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Self-Esteem Among the Elderly in West Kalimantan

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ABSTRACT

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Elderly Low self-esteem Mental Health Indonesia is a country that has an old population structure until 2020 it has increased to 10% of the total population. Changes due to aging tend to cause health problems both physical health and mental health. Low self-esteem is a mental health problem that is prevalent in the elderly, so several factors are known to contribute to the decline in elderly self-esteem. The aims of this study were to determine the factors that influence the increase in selfesteem in the elderly. The design used was cross-sectional and the population of this study was the elderly in PSTW X in West Kalimantan totaling 98 elderly with sampling. The results showed that the factors of gender and education. Meanwhile, other factors such as age, marital status, work history, reasons for entry and length of time at the institution did not contribute to increasing the self-esteem of the elderly. Based on the bivariate analysis with the chi-square test, there is a relationship between gender and education with self esteem (p=0.001; p=0.000). It is hoped that this study can be carried out by providing interventions that can increase self-esteem in the elderly and reduce the long-term consequences of the elderly who experience low self-esteem.

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ABSTRAK

Negara Indonesia merupakan negara yang memiliki struktur penduduk tua hingga tahun 2020 telah meningkat menjadi 10% dari totoal penduduk. Perubahan akibat menua cenderung menyebabkan masalah kesehatan baik kesehatan fisik dan kesehatan mental. Harga diri rendah merupakan masalah kesehatan mental yang banyak dijumpai pada lansia sehingga beberapa faktor diketahui berkontribusi dalam menurunnya harga diri lansia. Tujuan studi ini untuk mengetahui faktor yang memengaruhi harga diri pada lansia. Rancangan penelitian yaitu desain cross-sectional dan populasi penelitian ini adalah lansia di PSTW X di Kalimantan Barat berjumlah 98 lansia dengan total sampling. Hasil penelitian didapatkan bahwa faktor jenis kelamin dan pendidikan. sementara itu, faktor lainnya seperti usia, status perkawinan, riwayat pekerjaan, alasan masuk serta lama dipanti tidak berkontribusi terhadap peningkatan harga diri lansia. Uji chisquare yang dilakukan menunjukan hubungan yang signifikan antara jenis kelamin dan pendidikan (p= 0,001; p-value = 0,000) dengan harga diri pada lanjut usia. Diharapkan fasilitas panti dapat menyediakan intervensi yang dapat meningkatkan harga diri pada lansia serta dampaki lain dari lansia yang mengalami harga diri rendah.



INTRODUCTION

Indonesia is a country that has had a rapidly growing elderly population in recent years. The rapidly increasing number of elderlys over the last few decades has had a significant impact on people's political, economic, and social functioning in industrial and developing areas(Tanyi et al., 2018). Health systems must be modified to accommodate

the increased demand for medical resources as the worldwide population of the elderly grows. Several prior research examined the effects of an aging population on health, but they primarily looked at specific countries and diseases (Cheng et al., 2020).

The number of elderlys in Indonesia is of particular concern so that the welfare of the elderly is met. According to the Elderly Population Statistics 2019, elderlys have doubled from 1971 to 2019, followed by young elderly who dominate, reaching 63.82%. Five provinces have an elderly population structure that comes 10%, including DI Yogyakarta, followed by Central Java, East Java, Bali, and West Sulawesi. Kalimantan is also one of the provinces that has a large number of elderlys.

Elderly experience the aging process naturally. Most of the elderly live with one or more health problems, affecting their quality of life(Hu et al., 2016). The elderly experience changes in functional abilities that require adaptation both physically and mentally(Maresova et al., 2019). Psychosocial problems are one of the indicators of mental health that must be overcome in the elderly. Some of the psychosocial and mental health problems experienced can affect the adaptation of the elderly in the aging process. Anxiety and depression are the most common mental health problems associated with the deteriorating physical health of older people (Biering, 2019). Decreased quality of life is also a mental health problem experienced by the elderly. Selfesteem is an essential experience in the life of the elderly (Hunter et al., 1982).

