

# The Role of the Family in Improving the Welfare of the Elderly Population in Palu City

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The increasing number of the elderly population is a challenge for development because most are in the poor category and are no longer physically able to carry out economic activities. This study attempts to answer these challenges by looking at the role of families in improving the welfare of the elderly. The population of this study is residents aged 60 years and over, in the City of Palu, who are physically and mentally healthy and are able to answer questions. The sample was comprised of 100 people. The results showed that family social support and involvement in the development of elderly families can greatly affect the welfare of the elderly in the City of Palu.

**Key words:** *Elderly population, Family social support, Elderly family development, Elderly welfare.*

## Introduction

The phenomenon of the aging population in Indonesia is now taking place evenly, in almost all regions, including in the Central Sulawesi Province, and specifically, in the City of Palu. During the period of 2000–2015, the population aging process was marked by an increasing number and proportion of the elderly, which had grown significantly. This aging of the population not only leads to an increase in the average age of the population, but also leads to a decrease in the size of the working age population because the older generation is replaced by a smaller number of younger cohorts. This condition will adversely affect the potential labour input of the labour market (Carone et al., 2005).

In 2010, the Central Bureau of Statistics (BPS) showed that the elderly population in the City of Palu was comprised of 14,202 people or around 4.22 per cent of the total population of 336,540 people. In 2015, this number increased to 18,469 people or 5.45 per cent of the total population of 339,095 people. Any changes in the structure of an aging population require specific scrutiny and

adjustments, both at the policy making level, and at the individual level. At the individual level, the elderly population must make adjustments to the physical changes or decreased bodily functions which they experience, including changes in abilities, career, and psychologically, as well as to various changes in the social roles in society (Moelyono & Mangun, 1998).

There are two important problems faced in improving the welfare of the elderly population, namely health issues, and income issues or poverty. The results of the Moelyono et al. study (2017) in Palu City showed that around 53 per cent of the elderly population earned below the Palu City minimum wage of Rp. 1,900,000 per month. Moreover, around 16 per cent of the elderly population earned far from decent needs, with incomes below Rp. 1,000,000 per month. This condition reflects how the level of welfare of the elderly population in the City of Palu remains very low. Therefore, the family support for improving the welfare of the poor and elderly population is essential. In this case, the family can provide material support and care, such as giving money, food, clothing, and caring for illness.

The development of a community life that is more advanced and modern encourages some families, which are categorised as modern, to decentralise several family functions to other institutions outside the home. The family, which used to be a central place for carrying out various activities to fulfil the needs of its members, has now been decentralised to the point where the fulfillment of the needs of certain family members takes place outside the home. In line with the decentralisation process of the family functions, there has also been a reduction in the role of parents in caring for their children. The weaker and narrower role of parents in directing the process of growth and development of their children will cause the functionalisation of the role of each family member, and in turn, will lead to stretching the relations between generations.

Conversely, within traditional families, children are considered as a foundation in old age that will nurture and protect parents, if parents are no longer able. The public perception is that many children experience significant luck. In the past, children were considered a family resource and foundation, and were not an economic burden. A mother is not required to make a living, but rather, regulates the communication mechanism in the family, regulates the children's education, provides love for the children, and provides food for the family.

In an effort to improve the welfare of the elderly population, a decree was issued by the Coordinating Minister for People's Welfare, No.15/KEP/MENKO/KESRA/IX/1994 concerning the Establishment of the Institution of Elderly Institutions in Nation Life, as well as the decree of the State Minister for Population and the Head of BKKBN, No.12/KT.005/E3/1995 concerning the Formation of the Elderly Family Development Working Group (BKL). The establishment of the BKL is used as a guideline for the coaching of elderly families throughout Indonesia, including in the City of Palu.

