

The Correlation Between the Post Power Syndrome and the Fulfillment Needs of Activity Daily Living of Elderly in Graha Werdha Aussi Kusuma Lestari

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ABSTRACT

Background: The elderly is a period of decline in biological function that cannot be avoided by every human being. The decline in biological function can affect various aspects of life including physical, psychological, and social aspects. One change in social roles that has a major impact on the elderly is retirement. Fear of retirement can cause anxiety, tension or stress, psychiatric and physical problems. This is what is known as post power syndrome. Inadequate adjustments to the changes that occur when entering retirement made someone to seems like he is still working so they still depending on others in their activity of daily living. This study aims to determine the relationship between post power syndrome and the fulfillment of the needs of daily living activity in the elderly at Graha Werdha AUSSI. **Method:** This research uses a quantitative approach with cross sectional design. The research included 45 elderly in Graha Werdha AUSSI as a total sampling technique. The instruments used in this research were the post power syndrome questionnaire and the Katz Index. The analysis was using Chi Square test. **Result:** This study's results that mild post power syndrome is experienced by 66.7% of respondents. Post power syndrome was significantly related to daily living activity ($p = 0.043$). The results of this study can enhance the knowledge of care provider about post power syndrome in the elderly and how to increase independence in the fulfillment of the needs of activity of daily living (ADL). **Conclusion:** This research can be a reference for further research to conduct research with qualitative and quantitative methods by looking at other factors, for example, seen from physical conditions, religiosity or spirituality.

Keywords: *elderly, post power syndrome and activity of daily living*

1. INTRODUCTION

The elderly population growth is very fast compared to other age groups. This composition is caused by a decrease in the fertility rate (births) and mortality (death), as well as an increase in life expectancy, which changes the structure of the population as a whole. WHO [1] explains that there are 901 million people aged 60 years or over, comprising 12% of the world's population. By 2030 the number of people aged 60 years or over is expected to grow by about 56% from 901 million to 1.4 billion, and the elderly population will continue to grow in 2050 which is estimated to more than double in 2015, reaching 2.1 billion [1]. In Indonesia, Kemenkes [2] mentioned that it is estimated that in 2017 there were 23.66 million elderly people (9.03%) and it is predicted that the number of elderly people in 2020

(27.08 million), 2025 (33.69 million), 2030 (40.95 million) and 2035 (48.19 million).

Living your old age with full happiness is the dream of every person. Getting old is a process that every individual must live and be grateful for stated by Wahyunita [3]. Some people think that old age is a period of biological decline that cannot be avoided by every human being. The decline in biological function can affect various aspects of life including physical, psychological, and social aspects. Decreased physical function, such as feeling tired quickly, decreased stamina, wrinkled skin, gray hair, decreased sensory function, loss of teeth and calcification of cartilage. Psychological changes include changing emotions, frequent anger, feelings of high self-esteem, irritability, and decreased memory [4]. The elderly will experience a decrease in their social role and reduced social life. Changes in social roles, family responsibilities and health status affect the life plans of the elderly [5]. If the elderly cannot

adapt well, obstacles will arise in their daily activities. Therefore, an elderly person often needs help and support from others, especially from those closest to him such as family, friends and social groups of his age[6].

One of the changes in social roles that have a big impact on the elderly is retirement. The elderly will lose material rewards in the form of salaries and facilities, and non-material such as awards, social status and achievements. A person who has been dependent on position, power, honor and social status for a long time, when that status is relinquished, he sometimes not ready to adjust that he is no longer working. The fear of retiring can cause anxiety, tension or stress, mental and physical problems. This is known as post power syndrome[7].

Elderly who are experiencing retirement must adjust to their role and spare time. Adjusting retirement activities to a person can work well if it has been planned in advance. The life satisfaction of a retired person can be seen from the health status, the choice to continue working, and sufficient income as well as a good living environment for the elderly [5]

The Indonesian Gerontology Association (IPEGARI) together with the Active Aging Consortium Asia Pacific (ACAP) at the Active Aging Conference & Expo July 19-21 2019 appealed to various parties to start raising concern for the elderly. The elderly are a vulnerable population who need attention because of their limitations in meeting their daily needs. However, IPEGARI and ACAP raised the concept of "Dependent Aging" in which the elderly must be kept healthy and active.

