



SOCIAL FUNCTION LEVELS OF FAMILIES THAT LIVE WITH ELDERLY IN KEDUNGSUREN VILLAGE

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ABSTRACT

10,34% of the population of Central Java Province are the elderly people. The increasing number of the elderly people results in the indirect negative impact on the families values which influence the drop of the elderly people's welfare, lack of their role and status in the families, and loss of supports from their families. This research aims to explore the levels of the social functions of their families in which the elderly people live in Kedungsuren Village seen from the points of views of adaptation, partnership, growth, affection, and resolve. This research was conducted with the domain of quantitative design with a descriptive survey method. The total sampling technique was applied to 82 respondents. The instrument in the data collection was an APGAR family questionnaire. This research used a univariate analysis. The results of the research show that 61 respondents (74,4%), with whom the elderly people live, had less-healthy living conditions while 49 respondents (59,8%) were sometimes satisfied with social function adaptation. Similarly, 44 respondents (53,7%) were sometimes satisfied with the partnership of social functions and 35 respondents (42,7%) were always satisfied with the growth of social functions. 50 respondents (61,0%) were always satisfied with the affection of social functions. In addition, 72 respondents (87,8%) were always satisfied with the resolve of social functions. The families are expected to be able to improve communication, supports, and attention given to the elderly people in order to improve the families' and the elderly people's social functions. The level of social function of families living with the elderly in Kedungsuren Village is dominated by the level of unhealthy social function

Keyword: families, social functions, families APGAR

INTRODUCTION

Elderly is the last stage in human development which is marked by gradual physical, mental and social decline (Azzah, 2011). The development of the elderly population in Indonesia in 2000 is projected at 7.28% and in 2020 it will reach 11.34% (Padila, 2013). Data from the United States Census Bureau estimates that Indonesia will experience the world's largest elderly population growth in 1990-2025, amounting to 414% (RI Ministry of Health. (2017). The number of elderly people in Central Java, the percentage of the elderly population is 10.34% (RI Ministry of Health. (2010).

The number of elderly people in Kendal Regency reaches 0.13% of the elderly population in Central Java BPS. Kendal, (2014). An increase in the number of elderly people can have an indirect negative impact, this has an impact on changes in family values that have a negative impact on the welfare of the elderly, decreases the role and status of the elderly in the family, and begins to see the loss of forms of family support for the elderly. (Padila.,2013).An increase in the number of elderly people will also have a major impact, namely an increase in the dependence of the elderly (Anita, 2013).

The increasing number of elderly people in Indonesia causes social problems in the elderly, based on the background image of the problem, where there are social problems in families who live with the elderly. Seeing this phenomenon, the researchers were interested in examining the level of social function of families living with the elderly in Kedungsuren

Village. The purpose of this study is to identify the level of functionSocial Family Living with Elderly in Kedungsuren Village.

The family is a small and open social system consisting of a series of parts that are highly interdependent and influenced by internal structures and the external environment. Social function is a process of interaction with the social environment that begins at birth and ends after death (Friedman. M, 2010). Family members learn discipline, culture, norms through interactions in the family so that individuals are able to play a role in society. Failure to socialize in the family, especially if the norms and behaviors learned are different from those in society can result in failure to socialize in the community (Maryam, S. 2011).

METHOD

This type of research is descriptive, the method used in this research is descriptive survey using total sampling technique. The population in this study were 82 respondents who lived with the elderly aged 60 years and over in Kedungsuren Village. The criteria that have been defined are inclusion and exclusion criteria. The inclusion criteria in this study were families who were able to communicate well and families who lived with elderly people aged 60 years and over. The exclusion criteria in this study were families who were unwilling to become respondents. The research tool used in this research is the APGAR Family questionnaire. Data analysis using univariate analysis. This research was conducted in Kedungsuren Village. When the research was conducted in January 2017.

RESULTS AND DISCUSSION

Table 1.