In Palu City, the development of the elderly, especially outside the institution, including those fostered by several existing BKLs, has been carried out. Primarily, this includes those who are still productive, even though their outreach is limited. Moelyono et al. (2017), in their research in Palu City, found that out of eight districts, and 40 villages, the BKL were formed in only five districts, and ten villages. This fact indicates that the presence of the BKL in Palu City has not been able to carry out the main tasks and functions of fostering the elderly population that reaches all subdistrict areas. This research was conducted with the aim to explore the role of the family through the BKL container in improving the welfare of the elderly population, as well as studying the characteristics of the elderly population and the factors that affect its welfare in the City of Palu.

### **Literature Review**

There are three important aspects that need to be considered in providing limits on the elderly population: biological, economic, and social aspects (BKKBN, 2011). Biologically, the elderly population is a population that experiences a continuous aging process. It is characterised by a decrease in physical endurance that is increasingly vulnerable to disease, which can cause death. This is due to changes in the structure and function of cells, tissues, and organ systems. Economically, the elderly population is considered as a burden rather than as a resource. There are those who assume that old age no longer provides many benefits, and some even perceive it as a burden upon the family and the community.

The Republic of Indonesia Law No. 13 of 1998 concerning Elderly Welfare in Chapter I, Article 1, items 2, 3, and 4, states that: (1) being elderly is someone who has reached the age of 60 years and above; (2) a potential elderly is an elderly who is still able to do work and/or activities that can produce goods and/or services; and (3) an elderly with no potential is an elderly who is powerless to make a living, so his or her life depends upon the help of others. They crucially need support, especially from close family. Therefore, to ensure that the elderly population can enjoy their old age, full of happiness or to have a good quality of life, it is essential that they receive support.

Sarafino (2006) defines social support as a form of comfort, attention, appreciation or assistance which is received by individuals from others, either as individuals or groups. The form can be emotional support, appreciation, information, and instrumental. Moreover, it can even be in the form of social support, the source of which can come from individuals or individuals within the family or outside the family, and institutions, both government and non-government.

According to Ai Ju and Jones (1989), each community faces fundamental questions about how much family responsibility is given to the elderly population for emotional and financial assistance, the determination of residence, and care when ill. Form emotional assistance,

according to Horowitz (1985) in Jamshidi et al. (1992), is primarily maintaining the social interaction of the elderly with the family and the wider community. Kurada and Hauser (1981) revealed that the disruption of family relationships and friendships creates dissatisfaction with parents and sees them isolated from others.

In several studies, financial assistance for the elderly population shows the differences between developed and developing countries. Ermisch et al. (1981) suggest that the standard of living which can be achieved by the elderly population in developed countries is determined largely by the national per capita income, government transfers to the elderly population, and the tendency and ability of the elderly population to continue working. This fact can be seen from the results of the analysis conducted by Ai Ju and Jones (1989). In Western countries, social security is a common source of income for residents of Iran. For example, in the US in 1974, more than 90 per cent of families with elderly family heads received social security from the Government, and vice versa, direct income support from family members is not important.

The situation is different in developing countries. According to the World Health Organisation (WHO) survey, in almost all countries in Asia, the main source of income of the elderly population is derived from families. Even though the elderly population receives pensions from the Government and other income, the largest proportion of income is from their families (Ogawa, 1985).

A study by Ai Ju and Jones (1989), in the Association of Southeast Asian Nations' (ASEAN) countries, shows that children or grandchildren are the main source of material assistance for most of the elderly female population. Although, in Indonesia and Thailand, income from their economic activities is also relatively dominant. For men, the role of children and grandchildren is relatively lacking, but even so, in Singapore and Thailand, it remains one of the main sources of income. Furthermore, if distinguished between villages and cities, it is seen in all countries, that for rural areas, the main source of income proportion is from the economic activities alone, and the number of children and grandchildren is greater than in the cities. However, for the city, which comes from retirement or old age reserves, it is greater than the village.

In an effort to improve the welfare of the elderly population, the presence of the BKL at the village level is intended as a forum for the community to participate in empowerment activities for the welfare of the elderly population. In more detail, this BKL is a group of activities that move to improve the knowledge and skills of families who have elderly residents in their care. It provides care and empowerment of the elderly population, in order to improve their welfare. The goal is to improve the welfare of the elderly population through care and the role of the family. Through this BKL, families can be encouraged to play a role in providing economic support to the elderly population to be active in social activities, posyandu, and other activities.