Inadequate adjustment to the changes that occur during retirement causes a person to position himself as someone who still has a job, which makes his self-actualization still exist. He will act, behave, behave like a person who still has power. One example is the fulfillment of daily needs. A person who is not ready or ready to accept change will still behave as he did when he still had a position. All the fulfillment of daily personal needs is left to other people or other parties. In other words, all the fulfillment of their daily needs is still very dependent on the help of other parties. The dependence on doing ADL in the elderly can be caused by several causes such as age, physiological health, cognitive function, psychosocial function, mental status, biological rhythm, stress level, and health services. In 1990 the idea arose as a form of concern from the members of the Ursulae Sanctae Societas International (AUSSI) Alumnae which is an organization of Ursulin school graduates to establish comfortable housing for the elderly, so that on November 16, 1996, Graha Werdha AUSSI Kusuma Lestari was officially opened. This facility is managed on a non-profit basis by AUSSI members under the umbrella of the AUSSI Kusuma Lestari Foundation. The number of elderly people is currently \pm 55 people. The elderly who live at Graha Werdha AUSSI Kusuma Lestari are caused by several factors, among others, the desire of the elderly themselves who do not want to disturb their children or other family members, the busyness of children or families living outside the city and abroad, or because of the desire of families who have an economic background who are able and want their family members (elderly) to be

well cared for, so they leave the elderly at Graha Werdha AUSSI Kusuma Lestari Bukit Cinere Indah. At that time, some of these elderly people worked as pilots, doctors, teachers, lecturers, company leaders, private employees so that their views at work sometimes arise at retirement age. Graha Werdha AUSSI Kusuma Lestari Bukit Cinere Indah is a modern nursing home that is shaped like an apartment and is quite "wow" for the size of a general home. This elderly's home environment is well organized, surrounded by beautiful gardens. Graha Werdha AUSSI Kusuma Lestari is built on a land area of 6000 m² which has adequate facilities and facilities such as a luxury hotel consisting of several room classes: VVIP, VIP, and standard room. Guaranteed bedrooms and bathrooms, gardens, gymnasiums, dining rooms, chapels, salons, halls, recreation areas and health services. For health checks, they have physiotherapy facilities and cooperate with Puri Cinere Hospital, and once a week they bring in a hair stylist to cut or blow the hair of the elderly.

The elderly are accompanied and served by doctors, nurses and assisted by several trained maids who have training certificates with primary nursing care methods, namely assignments given to nurses or maids to take full responsibility for 24 hours from admission to discharge. Primary nursing methods encourage the independence and responsibility of nurses or pramurukti in providing nursing care so as to create a strong and continuous relationship between patient and nurse. Based on the results of the sharing of researchers with several pramurukti, they know and understand what the elderly are unable to do and tell the benefits for health if the elderly do not want to do activities to help themselves. Graha Werdha AUSSI for the "well-off" elderly, both from the elderly themselves and from families who can afford to pay dearly, so that it demands the attitude of nurses or pramurukti more to serve totally and finally the tendency of post power syndrome in the elderly is formed. Based on the results of interviews with elderly at Graha Werdha AUSSI, it was found that there were some elderly with working experiences as pilots, doctors, teachers, lecturers, company leaders, private employees for a period of 5 to 20 years and some elderly people who had highly educated children, worked and lived abroad. The behaviors displayed are irritability, irritation, anxiety, feeling useless, depression, and also continuing to reminisce about their past experiences. The elderly feel they have a pension salary and have an adequate family and still have a social role that is carried out before retirement so that some activities they want to be served like when they are still working while these activities can actually be done independently, for example when eating, some elderly people just sit quietly at the dining table waiting there those who serve, some do not eat if they are not fed. When they bathe, they only want to be bathed. Even if they are not invited to walk, the elderly will just sit there. In fact, they are still physically capable of independent activities.

