

THE DIFFERENCE OF QUALITY OF LIFE BETWEEN THE ELDERLY WHO LIVE IN FAMILY WITH THE ELDERLY WHO LIVE IN NURSING HOME

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Abstract.

The population of the elderly has increased from year to year. Based on data from the Central Bureau of Population Statistics, the estimated population of Indonesia in 2016 was 258.70 million, an increase of 20.18 million compared to 2010 (238.52 million). Meanwhile, in 2035 the population is estimated to be 305.65 million. The living environment is an important factor that influences the quality of life of the elderly. Different living environments result in changes in the role of the elderly in adjusting. The difference in the residence of the elderly causes differences in health services obtained by the elderly. The general purpose of this study was to determine the difference in the quality of life between the elderly who live in family with the elderly who live in nursing home. This study is a comparative study with a cross-sectional design. The number of respondents is 60 elderly people consisting of 30 people who live in family and 30 people who live in nursing home with the sampling technique used is quota sampling technique. The results of statistical analysis using the Independent Sample T-Test showed that there were no differences in the general quality of life between the elderly who live in family with the elderly who live in nursing home (P Value = 0.136). As for each domain, namely Domain I (sensory abilities) has a p-value of 0.035 ($\alpha < 0.05$), Domain II (autonomy) has p-value 0.392 ($\alpha > 0.05$), Domain III (past, present and future activities) has a p-value of 0.084 ($\alpha > 0.05$), while Domain IV (social participation) has a p-value of 0.827 ($\alpha > 0.05$), Domain V (death and dying) has p-value 0.013 ($\alpha < 0.05$), Domain VI (intimacy) has p-value 0.007 ($\alpha < 0.05$). It is expected that family members and administrators of nursing home will always provide support to the elderly by inviting them to maintain the sensory abilities of the elderly.

Keywords : quality of life, elderly, nursing home

1.INTRODUCTION

Elderly is a part of the human growth. Humans do not grow old suddenly, but they start growing from babies, children, adults, and eventually elderly. It is normal with the physical and the behaviors changes which can be predicted as they reach the age of certain stages of chronological growth. In this part, someone will gradually experience physical, mental and social setback [1]. Based on data from the Central Bureau of Population Statistics, the estimated population of Indonesia in 2016 was 258.70 million, an increase of 20.18 million compared to 2010 (238.52 million). Meanwhile, in 2035 the population is estimated to be 305.65 million.. Based on Susenas data in 2016, the population of elderly in Indonesia is 8.69 percent of the population. Most of them still live together with their extended family. Another 33.92 percent of them live with three generations in a family and 28.09 percent of them live with the nuclear family. Only about 10.41 percent of them live alone and 20.04 percent live with their partners. In addition to living with their own family, there is another alternative to overcome the social problems of the elderly, named staying at the Tresna Werdha Nursing Home (TWNH). Nowadays some elderly would prefer

staying at the Nursing Home to living at home by their own decisions. Elderly decided to stay at Nursing Home for various reasons such as, fear of burdening a family or having a problem with their children, the problems could come from their reduced ability to carry out activities that makes them need a lot of help in doing their daily activities. Elderly people can fulfill their social needs by getting along with peers while staying at the Nursing Home. Nursing home has a lot of facilities, such as doctor visit, it makes them easier to check up their health. Activities which are designed and facilitated by the nursing home such as exercise, embroidery or sewing, those activities are all designed to make the elderly more independent. The fact is that this is not fully accepted by them, however. Some elderly people need help from their friends to carry out daily activities, to fulfill their needs such as eating and drinking [2].

The environment is an important factor that influences the quality of life of the elderly. Different environments cause changes in the role of the elderly in adjusting. For them, changes in roles in the family, socio-economic, and social societies lead to setbacks in adapting to new environments and interacting with their social environment. Unlike the elderly in the family, the elderly who live in the nursing home will be exposed by the new environment and friends that require them to adapt positively or negatively [3]. Differences in residence can lead to differences in physical, social, economic, psychological and spiritual environments of the elderly. They can affect to the health status of the elderly living in it [4]. The problems which underlie the good and bad health status of the elderly are from their neighborhood [5]. The difference in the residence of the elderly causes differences in health services which are obtained by the elderly. Based on the background described above, the authors are interested in examining the differences in the quality of life between the elderly who live in families with those who stay in the service of Tresna Werdha Nursing Home.

