, including Indonesia. The most significant increase occurred in the elderly population group, so that Indonesia had entered an era of population with an old structure. The rapid increase in the elderly population has an impact on life expectancy. Life expectancy is one indicator of the success or success of development, especially development in the field of health [2]. The aging stage in the elderly has an impact on three aspects, namely biological, economic, and social. The decline in elderly people requires the elderly to adjust to the conditions of the change. For example biological changes in the elderly cause a person to become menopause and changes in reproductive hormones. Economic and social changes will also be felt by the elderly, namely entering retirement or declining work activities which

then have an impact on income and decreased self-esteem and cause the elderly to withdraw from social life [3].

Quality of Life is a functional condition that includes physical health, psychological health, elderly social life, and environmental conditions surround the elderly. The quality of elderly life is influenced by the level of independence, physical, psycho-logical, social and environmental conditions [4]. The family is expected to be the main environment in the service of the elderly. Thus, elderly service programs are based on family is a program that needs to be developed [5].

National Family Planning Board is one of the institutions that provide a forum for the elderly with the establishment of working groups or “pokja”. One form of working group initiated by the national family planning board related to the elderly program is the elderly family development community [6]. More than 80% of elderly people in Java island expect to live safe, happy, and get any health insurance [7]. Life expectancy has increased from 37.5 to 68.6 in 2017. As a consequence, the population aged 60 years and over increased from 6.2% in 1950 to 8.4% in 2005 and is projected to increase to 23.7% in 2050. The Indonesia National Socio-Economic Survey in 2004 showed that the proportion of older people in Indonesia ranging from 2% in Papua to 12.8% in Yogyakarta [8].

B. Problem Statement

Purpose and Objective of the study. The purpose of the study was to identify the needs of the elderly based on the family member who has elderly people in a home. The objectives of the study was to identify the needs of the elderly based on the dimension of the family development community or “Bina Keluarga Lansia”.

II. METHOD

A. Research Design

This study is qualitative, descriptive, and explorative research in order to explain the elderly needs to improve their quality of life [9]. In order to get the depth of information, the researcher collaborated with elderly family development community or called “Bina Keluarga Lansia” Taman Setita in Sleman Regency of Yogyakarta. The community was chosen because of it is a pilot of family planning board Yogyakarta province.

B. Sampling Method and Study Site

The population of the study was a family who has an elderly people in Sleman Regency of Yogyakarta Province. The sample of the study was nine families who have an elderly member and participated as elderly family development community or "Bina Keluarga Lansia" Taman Setita who were selected by purposive sampling [10].

C. Data Collection

The data was collected by in depth interview to the family members and the elderly community (Bina Keluarga Lansia) leader. The in depth interview was conducted to interviewed the subjects of the study by using guideline question. The data collection was finished in two weeks and in an hour for each interview processes. Informants were interviewed in Bahasa Indonesia or local language depends on their proficiency. The reflective field notes also conducted to observe the informants' gestures and tone of voice.

D. Data Analysis

All of the audio interviews recorded were transcribed by research assistants using qualitative content analysis. The data analysis involved nine members of elderly family development community or "Bina Keluarga Lansia". The interviews were analysed individually to identify the relating theme with the aims of the study [2]. For each transcription, the issues related to the aims of the study were identified and coded without predefined themes. After all of the coding process finished then classified the theme based on the theoretical framework.

E. Ethical Consideration

Universitas Ahmad Dahlan Ethics Committee was approved the ethical review of this study with number 011701013.

III. RESULTS

National Family Planning Board has a concern to improve the quality of life of the elderly group by forming an elderly family development group or Bina Keluarga Lansia (BKL). Our data tell the seven dimensions of it. Based on the results found that seven dimension have been implemented to the society. Professional Vocational dimension still need improvement for increasing the quality of life among elderly people. The community group needs some training of creating some economic products. The funding of group community supported by Family Planning Board of Sleman Regency as much 53 USD per year. Community group cadres carry out forms related to the number of elderly people who are nurtured and report on activities that have been carried out by the community group every three months as monitoring activities.