Based on the phenomenon data obtained in the elderly at Graha Werdha AUSSI Kusuma Lestari Bukit Cinere Indah and supporting active aging, the researchers are interested in conducting research on the relationship between post power syndrome and the fulfillment of ADL needs in the

elderly. It is hoped that the nurses can provide proper and correct nursing care and provide appropriate interventions for the elderly with post power syndrome so that the elderly can overcome or reduce the occurrence of post power syndrome.

1.1. Related Work

The level of independence of the elderly in fulfilling ADL (activity of daily living) at the Elderly Posyandu, Tegal Sari III, Medan Area, by Ritonga [8], in 2017. The research design was descriptive. Respondents in the study were elderly people who had health complaints and a history of disease with a total sample of 33 people, taken using total sampling. The results of this study were the elderly who were included in the total independent 60.6%, depending on the lightest 12.1%, the light dependent 6.1%, the moderate dependent 12.1%, the dependent weight 3.0%, and the total dependent 6.1% were assessed using the Katz index. Elderly people are expected to continue to carry out daily activities so that body parts can move and there is no interference with immobility, while still controlling their health to the posyandu, puskesmas or other health services. Relationship of social support and adjustment at the retirement of structural officials in the Provincial Government of Bali, by Biya [9] in 2016. The subjects used are retired structural officials in the Bali Provincial Government, aged 57-58 year. The number of samples in this study amounted to 105. The reliability of the social support scale was 0.910 and the reliability of the adjustment scale at retirement was 0.894. The result of the normality test for the social support variable is 0.200 and the self-adjustment variable at retirement is 0.025. The result of the linearity test of the social support variable and the self-adjustment variable at retirement is 0,000. The analytical method used is the Pearson product moment correlation analysis. The result of the correlation test in this study was 0.717 ($p = 0.000$). Based on the research results, it can be seen that there is a positive and significant relationship between social support and adjustment at the retirement of structural officials in the Bali Provincial Government.

1.2. Our Contribution

This paper presents verify the correlation between post power syndrome with the fulfillment of ADL needs.

1.3. Paper Structure

The rest of the paper is organized as follows. Section 2 explains about the method of the study conducted. Section 3 presents the results. Section 4 presents discussions. Finally, the conclusion and direction for future research will be presented in Section 5.

2. METHOD

Design

This study is using a quantitative approach with cross sectional design by collecting data through filling the questionnaires. There are post power syndrome as the independent variable and ADL's fulfillment as the dependent variables.

The population in this study were all the elderly in Graha Werdha AUSSI. The hypotesa null is there is no correlation between post power syndrome and the fulfillment of ADL needs of the elderly. While the alternative hypotesa is there is correlation between post power syndrome and and the fulfillment of ADL needs of the elderly.

Sample

The sampling technique used in this study is total sampling, which is a sampling technique where the number of samples is equal to the population by fulfilling homogeneity in accordance with inclusive and exclusive criteria. In this study a sample of 57 respondents. From the 57 questionnaires distributed, 45 questionnaires were completed in full by respondents. 12 respondents did not fill out the questionnaire because it did not fit the specified criteria. The place of this research was conducted at Graha Werdha AUSSI Kusuma Lestari, on 8 October to 25 November 2019.

This Graha Werdha AUSSI Kusuma Lestari was built on a land area of 6,000 m² and has a room capacity that can accommodate around 60 elderly people. The atmosphere is so calm and the air is still cool for a place close to Jakarta. Graha Werdha is equipped with an ambulance, multipurpose room facilities, dining room, chapel, salon and polyclinic which is guarded by a security guard for 24 hours. In the morning the elderly are invited to choose to participate in several activities, such as sports to move their bodies, yoga, playing music, angklung, painting, and origami. Elderly people who are no longer able to exercise will sunbathe in the front yard of the orphanage. The front yard of the orphanage is quite large and there is a vehicle parking area.