2.MATERIALS AND METHODS

This research is a comparative study with a cross sectional time approach. The research was conducted in July - October 2018 at two places, named PSTW Budi Mulia 1 Bambu Apus and the elderly who live with families in RT 9 RW 1 Bambu Apus. This study uses the Quality of Life questionnaire paper WHOQOL-OLD (World Health Organization Quality of Life-OLD). The number of respondents is 60 elderly people consisting of 30 people living in Nursing Home and 30 people living in families. The sampling technique which is used is technique quota sampling. The statistical formula used in this study is the Independent Sample T-Test. It is used to determine the difference in quality of life of elderly who live in nursing home and the ones who live in family.

3. RESULTS AND DISCUSSIONS

Table 3.1
Characteristics of Respondents

Variable	Family		Nursing Home	
	n	%	n	%
Age				
Middle Age	16	53,3	13	43,3
Elderly	14	46,7	17	56,7
Gender				
Men	10	33,3	15	50
Women	20	66,7	15	50
Marital Status				
Married	19	63,3	6	20
Widows	21	36,7	24	80

Based on the results of the study, it showed the characteristics of respondents based on the age of the elderly. the elderly who live in the family of the middle age majority are 53.3% and those who live in the Nursing Home with a majority of elderly are 56,7%. Based on gender, the elderly people who live in families of women majority are 66.7% and the those who live in Nursing Home, the number of men and women are equal to 50%. Based on marital status, the elderly who live in the married family majority are 63.3% and those who live in the Nursing Home with a majority of widows are 80%.

Table 3.2
The Result of Univariat Analysis

Variable	Family		Nursing home	
	n	%	n	%
Quality of Life				
Good	15	50	16	53,3
Not Good	15	50	14	46,7
Domain 1				
Good	16	53,3	17	56,7
Not Good	14	46,7	13	43,3
Domain 2				
Good	16	53,3	20	66,7
Not Good	14	46,7	10	33,3
Domain 3				
Good	18	60	18	60
Not Good	12	40	12	40
Domain 4				
Good	22	73,3	15	50
Not Good	8	26,7	15	50
Domain 5				
Good	18	60	15	50
Not Good	12	40	15	50
Domain 6				
Good	13	43,3	16	53,3
Not Good	17	56,7	14	46,7

Table 3.3
The Results Of The Normality Test With Kolmogrov Smirnov

Variabel	P value	Interpretation
Quality Of Life	0.181	Normally distributed
Domain 1	0.2	Normally distributed
Domain 2	0.2	Normally distributed
Domain 3	0.107	Normally distributed
Domain 4	0.2	Normally distributed
Domain 5	0.2	Normally distributed
Domain 6	0.052	Normally distributed

Based on the results of the normality test with Kolmogrov Smirnov, it shows that all the p values on each variable has ($\alpha > 0.05$), so it can be concluded that all variables are normally distributed, so the test which is used is the Independent Sample T-Test.

Table 3.4
The Result of Statistic Analysis With The Test Of Independent Sample T-Test

Variable	Mean		P- Value	Interpretation
	Family	Nursing Home		
Quality Of Life	90.13	86.23	0,136	Not Significant
Domain 1	15,77	14,27	0,035	Significant
Domain 2	14,13	13,63	0,392	Not Significant
Domain 3	15,87	14,8	0,084	Not Significant
Domain 4	14,43	14,3	0,827	Not Significant
Domain 5	14,9	17,37	0,013	Significant
Domain 6	15,03	11,87	0,007	Significant

The Differences in Quality of Life of elderly, based on the results of the study it was found that p value = 0.136 ($P > 0.05$), which means there is no difference in general about the quality of life of the elderly who live with families and in the service of the Tresna Werdha.Nursing Home.The results of this study are not in line with previous research which was conducted by Yuliati, the results of the study revealed that there were differences in the quality of life of the elderly in the community with Elderly at the Social Services ($p = 0.100$), according to her quality of life is a very broad concept which is influenced by the physical condition of the individual, psychological, level of independence, and the relationship of the individual to the environment, but in the study it is also said that although the quality of life generally gives a significant number, but for the four domains, the qualities of life do not have any differences between the elderly who live in nursing dormitories and those who live in the family [6].According to researchers and the results of the observations, during the study, both the elderly who live in families and at the PSTW get support from the closest relatives. Elderly people living with the family get support from the family members at home and the elderly at Tresna Werdha Nursing Home, even though they do not have any family, they get the support from the nursing boards and peers who live there. Aspects of sensory abilities, the results of the study found that p value = 0.035 ($P < 0.05$) which means there are differences in sensory abilities in the quality of life of the elderly who live in families from the