Welfare is indeed difficult to define and measure. However, in general, welfare measures can be classified into two categories, namely objective, and subjective well-being (Diener & Scollon, 2003). Subjective well-being will be used in this research to measure the welfare of the elderly population. It describes an individual's evaluation of their life, pleasant emotions, meaningful feelings, satisfaction in areas such as marriage and work, and low levels of unpleasant emotions.

## Research Methods

This study was designed as an explanatory research by operating the elderly welfare variable as the dependent variable, and four independent variables of age, education, family social support, and the role of the BKL. The study population is the elderly population in the City of Palu, specifically, residents aged 60 years and over, who are physically and mentally healthy, and are able to answer questions sufficiently. Of the 18,469 elderly inhabitants of the City in 2015 — according to the latest data from the BPS — it is not yet known how many elderly residents qualify as the population. Therefore, the elderly residents who meet the criteria as subjects of the population will be registered in each village office that is sampled.

As this study uses a multivariate analysis, the number of the sample members is at least ten times the number of the variables studied (Hair et al., 1998; Sugiyono, 2014). In this case, the number of samples was set at 100 people, consisting of 50 people involved in the BKL activities, and 50 people who were not involved in the BKL activities. An empirical review was carried out using the multiple linear regression test approach to analyse the effect of the independent variables upon the dependent variable, with a significance level of  $\alpha = 0.05$ . The multiple regression model that is operated is as follows:

$$WE = b_0 + b_1OE + b_2EE + b_3FSS + b_4D_{BKL}$$

Where:

$b_0$	=	<i>A constant</i>
$b_1, b_2, b_3, b_4$	=	<i>Regression coefficient</i>
$WE$	=	<i>Welfare of the elderly</i>
$OE$	=	<i>The old of elderly</i>
$EE$	=	<i>Elderly education</i>
$FSS$	=	<i>Family Social Support</i>
$D_{BKL}$	=	<i>Dummy BKL</i>

The dependent variable is the level of welfare of the population. That is, the fulfillment of the physical, spiritual, and social needs of the population in the best way. The indicators are food, clothing, relationships inside and outside the family, security, and affection. The elderly well-being is measured by the answer scores for several questions related to the indicators used.

The independent variable consisted of age, education, family economic support, and one dummy variable, namely, the BKL. The elderly education is calculated through the length of time they attend school, representing the years of success. The family social support is a family presence that can make the elderly believe that they are loved, cared for, and are part of the family. The indicators are seen from aspects of emotional support, appreciation support, informational support, and instrumental support. The social support is measured by the score of the answers to several questions related to the indicators used. Whereas, the BKL is divided into two classifications: the elderly population concerned has entered a household fostered by a resident of an elderly population, and an elderly population that has not been fostered by an elderly family. The BKL is scored as follows: included in the fostered elderly family equates to 'one', and not included in the fostered elderly family equals 'zero'.

## **Results and Discussion**

### ***Characteristics of Respondents***

As presented in Table 1, the results of the data analysis of the characteristics of the respondents shows that 25 per cent are male, and 75 per cent are female. When divided according to the age groups, 49 per cent of the population is in the 60–64 age group, 17 per cent is in the 65–69 age group, 21 per cent is in the 70–74 age group, and 13 per cent are 75 years old and above.

**Table 1:** Characteristics of Elderly Respondents

	Total
<b>Gender</b>	
Male	25
Girl	75
<b>Age</b>	
60–64	49
65–69	17
70–74	21
75+	13
<b>Education</b>	
No school and did not graduate	4
Graduated from elementary school	46
Graduated from middle school	30
High school graduate	16
College	4
<b>Job status</b>	
Still working	31
Does not work	69
<b>Status of residence</b>	
My own house	75
House for rent	7
Reside with children or other family	18

**Source:** Primary data (processed)

In terms of their education, 76 per cent of respondents were elementary and junior high school graduates, around 16 per cent were secondary or high school or vocational school graduates, four per cent did not complete elementary school, and four per cent had graduated from college.