Data collection methods used by researchers are:

- a. Researchers received a Description of Ethical Approval No. 025/KEPPKSTIKSC/V/2019 from Ethics Comission of Health Research and Development Sint Carolus School of Health Sciences and a letter of introduction for a research permit from STIK Sint Carolus to the Chairman of Graha Werdha AUSSI Kusuma Lestari.
- b. The researcher asked permission from the Chairman of Graha Werdha AUSSI Kusuma Lestari to conduct research and explain the purpose and objectives of the study.
- c. Researchers introduce themselves, contract time and approach the elderly and provide an explanation of the aims and objectives of the study using a research questionnaire.
- d. Researchers screened the elderly who experienced problems with post power syndrome on the need for activity of daily living (ADL) to become research respondents.
- e. After screening the elderly, if the respondent has agreed, they sign an informed consent sheet.
- f. Researchers distributed questionnaires to respondents.

This research is a correlation study with cross sectional method. The data source used in this study is a closed questionnaire that has provided the answer so that respondents only need to check the checklist (√) in the column provided. Respondents filled in the Post Power Syndrome questionnaire with 18 questions and ADL questionnaire with 16 statements using questionnaires adopted from Oktavia [10] and Inayah [11].

After the data is collected, data processing is carried out through the stages of editing, coding, data entry or processing with the SPSS program and cleaning, as well as data analysis using normality test analysis, univariate analysis and bivariate analysis with Chi-Square statistical tests.

a. Univariate analysis

This analysis is used to determine the distribution and percentage description of each variable used in this study, the dependent variable and the independent variable which includes post power syndrome and the fulfillment of activity of daily living (ADL) needs.

b. Bivariate analysis

Bivariate analysis in this study was to determine the relationship between post power syndrome and the fulfillment of ADL needs of the elderly. The statistical test used in this study is Chi Square.

3. RESULTS

3.1. Univariate Analysis

The univariate analysis will be presented the frequency Distribution of Respondents by Age, Gender, Education, Occupation, Post Power Syndrome, and ADL.

Table 1. Frequency Distribution of Respondents by Age, Gender, Education, Occupation in Graha Werdha AUSSI Cinere (n = 45) in 2019

Characteristics	Categories	n	%
Age	60-75 years	14	31.1
	76-85 years	31	68.9
	Total	45	100
Gender	Male	12	26.7
	Female	33	73.3
	Total	45	100
Level of education	Junior high school	3	6.7
	Senior high school	26	57.8
	Diploma	14	31.1
	Master	2	4.4
	Total	45	100
Occupation	housewife	12	26.7
	entrepreneur/busines	16	35.6
	civil servants	14	31.1
	Dentist	3	6.7
	Total	45	100

source: primary by researcher

Table 1 displays the frequency distribution of a total of 45 respondents based on age, sex, education, and occupation.

Most respondents aged 76-85 years as many as 31 respondents (68.0%). The residents of Graha Werdha were 33 respondents (73.3%) female, 33 respondents (73.3%) had high school education and 16 respondents (35.6%) had worked as entrepreneurs / entrepreneurs and pharmacist assistants.

Table 2. Frequency Distribution of Respondents by Post Power Syndrome in Graha Werdha AUSSI Cinere (n = 45) in 2019

Post Power Syndrome	n	%
Mild (Score < 25)	30	66.7
Moderate (Score 25-48)	13	28.9
Heavy (Score > 48)	2	4.4
Total	45	100.0

Table 2 displays the frequency distribution of respondents based on post power syndrome in Graha Werdha AUSSI Cinere. The highest frequency was obtained that respondents in the mild category were 30 respondents (66.7%).

Table 3. Frequency Distribution of Respondents by ADL in Graha Werdha AUSSI Cinere (n = 45) in 2019

ADL	n	%
Independent (Score > median 13)	33	73.3
Dependent (Score < median 13)	12	26.7
Total	45	100.0

Table 3 displays the frequency distribution of respondents based on activity of daily living in Graha Werdha AUSSI Cinere. The highest frequency was obtained that respondents in the independent category were 33 respondents (73.3%).

3.2 Bivariate Analysis

In this study, bivariate analysis used the Chi-Square test to find out whether there was a relationship between post power syndrome and meeting the needs of daily living activity (ADL) in the elderly.