elderly in the service of Tresna Werdha Nursing Home. According to the assumptions of the researchers, it is because of the elderly who live in the family communicate more with family members than those who live in the Nursing Home. This research is in line with the research [6]. There is a significant relationship between loss of hearing and the quality of life of the physical, psychological, social dimensions, but there is no relationship between loss of hearing and the quality of life in the environmental dimensions [7].

Aspects of autonomy, the results of the study found that p value = 0.392 ($P > 0.05$) which means there is no difference in independence (autonomy) on the quality of life of the elderly who live in families with the elderly at Tresna Werdha Nursing Home. The elderly who have high independence, their quality of life tends to be high. There is provision of independence that is owned by the elderly, so they are able to carry out daily activities even though they still ask for help from others for some. So on the contrary, if the elderly have low independence, they will need more help from others. This is consistent with the theory proposed by Miller which states that elderly with high dependency have a low quality of life. Being elderly will experience a decline in body function. It will result in decreased of walk ability, decreased balance, and decreased functional abilities. The level of independence of the elderly will decrease, so that the quality of life will also decrease [8].

The results of this study are in line with the research of (Paul, et al., 2013), that there is no relationship between independence and the quality of life of the elderly with p value = 0.425 ($P > 0.05$) [9]. This research is not in line with the research conducted by Adina that there is a relationship between the level of independence and the quality of life of the elderly in Padukuhan Karang Tengah Gamping Sleman Yogyakarta [10]. Aspects of past, present and future activities, the results of the study found that p value = 0.084 ($P > 0.05$) which means there is no difference in past, present and future activities in the quality of the elderly who live in families with the elderly in the service of Tresna Werdha Nursing Home. Aspects of social participation, the results of the study found that p value = 0.827 ($P > 0.05$) which means there are no differences in aspects of social participation in the quality of life of the elderly who live with families with those who live in the service of the Tresna Werdha Nursing Home. The results of this study are not in line with the research which was conducted by (Samper, et al.) that there is a relationship between social interaction with the quality of life of the elderly [11].

Death and dying aspects, the results of the study found that p value = 0.013 ($P < 0.05$) which means that there are differences in aspects of the view of death (death and dying) on the quality of life of the elderly who live with families from those who stay in the service of Tresna Werdha Nursing Home. From the results of study at Tresna Werdha, the value of the view of death is better than the elderly who live in the family. According to the assumption of researchers, it because of the majority of the elderly at Tresna Werdha do not have their families anymore, so they are more prepared and not afraid of death, it is different from the elderly who live with their family. They have family members, and they are still not ready about death. Aspects of Intimacy, the results of the study found that p value = 0.007 ($P < 0.05$) which means there are differences in aspects of friendship and love (intimacy) on the quality of life of the elderly who live with families than those who stay in the service of Tresna Werdha Nursing Home. Intimacy leads to a feeling of closeness between couples who are interacting with each other, expressing deepest thoughts, feelings and actions to other individuals. Intimacy can occur through acceptance, commitment, tenderness and trust in a partner. The ability to form an intimate relationship with others depends

on how someone understands oneself based on knowledge of the true one self and based on the level of acceptance to oneself.

4. CONCLUSION

The results of the Statistical Analysis with the Independent Sample T-Test showed that there were no differences in the general quality of life of the elderly who live with families with those who stay at the service of Tresna Werdha Nursing Home (P Value = 0.136). As for each domain, namely in Domain I sensory abilities has a p value of 0.035 ($\alpha < 0.05$), Domain II (autonomy) has p value 0.392 ($\alpha > 0.05$), Domain III (past, present and future activities), has p value 0.084 ($\alpha > 0.05$), while Domain IV (social participation) has p value 0.827 ($\alpha > 0.05$), Domain V (death and dying) has p value 0.013 ($\alpha < 0.05$), Domain VI (Intimacy) has p value 0.007 ($\alpha < 0.05$).

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