Regarding the characteristics of the working population, restrictions are used to carry out economic activities or help carry out economic activities with the aim of earning income, and both activities continue from before 60 years of age or are new economic activities after retirement. Meanwhile, the limit does not work with other activities that do not obtain an income, such as taking care of the household, retiring, and not working anymore. The results of this study found 31 per cent of the elderly population were still working, and the remaining 69 per cent did not work anymore. Among those who work, seven per cent belonged to the elderly population age group of 70–74 years, and four per cent belonged to the age group of 75 years and above. This finding, regarding the large number of elderly people who are still working, is supported by several previous studies, such as Sukamdani et al. (2000), Affandi (2009), Febriani (2013), and Andini et al. (2013).

The elderly who were selected as a sample, in general, live in their own homes at approximately 75 per cent, around 18 per cent live in their child's or another family member's home, and the remaining seven per cent rent a house. The characteristics of the respondents, as explained above, further strengthens how the welfare of the elderly population in the City of Palu remains at an alarming level.

### ***Elderly Perception About Family Social Support and Elderly Welfare***

The perception of the elderly population in relation to economic support, family social support, and the level of welfare is traced through items that cover the aspects related to the perceived variables. To determine the family's economic support, family social support, and the level of welfare of the elderly population, respondents were presented with items about their opinions and judgments about what was experienced and felt. The level scores for these variables are '1', being the lowest, and up to a score of '5', being the highest. The interpretation of the variable scores is: '1' means strongly disagree; '2' means do not agree; '3' means disagree; '4' means agree; and '5' means totally agree. Subsequently, the answer score value for each statement item is searched, and an interval is made to facilitate the assessment of the answer score. In this study, the number of interval classes is determined by five, which is calculated as follows:

$$CI = \frac{R}{MC} = \frac{5 - 1}{5} = 0.8$$

Where:

$CI$  = Class interval

$R$  = Range (highest value - lowest value)

$MC$  = The many classes

Then the intervals of the assessment criteria are as follows:

1.00 – 1.79 = Strongly disagree

1.80 – 2.59 = Agree less

2.60 – 3.39 = Quite agree

3.40 – 4.19 = Agree

4.20 – 5.00 = Strongly agree

### ***Family Social Support***

The perception of the elderly population towards their family's social support can be seen from the average score of the answers to the 13 statement items operated, as presented in Table 2.

**Table 2:** Elderly Perceptions of Family Social Support

Statement	N	Total Value	Average Value	Assessment Criteria
My family always provides my clothing needs.	100	333	3.33	Quite Agree
My family provides my daily food and drink needs.	100	338	3.38	Quite Agree
My family provides financial assistance to me every month.	100	339	3.39	Quite Agree
My family will pay for all my medical expenses if I become ill.	100	356	3.56	Agree
My family always reminds me to go to the Puskesmas on schedule.	100	358	3.58	Agree
My family always gives me credit for the things I do.	100	368	3.68	Agree
My family is always ready to take me to the activities I attend outside the home.	100	374	3.74	Agree
My family always provides a solution to every problem I face.	100	388	3.88	Agree
My family always reprimands me when I make mistakes.	100	388	3.88	Agree
My family tries to show feelings of love and their care for me.	100	408	4.08	Agree
My family does and says things that make me feel valued.	100	408	4.08	Agree
My family can be a place to share the joys and sorrows that I experience.	100	410	4.10	Agree
My family can accept it well when I submit complaints that I experience.	100	411	4.11	Agree
<b>Total</b>		<b>4491</b>	<b>44,91</b>	
<b>Average</b>		<b>345.46</b>	<b>3.45</b>	Agree