Table 4. Relationship between Post power syndrome and Fulfillment of Daily Living Activity Needs for Lasia in Graha Werda AUSSI Kusuma Lestari Bukit Cinere Indah 2019 (n = 45) 2019

Post Power Syndrome	ADL				Total		p value
	Independent		Dependent		n	%	
Mild	24	80	6	20	30	100	0.043
Moderate	9	69.2	4	30.8	13	100	
Heavy	0	0	2	100	2	100	
Total	33	73.3	12	26.7	45	100	

Table 4 shows the relationship between Post power syndrome and meeting the needs of Activity Daily Living in the elderly at Graha Werda AUSSI Kusuma Lestari. Respondents who experienced mild post power syndrome were 30 respondents (100%) with independent ADL as many as 24 respondents (80%) and dependent as many as 6 respondents (20%). Respondents who experience moderate post power syndrome are 13 respondents (100%) with an independent ADL level of 9 respondents (69.2%) and depend on 4 respondents (30.8%). The lowest value of respondents who experience severe post power syndrome is 2 respondents (100%) with an independent ADL level of 0 respondents (0%) and depends on 2 respondents (100%). Based on the analysis using the chi-square test statistic, that there is a significant relationship between post power syndrome with ADL with p value 0.0043. Seen from the distribution of data of respondents with mild post power syndrome for ADL who can work alone (independently) as many as 24 respondents and the level of weight for ADL that depends on other people as much as 2 respondents. This shows that the lighter the post power syndrome, the higher the level of independence in meeting the ADL needs.

4. DISCUSSIONS

Fitria [12] stated that post power syndrome is experienced by those who have recently retired. "Syndrome" is a collection of symptoms and "power" is power. So post power syndrome is a collection of post-power symptoms where an individual feels a loss of social status, position, power, income and honor. Factors causing post power syndromes are personality, perception, health, readiness, social status and ability [13]. Individuals experience unstable mental conditions, negative self-concepts so try to maintain good physical and mental conditions to show their ability to work. Some symptoms of mild post power syndrome as mentioned by Cahyaningrum [14] with physical symptoms are faster graying of hair, wrinkles, moodiness, sickness, the body becomes weak. Symptoms of emotions: irritability, feeling worthless, wanting to withdraw from the social environment, easily depressed and anxious. Behavioral symptoms: shame meeting other people, easy to do an attitude of violence with others, showing anger where the individual is, aggressive and likes to attack.

Independence is the ability or condition where an individual is able to take care of or overcome his own interests without relying on others. The aging process in the elderly tends to have a potential level of independence in carrying out daily activities. ADL (Activity daily living) is an activity of doing routine daily work and is a basic activity for self-care. ADL is a measuring tool for assessing the ability of an elderly person to carry out activities independently or in need of

help from others. One measure used is the Katz index Maryam et al.[15]

Another study conducted by Ritonga [8] on the level of independence of the elderly in fulfilling the ADL (Activity of Daily Living) obtained elderly data included in total independence of 60.6%, depending on the lightest 12.1%, depending on the lightest 6.1 %, depending on moderate 12.1% depending on weight 3.0% and 6.1% dependent total assessed using the katz index. The elderly are expected to continue their daily activities so that parts of the body can move and there is no impaired immobility, they continue to control health at the posyandu, puskesmas or health services. This study is comparable to research conducted by Safitri [16] about the description of meeting the needs of activity of daily living (ADL) in the elderly in the Cokrokusuman village of Yogyakarta, obtained data of respondents who do activity of daily living (ADL) in the independent category that is as many as 30 respondents (53.6%). Judging from the results above, 53.6% of respondents can do it themselves in the independence of bathing which includes brushing their teeth, using soap all over the body, using shampoo when washing their hair alone without the help of their families. This is because physiological physiology is still normal so that the activity during bathing can be done independently.