The level of social adaptation function, Partnership, Growth, Affection, and Resolve for families living with the elderly (n=82)

Variabel	f	%
Adaptasi		
Almost never	20	24,4
Sometimes	49	59,8
Always	13	15,9
Partnership		
Almost never	4	4,9
Sometimes	44	53,7
Always	34	41,5
Growth		
Almost never	14	17,1
Sometimes	33	40,2
Always	35	42,7
Affection		
Almost never	4	4,9
Sometimes	28	34,1
Always	50	61,0
Resolve		
Almost never	2	2,4
Sometimes	8	9,8
Always	72	87,8

Table 2.
 The Level of Social Function of Families Living Together with the Elderly (n=82)

Variabel	f	%
Family Social Function		
Healthy	19	23,2
Less Healthy	61	74,4
Sick	2	2,4

Discussion

Social function levels of families that live with elderly in kedungsuren village

Based on the table of research results on the level of social function of families living together with the elderly, it is found that the level of social function of families living with the elderly has problems with social function. The results showed that the social function of the less healthy family was more dominant with 61 (74.4%) respondents. Families only occasionally help the elderly because they can still do activities independently. When the elderly are sick, the family only provides medicine in the shop, is rubbed or massaged, and is not immediately checked by the nearest health service. The family always accepts and forgives their parents even though sometimes the elderly tend to be fussy, sometimes they are more irritable and compare with family members another.

The family feels happy to be with the elderly. The family always supports whatever is done or activities that the elderly do if the elderly are in good health, the elderly also feel bored when they are just at home so the family lets the elderly do the activities they do (Handayani, 2013). The social function (Maryam, 2011). Is a process of interaction with the social environment that begins at birth and ends after death. Family members learn discipline, culture, norms through interactions in the family so that individuals are able to play a role in society. Research that supports this research is (Helena, 2010) About the relationship between family function and anxiety in the elderly. Elderly Family Functions of the 46 respondents studied showed the results of unhealthy family functions as many as 21 respondents (45.65%).

This is in accordance with the theory that if family functions can be carried out properly, a prosperous family can be realized. One of the prosperous families is having a harmonious, harmonious and balanced relationship between members and between family and society and the environment (Samper, 2017). If the prosperous family is successfully realized, it means that a healthy family has been created, both physically, mentally and socially. Conversely, health conditions also affect family function (Susilawati. F, 2015).

Social function Adaptation of families living with the elderly

Based on the results of the study, it was found that most of the families were only satisfied sometimes to help the elderly when they needed help with the number of respondents was 49 (59.8%). Families only occasionally help the elderly because they can still carry out their activities independently. Families often provide cooking assistance and washing clothes belonging to the elderly. Explains that adaptation is the ability of family members to adapt to other family members, as well as acceptance, support and suggestions from other members (Anita. R, 2013). Family support is the attitude, action and family acceptance of the sick sufferer. The family also functions as a support system for its members and family members perceive that people who are supportive, are always ready to provide help with assistance if needed. in his research on Family Support with the Quality of Life of the Elderly at the Wisma Budi Sejahtera Social Home for the Tuna, Banjarbaru. (Wafrof. S, 2016). It shows that there is

a relationship between family support and the quality of life of the elderly at the Wisma Budi Sejahtera Social Home for the Tuna, Banjarbaru. These results are The elderly who have a low level of family support are 46%, the quality of life is moderate as much as 72%, so it can be concluded if support given a good family to the elderly will improve the quality of life of the elderly. This is because the family does not pay for the elderly while in the orphanage and finds a shortage of the necessary facilities and equipment. And this is because the elderly are satisfied with what they have achieved in life and have the opportunity to love and be loved and also have many friends in their lives.

Social function of family partnership living together with the elderly

Based on the results of the study, it was found that families sometimes feel satisfied with the way the family talks about and expresses problems in the elderly with 44 respondents (53.7%). Families only sometimes feel satisfied when talking about problems because if the elderly have problems, for example, they are sick, but the elderly do not want to be examined but the elderly continue to complain. Even so, the family still communicates well and provides assistance if needed. Partnership or partnership (None. N, 2016). which describes communication, sharing, complementing each other between other family members. Another opinion about partnership or partnership (Yuli. R.. 2014.) The partnership assessment is by assessing the level of satisfaction of family members with communication and deliberation in solving a problem. Supporting research (Adinegara, I.N, 2014) Aabout the relationship between family communication patterns and depression levels in the elderly in Leyangan Village, East Ungaran District, Semarang Regency. The results showed that respondents who had functional communication in the mild-moderate category were 70.4%. The conclusion of this research is that the more functional family communication is, the lower the level of depression in the elderly.