A. Intellectual Dimension

Based on the results of the study, the informant said that the objective of the intellectual dimension is family members around the elderly and the elderly themselves. Activities carried out by cadres are socialization of how to behave to the elderly for family members, as well as soft materials to stimulate the work of the elderly brain. In socialization activities on how to behave to the elderly, participants (elderly families) are taught to better understand and try to position themselves as elderly.

Cadres understand that someday participants will also be in the same position as the elderly, therefore participants are now asked to be more patient in caring for the elderly. Based on the results of these activities, the informant argued that participants (elderly families) had been able to apply the knowledge conveyed by cadres. The group community also provides books to the elderly people.

"... the intellectual counseling conducted to remind the old days of elderly that they used to learn how to count number in their childhood. There is a form of material which is can stimulate the left brain of each elderly people. Then we also have intellectuals' books in the secretariat..... " (Informant 9).

B. Emotional Dimension

Based on the results of the study, the informant said that the elderly often misunderstood the emotional dimension itself. This is because emotions interpreted as negative connotations. The essence of this emotional dimension is providing understanding to participants about positive and negative emotions. The intended participants are elderly and elderly family members themselves. In group activities, socialization related to the emotional dimension was conveyed to participants through the counseling method related to understanding and emotion examples.

In addition to counseling, the approach to the emotional dimension is also done by the discussion method. Usually the cadre will ask questions about a situation in which participants will be asked to find solutions. By this method, participants are expected to be able to apply the knowledge that has been obtained in everyday life. The results of the socialization are different for each individual. This is because the difference of understanding among participants. But overall, participants can understand this emotional dimension well.

"Actually when we give a socialization or counseling we ask what the problems that elderly felt related to emotional....we try to discuss the problems and find out the solutions...it difficult to transfer the knowledge..some of them understand easily some of the need more explanation..but so far they already understood well....." (Informant 7).

C. Physic Dimension

Based on the results of the study, the informant said that the activities in the physical dimension were divided into two, namely the elderly health services or "posyandu" and elderly gymnastics. Elderly health services is held every 20th in collaboration with district health care center or "puskesmas" and village midwives or "bidan desa". Routine activities in the elderly health services including: measurements of body weight, height measurements, measurements of upper arm circumference and blood pressure and other services are blood type and cataract checks. While the elderly gymnastics activities are held every Friday.

"We have several health activities for elderly in Posyandu for example measurements of body weight, height measurements, measurements of upper arm circumference and blood pressure and other services are blood type and

cataract checks. Elderly so excited to have exercise in the afternoon, they are very happy.....” (Informant 8).

D. Professional Vocational Dimension

Based on the results of the study, it is known that activities in the vocational professional dimension are held once a month. In its implementation, cadres have many obstacles. The obstacles are the number of elderly people who are not interested in this dimension and the difficulty of making an economic product also they difficult to sell the products made by elderly.

“We are difficult to find what kind of products that suitable to made by elderly...we ever tried to trained them how to make chips but it did not work and also it is difficult to sell the products.....” (Informant 5).

E. Spiritual Dimension

Elderly people need spiritual assistance to live. The increase in spiritual life is intended so that the elderly get peace of mind. Members of the Elderly Family Development are actively involved in religious dimensions including reciting holy qur'an in twice a week with another elderly members also spiritual activities in mosques.

F. Social Community Dimension

Based on the results of the study, the informant said that activities in the social dimension are socialization and counseling. The outline of the material presented is regulating the relationship between human and human where this principle is in accordance with the teachings of Islam, namely human relationship or “hablumminnanas”. According to the informant, the way to deliver material through this recitation forum is effective than counseling, family member more understand how to care the elderly.

“ I think when the cadre delivered about elderly...everything about health, knowledge how to care elderly, how to earn money for elderly...it is more effective when did in the recitation forum...many people come and we can ask many thing.....” (Informant 1).