Low self-esteem has several effects on the elderly. Several causes can trigger low self-esteem in the elderly. If it is too late to overcome this, the elderly can experience withdrawal, violent behavior, depression, and suicide(Narullita, 2017). Low self-esteem is a risk factor for depression in the elderly that occurs in both developed and developing countries, produces various behavioral changes, and increases the risk of depression and suicide in the elderly (Ali et al., 2016)

Sociodemography is one of the risk factors that affect self-esteem in the elderly. Another reports that there is a gap between age and self-esteem with men and women(Ogihara & Elmer, 2020). There is a relationship between academic education and self-esteem in the elderly(Franak et al., 2015). Self-esteem has been identified in various domains and is correlated with several factors, including sociodemography, physical health characteristics, cognitive abilities, selfregulation, and social. Inclusion (Wagner et al., 2013). Sociodemographic factors are factors that contribute to an increase in the self-esteem of the elderly

The decline in self-esteem occurs in various countries that have an elderly population. Research reveals that the elderly in Germany, on average, have low self-esteem as they get older and even ancient (Wagner et al., 2013). Meanwhile, in Spain, the decline in the self-esteem of the elderly can be overcome by regular physical activity to minimize the risk of dependence on the elderly(Moral-García et al., 2018). The elderly are scattered not only at home but in social institutions. The elderly service facility or Tresna Werdha Social Home (PSTW) in West Kalimantan Province, namely Panti X consists of 98 elderlys. Based on the initial survey and the results of observations of researchers to 15 elderlys. As many as eight elderlys prefer to lie down in their room or do their activities, do not appear to be having conversations or greetings with other elderlys.

In comparison, as many as 15 elderlys always answer questions with hesitation and silence. Ten elderly said it was worthless. Based on the description of the problem, the researchers were motivated to conduct a study entitled Factors that influence the increase in self-esteem in the elderly in West Kalimantan.

METHOD

Participant characteristics and research design

The method in this study used a cross-sectional design. The population in this study were all elderly people with low self-esteem at the Tresna Werda Social Institution, West Kalimantan. Respondents are more than 60 years old, Willing to be a respondent, stated with informed consent, Not experiencing decreased consciousness.

Sampling procedures

The sample was taken by total sampling on June 2019. Researchers prepared data collectors, namely researchers and assisted by 2 research assistants. Then it was explained about the purpose of the research to be carried out, its impact on the elderly, and then the researcher asked the elderly's willingness to become respondents in the study by signing an informed concern. The sample in the study amounted to 98 respondents. Respondents were asked to fill out a socio-demographic questionnaire, and the Rosenberg Self Esteem Scale (RSES) questionnaire which was filled out by researchers or assistants for the elderly who were unable to fill out on their own.

Sociodemographic and Rosenberg Self Esteem Scale

The instrument used in this study are the Rosenberg Self Esteem Scale (RSES). The questionnaire consists of this instrument has 10 statement items. Respondents will be asked to answer: Strongly Agree, Agree, Disagree, and Strongly Disagree. The result 15 is low self-esteem, while the result <15 indicates the score is in the normal range. The results of the instrument validity test are 0.714 so that the questionnaire questions are declared valid, and the reliability test results are 0.857 so that the questionnaire is displayed reliably.

Sample size, power, and precision

The number of elderly people until January 2019 was 98 people, samples taken was 98 respondents with total sampling.

Data Analysis

Data analysis was carried out by bivariate analysis by presenting sociodemographic factors with low self-esteem in the elderly—this study, using the *chi-square* correlation bivariate analysis.

RESULT AND DISCUSSION

Based on Table 1, the results show that the majority of the elderly are aged <70 years 73 (73%), where the sex is mostly male at 50 (51%), with education level not attending school 61 (62%), marital status widow/ widower 68(69%), with a history of not working 88(87%), the reason for

entering an orphanage was mostly self-sufficiency 74(75%) with a length of stay of <10 years 54(55%). Based on table 2, it was found that there was a correlation between the sociodemographics of the elderly with gender self-esteem (p=0.001) and education (p=0.001).

Table 1.

Frequency Distribution of Elderly Characteristics Based on Elderly Sociodemography in West Kalimantan

Characteristic	F (%)		
Age			
<70	72 (73)		
>70	26(27)		
Gender			
Male	50 (51)		
Female	48 (49)		
Education			
No School	61 (62)		
Low	37 (38)		
Marital Status			
Unmarried	10(11)		
Widows/Widowers	68 (69)		
Married	20 (20)		
Employment History			
Not Working	87 (88)		
Working	11 (22)		
Reason for Entering the Institution			
On Your Own Will	74 (75)		
Will of others	24 (25)		
Length of stay at nursing home			
<10	54 (55)		
>10	44 (45)		

DISCUSSION

Based on the study results, the age of the elderly in this study, which was less than 70, experienced more low selfesteem than the elderly who were over 70 years old. Most of the elderly in China are aged 65-69 years(Du et al., 2019). It is estimated that 20% of people 55 years of age or older experience some mental health problem (CDC, 2010). This study reported no correlation between age and self-esteem. According to the researcher's assumption, the older a person gets, they will learn to make sense of life and learn to accept failure and responsibility for personal well-being to develop their potential. They become more patient, adaptable, and less demanding of themselves.