**Source:** Processed from primary data

Overall, the average score of the respondents' answers to the family social support variable was 3.45, residing in the 'agreed' category. This figure highlights that 69 per cent of the total respondents provided their agreement to all the statement items used to assess their family social support. However, if it is assessed based on the average score of the respondents' answers to each statement item, this shows that the value of the answer scores vary, ranging from 3.33 to 4.11. The lowest averages score of 3.33, in the category of 'quite agree', occurred in statement number one. This figure shows that approximately 66.6 per cent of the total respondents gave their approval of the item statement: 'My family always provides my clothing needs', which was used to assess family social support. Additional statements that were used to assess family social support and which obtained a scoring in the category of 'quite agreeing', occurred in statements

two, and three. Meanwhile, the highest average score of 4.11, in the ‘agreed category’, occurred in statement 13. This figure shows that around 82.2 per cent of the total respondents issued their consent to the item statement: ‘My family can accept it well when I submit complaints that I experience’, which was used to assess family social support. Other statements that were used to assess family social support, and which received a response in the ‘agreed’ category, also occurred in statements four through to 12.

### *Elderly Welfare Level*

The perception of the elderly population towards the level of welfare they experience can be seen from the average score of the respondents' answers to the 11 statement items, as presented in Table 3.

**Table 3:** Elderly Perception of Welfare Levels

Statement	N	Total Value	Average Value	Assessment Criteria
I am active in carrying out social activities, such as spirituality, dasawisma, and other social activities.	100	331	3.31	Quite agree
I am given responsibility when there are activities carried out by the family.	100	361	3.61	Agree
I have different clothes to wear when I sleep, at home, and at parties (to the office).	100	386	3.86	Agree
I am always asked for opinions when the family negotiates problems such as the marriage of children or grandchildren, the education of children or grandchildren, and other issues.	100	395	3.95	Agree
Family attention to me is very satisfying.	100	400	4.00	Agree
My communication with my children or grandchildren is very good.	100	403	4.03	Agree
My daily clothing needs were met well.	100	404	4.04	Agree
I receive family support when I want to do work that I enjoy.	100	406	4.06	Agree
Saya merasa senang dan bahagia tinggal bersama keluarga	100	409	4.09	Agree
My daily food and drink consumption needs are well met.	100	410	4.10	Agree
I receive the full attention of my family when I am sick.	100	416	4.16	Agree
<b>Total</b>		<b>4321</b>	<b>43.21</b>	
<b>Average</b>		<b>392.82</b>	<b>3.93</b>	Agree

**Source:** Processed from primary data

Overall, the average score of answers to the welfare level of the elderly population is 3.93, within the ‘agreed’ category. This figure shows that 78.6 per cent of the respondents provided their

agreement to all the statement items used to assess the welfare level of the elderly population. However, when viewed based on the average score of the respondents' answers to each statement item, the scores varied, ranging between 3.31 to 4.16. The lowest average score was 3.31, in the category 'quite agree', and contained in statement item one: 'I am active in carrying out social activities, such as spirituality, dasawisma, and other social activities'. This figure shows that 66.2 per cent of the respondents issued their agreement to the above statement, which was used to assess the level of welfare of the elderly. Whereas, the highest average score was 4.16, in the category 'agree', and on statement item 11: 'I receive the full attention of my family when I am sick'. This figure shows that 83.2 per cent of the respondents provided their consent to the above statement, which was used to assess the level of welfare of the elderly. Other statements that were used to assess the level of welfare of the elderly, and which received a response in the 'agreed' category, also occurred in statements two through to ten.

### ***Multiple Linear Regression Results***

The results of the estimation of the multiple linear regression model, as presented in Table 4, shows that all the variables affect the well-being of the elderly, except the age of the elderly provides an insignificant negative effect. This negative relationship means that the increasing age of the elderly will be followed by a decrease in the level of welfare of the elderly (KL). This finding is reinforced by the findings of Milonovic et al. (2013), that an increasing age will reduce the ability of physical activity, and the functional fitness of the elderly population.