G. Environmental Dimension

The aim of the environmental dimension is to involve the elderly in various environmental cleaning activities. In implementing the environmental dimension, the members of the elderly empowerment group have collaborated with the Environmental Office of Sleman Regency in managing waste and waste as well as optimizing the waste bank. Elderly people were collaborated in each activities to save the environment.

“Environmental dimension is the effective ones. The activities of this dimension always follow by elderly people. For example when we have to clean the environment so the men elderly will clean up the environment and the women elderly will provide any foods for us.....” (Informant 1).

H. Funding Source

The family planning board of Sleman regency funded the community group as much 53USD per year to support programs. This amount is too little to apply to any activity or program for the elderly. This was evidenced by the statement of the informant who supported this fact.

“hmmm we received 53 USD from family planning board of Sleman regency for running our program..53 USD per year and we have so many activities for elderly....” (Informant 9).

I. Monitoring and Evaluation

Based on the results of the study, the informant said that the monitoring activities by filling out the forms provided by the Family Planning board of Sleman Regency in every three months. The data reported is the number of elderly people and how the progress of each dimension's activities. The monitoring and evaluation activities carried out by the Family Planning Board office Sleman Regency direct observation.

“For monitoring the activities...the cadres have to fill out the form from family planning board of Sleman regency. In every three months we have to report how many numbers of elderly in our community ...we have to report it and also every activity that we have done...” (Informant 9).

IV. DISCUSSION

Elderly is an age group that needs attention from family and surrounding communities. Changes from a biological, physiological, and social determine the change of attitude of an elderly person. Therefore, the elderly need social support to support their quality of life. Seven dimensions in the development of the elderly family are steps to help the elderly in improving their quality of life. Based on the research that has been done, the results show that these seven dimensions have not been implemented optimally. Social factors include interrelationship with other people. The elderly need some activities that interconnected with other human for example recitation forum, elderly health services forum, and any other activities which make the elderly can built the communication and assist the other elderly people [11], [12]. The system of elderly family development activities includes seven dimensions that are carried out by the approach of the elderly, family and environment [13]. This is in line with the empowerment of the elderly in Japan that the elderly empowerment practice includes a four-dimensional conceptualization of problems and focus of interventions. Dimension 1 focus on personal individual needs, barriers, values, and attitudes of the elderly. Dimension 2 conceptualized on common problems and personal strengths and weaknesses, as well as the developing of social support in term of family members. Dimension 3 focuses on micro environmental issues, including social, health, and economic services to increase the family welfare. Dimension 4 related to macro environment in term of policy. The main point to implement this model is engage between personal and interpersonal aspects of the elderly to development knowledge and skills for addressing issues [14], [15].

Another similar study was conducted in Tabriz, Iran in 2012 with assessing the quality of life in elderly and related factors. This assessment was conducted by assessing several factors such as physical health, psychological health, social relationships and environmental health based on age characteristics. Of the four factors assessed based on age characteristics, a score for the quality of life of the elderly who is well assessed is also the presence or absence of degenerative diseases experienced by the elderly. The result is a significant difference in the quality of life with the incidence of cardiovascular disease in the elderly so that it is more emphasized to establish governmental or private people clubs

and information services for educating elderly people regarding healthy diet and doing regular exercise can be effective. In line with this study, an assessment conducted in Tabriz, Iran emphasizes socialization and counseling activities not only for the elderly but also for the elderly families [16].

The overall dimension of the Elderly Family Development aims to improve the quality of life of the elderly. A study of perceived social support and quality of life in the elderly in Hong Kong explained that social support and quality of life affected life satisfaction by 28.6%. Life satisfaction, an important indicator of individual well-being, it has an important role in aging. Elderly people with higher levels of life satisfaction are more likely to have dominant physical and mental health status [17]. Development of activities for the elderly is very important. This is not only the responsibility of family members but also the responsibility of service providers such as doctors, public health experts, psychologists, gerontologists, nurses, elderly nutritionists to provide education and skills in improving bio-psycho social development characteristics, and it can be funded by government and private organizations and professionals [18].

ACKNOWLEDGMENT

The research was fully funded by Universitas Ahmad Dahlan, Indonesia.

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