The social growth function of families living with the elderly

Based on the results of the research conducted, it was found that the family was always satisfied to accept and support the wishes of the elderly to do activities with a total of 35 (42.7%). The family is always supportive and never forbids the elderly if healthy elderly people want to do activities they enjoy. These activities include gathering with friends, going to other children's homes, reciting the Koran and working in the garden as long as healthy elderly people are not sick.

Growth describes family support for new things that family members do (Sangian. M, 2017). Activity theory, which states that elderly people who are always active and participate in many social activities are successful elderly people. Another activity theory that is similar (Wafrof. S, 2016) This theory states that successful aging depends on how the elderly feel satisfied in carrying out activities. The behavior to maintain these activities is more important than the quantity and activities carried out (None, N. (2016). Study on the role of the family as a care giver for the management of activities in the elderly using the NIC (nursing intervention classification) and NOC (nursing outcome classification) approaches. It was found that most of the respondents had a good role, namely 45.5% who had a fairly good role. The results of data analysis showed that the role of the family as a care giver has an influence on the management of activities in the elderly

The social function of family affection who lives with the elderly

Based on the results of the study, it was found that the family was always satisfied when the elderly expressed the effects and responded to the elderly's emotions, such as anger, sadness

or love with 50 respondents (61.0%). At the time of research, the family said that they always accept when the elderly compare their family with other family members, because it is natural that when they get old they will return to a period like children, which is fussy. The family also said that the elderly are parents themselves who have to accept their situation. The function of affection or affection, which describes the interaction between family members or is one of the basic human needs that is carried out in the family by creating an atmosphere of brotherhood or maintaining feelings by providing affection and security and giving attention to family members. Affective function is a self-image of family members, feelings of belonging and belonging in the family, family support for other family members, warmth created in family members and how the family develops mutual respect (Andarmoyo, S. 2012). Relationship between family emotional support and self-acceptance in the elderly in Watutumou III Village. The results showed that there was a relationship between family emotional support and self-acceptance in the elderly in Watutumou III village. Based on the data obtained through research in Watutumou III Village, it shows that the percentage of respondents who have good family emotional support is 55%.

The social function resolves a family living together with the elderly

Based on the research results, it was found that the family was always satisfied with the way the elderly and friends spent time with 72 (87.8%) respondents. The data obtained during family research says that families feel happy to be with their parents and friends. although there are respondents who feel unhappy because the elderly have problems with communication perception disorders. which describes the satisfaction of family members about togetherness and time spent with other family members (Baroroh, B.D, 2012). A similar theory was expressed (Wafrof. S, 2016). Regarding Togetherness (Resolve), namely by assessing the level of satisfaction of family members with togetherness in sharing many things in the family. Supporting research is research (Rahayu, 2016). On the relationship of social interaction with the quality of life of the elderly in BPLU Senja Cerah, North Sulawesi Province. The results of the study are that there is a relationship between social interaction and quality of life of the elderly, the most social interaction is the category of good social interaction, namely 62.5%. This study found that if social interaction is good, the quality of life is high and vice versa if social interaction is sufficient, the quality of life is also sufficient

CONCLUSION

The level of social function of families living together with the elderly in the village of Kedungsuren is dominated by the level of unhealthy social function with a total of 61 (74.4%) respondents. The social adaptation function of families who live together with the elderly in the village of Kedungsuren is dominated by answers that are sometimes satisfied with the number of 49 (59.8%) respondents. The social function of family partnerships who live together with the elderly in the village of Kedungsuren is dominated by answers that are sometimes satisfied with 44 (53.7%) respondents. The social growth function of families who live together with the elderly in Kedungsuren village is dominated by the answers, always satisfied with 35 (42.7%). The social affection function of families who live together with the elderly in the village of Kedungsuren is dominated by answers that are always satisfied with 50 (61.0%) respondents. The social function of resolving families who live together with the elderly in the village of Kedungsuren is dominated by the answers are always satisfied with 72 (87.8%) respondents

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