This study also reports that the majority of the elderly are female. The results of their research report that the average age of the elderly is at 68.59 years, where almost 26% of the elderly are widowed and widowed, even one-fifth of the elderly with educational qualifications graduated or more (Medhi et al., 2019). This study reports that there is a significant relationship between gender and self-esteem. The researcher's assumption is that gender roles can influence other parts. During adolescence and early adulthood, there are often role conflicts where positions are often associated with family roles. Crises can occur during adolescence and early adulthood. Suppose this is faced at an advanced age. In that case, the changes due to aging will not be passed properly, triggering a dispute between roles that can be sourced from a role behavior in women and men because differences in social standards can trigger role conflicts.

Table.2

Relationship of Sociodemographic Factors with Elderly Self-Esteem in West Kalimantan

Characteristic		Self Esteem			P-Value
		Low	High	Total	
		F (%)	F (%)	F (%)	
Age	<70	47 (65)	25 (45)	72 (100)	0.154
	>70	13 (50)	13 (50)	26 (100)	
Gender	Male	28 (66)	22 (44)	50 (100)	0.001
	Female	41 (85)	7 (15)	48 (100)	
Education	No School	50 (82)	11 (18)	61 (100)	0.000
	Low	22 (57)	17 (43)	39 (100)	
Marital Status	Unmarried	2 (20)	8 (80)	10(100)	0.321
	Widows/Widowers	40 (80)	28 (20)	68 (100)	
	Married	1 (5)	9 (95)	20 (100)	
Employment History	Not Working	57 (65)	30 (45)	87 (100)	0.119
	Working	2 (18)	9 (82)	11 (100)	
Reason for Entering the	On Your Own Will	34 (46)	40 (54)	74 (100)	0.228
Institution	Will of others	4(17)	20 (83)	24 (100)	
Length of stay at nursing	<10	31 (57)	23 (43)	54 (100)	0.542
home	>10	20 (45)	24(65)	44 (100)	

This study also reports that most of the elderly are widowed and widowed. It was reported that there was no relationship between marital status and self-esteem. Marital status can trigger psychosocial problems and physical problems instead of causing low self-esteem. To deal with the health effects of widowhood in old age, health providers require knowledge and skills (Holm et al., 2019). Building community teams can prevent emotional and physical health problems and reduce deaths. The study results emphasize more on factors that can motivate positive and negative health in elderly widows, such as family presence, chronic diseases with consequences of limitations, and the death of their husbands(Carvalho et al., 2019).

Referring to the education factor, this study reports that the highest level of education is the elderly who do not attend school. There is a significant relationship between the level of education and the self-esteem of the elderly. A significant correlation between education and self-esteem in the elderly in Brazil. Education is a problem in social structure(Meira et al., 2017). Low education results in a high number of those who do not work, this can harm one's self-concept. In the elderly, self-concept can reappear and become a problem. Uneducated and unproductive as a youth and increasing physical disability are problems in which the elderly feel worthlessness and worth.

This study did not find the correlation between the reasons for entering the orphanage and the length of time in the institution. Most of the elderly enter social institutions because of their own ability. The average elderly is in the orphanage <10 years, although some of them have been in the orphanage for more than 10 years. The elderly enter the orphanage because they experience a lack of physical, psychological, emotional, and financial support from their families and children(Cassum et al., 2020). In addition, this is also done so that children can work for better careers and job opportunities, causing the elderly to be neglected. Some families are unemployed, financially incapable, don't care because they are busy. There are family disputes that the elderly has to deal with that make them feel guilty, useless, feel guilty, helpless, and lonely, which results in the decision to be willing and forced to live in Social homes. The length of time in the orphanage can be caused by the inability of the family to care for the elderly, lack of knowledge, and fear of triggering mental health problems. The lack of close family ties and terrible poverty lead to deprivation and failure to buy medicines, which are why the elderly remain in the orphanage(Ncube, 2017).

LIMITATION OF THE STUDY

The limitation in this study is that there are only two temporary research assistants, because the action after data collection is a form of health education that takes time.

CONCLUSION AND SUGGESTION

In this study, it can be concluded that the factors that influence self-esteem are gender and education factors. Meanwhile, other factors such as age, marital status, work history, reasons for admission, and length of stay in the orphanage did not increase the self-esteem of the elderly

It is hoped that this study can be carried out by providing interventions that can boost self-esteem in the elderly and reduce the long-term consequences of the elderly who experience low self-esteem.

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Conflict of Interest statement

The author declares that there is no potential conflict of interest in relation to the authorship and publication of this article.

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