**Table 4:** Results of Regression Coefficient Calculation

Model	Unstandardised Coefficients		Standardised Coefficients	t	Sig.
	B	Std. Error	Beta		
Constant	2.953	0.460		6.414	0.000
Elderly age	-0.006	0.004	-0.112	-1.408	0.162
Elderly education	0.028	0.010	0.238	2.857	0.005
Family social support	0.285	0.093	0.305	3.065	0.003
Involvement in BKL	0.193	0.073	0.273	2.642	0.010

Dependent Variable: Elderly Welfare

The variable of elderly education has a coefficient of 0.028, and a significance value of 0.005 (<0.05). It can be interpreted from this finding that the education of the elderly provides a significant positive effect on their well-being. Moreover, this finding is reinforced by the findings of Asfiryati et al. (2012), that the quality of the elderly is influenced by their level of education. Through education, the elderly are able to communicate and interact with the people around them. On the other hand, education can also have an indirect effect on the well-being of the elderly. The results of this study also indicate that the higher the level of education of the elderly

population, there is a greater tendency to decrease the percentage of the elderly population who work.

According to Becker (1975), and Simanjuntak (1985), each individual can increase his or her income through increased education. Education is considered as an investment in which compensation can be obtained over a period of time, in the form of increased work income. This is also in line with the findings of Giles et al. (2012), that an increase in the education of the elderly population reflects the accumulation of the household wealth, and the lifetime income or retirement benefits are relatively high.

The family social support variable has a coefficient of 0.285, and a significant value of 0.003 ( $<0.05$ ). It can be interpreted that family social support has a significant positive effect on the welfare of the elderly. This follows similar findings by Pratiwi (2015), and Mulyati (2018), that social support has a significant influence on the quality of life of the elderly or the psychosocial well-being of the elderly. Furthermore, Sarafino (2006) asserts that social support is a way to show affection, care, and appreciation for others. The individuals who receive social support will feel loved, valued, valuable, and a part of their social environment.

The involvement variable in the BKL, which is a dummy variable, as previously mentioned, has a coefficient of 0.193, and a significant value of 0.010 ( $<0.05$ ). From this figure, it can be interpreted that the elderly involved in the BKL activities have a higher level of welfare. This finding is in line with the BKL's goal, which is to improve the welfare of the elderly population through caring, and the role of the family. One of the BKL activities is spiritual development through religious and social community activities. Such activities, according to Kiiket al. (2018), have a positive relationship with the quality of life, and a lower chance of experiencing pressure on the elderly population. The same finding was revealed by Yulianti et al. (2018), that social activities are proven to be scientifically beneficial to slow the aging process.

### ***Research Limitations***

Beyond the variables operated in this study, it was realised that there are still a number of non-economic variables that have a large influence in accelerating the processes of the social and economic activities which are carried out by the elderly population in Palu City. Among the non-economic variables are social capital, and intellectual capital. These forms of capital are proxies of the capacity and capability of the elderly population, both individually, and in groups, in their efforts to maintain, and improve their quality of life. However, unfortunately, the non-economic variables have not been operationalised in this study. Consequentially, this becomes a limitation of the study.

## Conclusion

Based on the discussion of the results of this study, it can be concluded as follows:

1. The condition of the elderly population in the City of Palu, as represented by several characteristics of the respondents, indicates the existence of a level of welfare or quality of life that remains alarming.
2. The perception of the elderly population towards family social support is categorised as either 'good' or 'agree'. However, if viewed based on the average score of the respondents' answers to each statement item, at the lowest, there was an average score of 3.33, in the category of 'good enough' or 'quite agreeable', on statement number one: 'My family always provides my clothing needs'.
3. The perception of the elderly population on the level of welfare, as a whole, is categorised as 'good' or 'agreed'. However, when viewed based on the average score of the respondents' answers to each statement item, at the lowest, there is an average score of 3.31, on statement item one: 'I am active in carrying out social activities, such as spirituality, dasawisma, and other social activities'.
4. For the elderly population, working is not their first choice when they can obtain a non-work income in the form of social security or family economic support.
5. The perception of the elderly population towards family social support, and the welfare of the elderly in Palu City, is in the interval of good judgment or agree.
6. Education, family social support, and the involvement of the elderly in the BKL activities have a significant influence on the level of welfare of the elderly.

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