Indriana & Yeniar [13] states that one of the factors that influence post power syndrome is adjustment. Individuals who have a good adjustment to retirement are healthy individuals, have a decent income, are active, are well educated, have extensive social relations including friends and family, and are usually satisfied with life before retirement. A person who does not have a good adjustment to retirement will emerge the characteristics of post power syndrome as stated by Fitria [12] happy to be respected, respected, requests are always obeyed, like being served, which requires recognition from others due to lack of self-esteem, " crazy "position and assume power is everything. Respondents in this study show a good adjustment, seen in the choice of items "feel more enthusiastic in carrying out activities and daily life" as much as 66.7%, "feeling satisfied with the work that has been achieved so far" as much as 68.9%, "do not feel stressed by the state after retirement "as much as 82.2%, and" feel involved in an activity at home or in Graha Werdha AUSSI "as much as 77.8%. Respondents can adjust and accept their situation, be able to live their old age with useful activities, be able to socialize with the surrounding environment and try to occupy themselves with various activities held at Graha Werdha AUSSI so as to reduce the consequences of post power syndrome.

The results of observations by researchers during the study found that the elderly still forced to fulfill the activity of daily living independently, for example, trying to go to the toilet independently even though their ability to walk was reduced. The willingness of the elderly to carry out activities independently is caused by past work factors where the elderly consider themselves still able to do work independently. Mangoenprasodjo [17] the high level of independence of the elderly is due to the fact that the elderly are accustomed to completing work in their households

related to fulfilling their needs. In some elderly people, they try to eat independently even though they are less able to put food into the mouth due to illness or weakness (Ediawati [18]).

Facts that were discovered by researchers during the study, some of the elderly said that the reason they participated in the activities held by Graha Werda was that their memory or cognitive functions would continue to function properly. The cognitive abilities of the elderly are also motivated by good education factors so that they are able to accept their condition and try to be involved in every activity. The higher the level of education that is owned by the elderly, the higher the knowledge of the elderly about healthy living that encourages the elderly to influence behavior in independence to meet the physical activity of the elderly and better activity of daily living (ADL) (Darmojo[19] and Surti & Warsono [20]).

Respondents also said that the reasons for participating in activities to reduce physical pain, for example, the body is not easily tired and sick, become passionate and enthusiastic in doing work and can socialize with other elderly people, are not easily offended, are not easily agitated and anxious, are not easily upset or aggressive by issuing harsh words. The results found that more respondents experienced mild post power syndrome. So that the symptoms of post power syndrome expressed by Fitria [12] such as looking young like at work, his body becomes strong and not sick, passionate, not easily offended, feel valuable and not despair, are seen still low by respondents.

Some elderly people said that being in Graha Werda AUSSI their health status was well considered because it was always checked by the health team routinely and was supported by families or children who always provided whatever costs needed by the elderly. The support received by the elderly provides motivation for the elderly to fulfill their ADL needs independently. This is as found by Lulu Lailan and Yeniar Indriana [21] about the relationship of social support and the tendency of post power syndrome obtained data that social support contributed effectively to the tendency of post power syndrome by 34.2%, where the value of $r = -0.585$, $P < 0.00$. The higher the social support possessed by retirees, the lower the tendency of post power syndrome that the retiree has, and vice versa. Social support requires adjustment from individuals. Individuals need social support from relationships that are built to face the transition in order to adjust to the changes that occur.

5. CONCLUSION

It is expected that the management of Graha Werda AUSSI will provide support for the elderly to adjust to retirement and be able to recognize the characteristics of post power syndrome in order to increase the fulfillment of ADL needs. Officers can also explore the psychosocial development of the elderly to identify post power syndrome.

It is expected that the results of this study can later be used as a reference in the learning process related to the relationship between post power syndrome and the fulfillment of the needs of elderly elderly activities of daily

living in Graha Werda AUSSI Kusuma Lestari Bukit Cinere Indah, due to the minimum reference related to the relationship between post power syndrome with meeting the needs of the activity of daily living (ADL) elderly. In addition, this research is also a reference to support the tridarma activities of tertiary institutions, namely community service especially in the gerontic subject to develop post power syndrome health knowledge by meeting the needs of elderly living activities of daily living. Family courses to improve family function and as a positive input in providing education about the elderly who experience post power syndrome associated with meeting the needs of daily activities.

The results of this study can add knowledge and experience for future researchers to conduct research with qualitative and quantitative methods by looking at other factors, for example, seen from physical conditions, religiosity or spirituality that are likely to further influence the relationship between post power syndrome with the fulfillment of the needs of activity of daily living in the elderly every day.

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