The Need Of The Elderly And Their Welfare In Their Old Age In Panti Werdha Bethania Lembean Airmadidi

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Abstract

The purpose of this study was to determine the needs of the elderly and their welfare in their old age. This study was conducted in one of the elderly houses in Manado, Indonesia (Panti Werdha Bethania, Lembean). This study used qualitative with case study design. The method of data gathering was through the in-depth interviews with the elderly. There were three respondents, chosen through purposive sampling. The data gathered was analyzed through recording, reduction and coding, presentation of data, conclusion and verification. The results were: the reason why the three respondents chose to stay at the elderly house was because they were treated unpleasantly by their family members through their action and their words. The two of them were already orphans since childhood, and their condition was deteriorated because of their illness. The needs of these elderly for the emotional support from the family were through routine family visit and through a harmonious family. The findings also showed the needs of the elderly from the government, such as: free medical service and to improve the efforts to protect the health of the elderly. Various support from the community to the elderly were: visit from the church members, and through the daily needs of these elderly in the elderly house given by the local community. The recommendation derived from this study was for the health care team, the family and the government, to be more aware with the needs and care for the elderly, in the effort to increase the welfare of the elderly in their old age.

I. Introduction

One of the challenges of all countries since now and in the future, is a matter of well-being of the elderly (seniors). The extent of health efforts implementation and the success in national development in all sectors, has to supported the socioeconomic well-being and health. The approach should be to carry out a health program to the family and society. The presence of the elderly is characterized by the increasing of life expectancy from year to year. It requires maintenance and health improvement efforts in order to achieve a healthy elderly life, happy, efficient, and productive. In line with the aging process, the physical condition and the non-physical of the elderly has started to decline. The impact is, there is a need to increase the welfare services for the elderly in different life areas, such as social, health, educational and religious guidance. Problems that are commonly encountered by the elderly are: isolation from family and social networks, access to public transport, difficulties in accessing services such as hospitals, pharmacies and banks. The access to social care is reported difficult because there is only few young people who want to work or volunteer to work there. It is interesting to study the issue and the needs of the elderly. The purpose of this study is to provide information for policy makers of welfare services to help in shaping the future of the elderly.

II. METHODS

The research design is qualitative with case study. A case study is a special phenomenon that occurs in a limited context, although the boundaries between a phenomenon and a context are not explained clearly. A case study can be individual, role, small group, organization, community or even a nation. It can also be a decision and policy. The location of study is at the elderly house (Panti Werdha Lembean Airmadidi) and is chosen through purposive sampling.

The data collection is done by in-depth interviews of all informants, time observation, document study and interviews with nursing officers in the elderly house as triangulation of the results of interviews with the informants. The data is analyzed in qualitative stages: making transcripts, data
reduction, data presentation and conclusion.

III. RESULT AND DISCUSSION

1. Characteristics of Informants

Table 1 Characteristics of the Informants by Age, Education, Status, Length of stay and Number of Children

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<tr>
<th>No</th>
<th>Characteristic of the Informant</th>
<th>Total</th>
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<tbody>
<tr>
<td>1.</td>
<td>Age</td>
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</tr>
<tr>
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<tr>
<td>b.</td>
<td>66-70 years old</td>
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<td>c.</td>
<td>&gt; 70 years old</td>
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<tr>
<td>2.</td>
<td>Education</td>
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<tr>
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<td>b.</td>
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<td>c.</td>
<td>Senior High School</td>
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<td>3.</td>
<td>Marital Status</td>
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<tr>
<td>b.</td>
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<td>4.</td>
<td>Length of stay in Nursing Home</td>
<td></td>
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<tr>
<td>a.</td>
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<tr>
<td>b.</td>
<td>&gt; 3 years</td>
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<tr>
<td>5.</td>
<td>Number of children</td>
<td></td>
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<tr>
<td>a.</td>
<td>1</td>
<td>1</td>
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<td>b.</td>
<td>&gt;1</td>
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</table>

From the three informants in this study, the first two informants are 73 years old and the other one is 66 years old. They are all from Minahasa, where the two are not married and live alone in the elderly house, and the other one is married. All the three informants did not continue their education because of the family’s economic limitation. The three informants described the experience of their lives since their childhood up to now.

2. Results

The analysis results on the needs of the welfare of the elderly in this study consists of four parts. These include: the reason for the elderly living in a nursing home, the needs of the elderly to have support from the family, government, and communities. The results are as follows:

1. The reason for the elderly living in a nursing home

It was found out that one of the informants in this study did not get married and she had no siblings. She has been an orphan since 5 months old and was raised by a grandmother. Since she was in her 50’s, the informant lived in boarding houses and rented a small room in a house. The informant got the attention from the governing body, as she lives alone in her old age and has no vision for her both eyes (blind). It can be seen from the statement by the informant:

“Oma...nyanda..menikah, jadi nyanda ada anak (nada pelan)...oma toh so piatu toh dari kacili...oma ada ba...apa eh... (pelan dan tersendat-sendat) orang manado bilang ba sewa dang...hehehe mo bilang ba kos..ba sewa (nada rendah dan wajah malu-malu). Ada katu yang punah rumah kong kase ba sewa. Oma so nda ba lia pi pi gereja sandiri, kan oma nda ada anak, ada anak basudara, kemenakan...kemenakan mar dorang malo mo antur (wajah sedih). Kurang ja tetangga-tetangga ja bawa-bawa, oma ja pangge tolong kia antur akang nanti oma kaseh doj..(tertawa)...noh kan anak kecil, dorang katu kan...senang kalo ba bunyi doj...dari bagitu ketau (di gereja) langsung ba pikir-pikir katu noh, pi ba bilang pa suster dari dorang so lia katu kia pe keberadaan bagini kong suster suruh bilang kebing surat pa lingkungan, baru pa jurah, surat peryatakaa for mo..dang sini (berpikir), jadi yang bawa dari wilayah noh.”

(Means: I don’t get married, so I have no children (quiet) ... I have been an orphan since I was a child.. well I am .. (slow and halting) the manadonese said just renting a place (low tone with shy face) hehehe.. I rent a room in Titiwungan .. as the owner of the house allowed me to rent a room. I was about 50’s at that time. When I enter this elderly house (Panti Werda) .. because I was diligent to worship in church, the church board took care of me, they saw me alone at church, with no children with me. It was the neighbor who brought me to church. I had some relatives and nephews but they were shy to bring me there (sad face). My neighbors were the ones to accompany around. I called them and promised them that I would give them some money .. (laughs) .. Well, they were small children, who were happy when they got money. The church elders then saw me and told the nurse about my condition. So they wrote a letter to the head of the village stated that (thinking) .. I will be staying here (nursing home)).
(Informant A, 66 years old)

There was also another informant whose husband is dead and her adopted son did not want to take care of her anymore. But then the son apologized and asked the informant to stay with him. The informant also mentioned that she had an unpleasant experience when staying with the nephew. The informant knew this nursing home and its procedure inside because her late husband once stayed there when she got sick. This caused her and her husband made a deal that if one day one of them was first called by God, the remained should stay in the nursing home and spend his/her old age there. The informant took the initiative to meet a nurse and asked the financial procedure to stay in a nursing home. It can be seen from the following statement:

“Kita tinggal di rumah sendiri, kita ada anak, anak angkat tapi dia so nimau urus pa kita (nada yg lemah dan wajah sedih), bagini kua semasa tape laki masih hidup dia (anak angkat) so se tinggal torang, tapi anak itu zah secara pengadilan. Tapi setelah tape laki meninggalkan dia, dia so nimau juga pa kita, jadi kita terus batal (tidak jadi anak kandung zah) dia setelah tape laki meninggalkan kita dia adalah keponakan dari kita ke laki. Kita pernah tinggal deng anak angkat 10 bulan..sebenarnya kita maso sini (panti werda) taon 2010, kong dia pi minta maaf pa kita, ma.. marijo kita tinggal deng kita biar kita momasa, kong dia senang - senang jauh beri jaya dengan kita, jadi kita pikir kita di sini sama. Akhirnya kita putuskan mo bale pi pantiwerda.”

“Waktu opa meninggal ada jo tu kemenakan mar cuma so rencana mo jual tu rumah mo maso di sini (panti werda) itu, jadi kan pelangpelang dari mar cuma pi bale pi pantiwerda.”

(I Means: I lived in my own house. I had an adopted son but when my husband died, he did not want to take care of me (weak tone and sad face). When my husband was alive, the son was with us. He had already stayed with us. By the time my husband passed away my son left me, so I decided not to take him as a son legally. Actually, before I stayed with my son for 10 months, I had stayed here in nursing home in 2010. But then my son came to me. He apologized and asked me to stay with him. But at his house, I was treated like a maid. I worked for him at home. I did the house chores such as: sweeping and mopping the floor but he him self was only busy with his work. So finally, I decided to go back to this nursing home (Panti Werda).

When my husband passed away, I got in touch with my nephews but only for a short period of time (several months). We did not get along well with each other. Then I left the house (confirmed with a hand pointing to the outside) and looked for some people who would like to stay with me. We stayed together for about 3 years, but then something happened among us so ... (look disappointed). I sold the house and it made them leave the house to find another place to stay in 2009. Then I decided to live in this nursing home.

I stay here (nursing home) because .. (halting) my husband has once stayed here, so I know about this place and its environment. My husband and I had had a talk that if one day one of us passed away, the remained should stay in the nursing home and spend his/her old age there. Because at home, when you live with some people at home, if you do not give them any money they will leave you and you will be left alone .. so.. I decided to come here).

(Informant B, 73 years)

Furthermore, the informant C stated that she did not get married and she lived alone. Her parents and her relatives were all dead. She was once stayed with her nephew and cousin, but almost every day she had an unpleasant treatment from them. She was tricked by her nephew that made her lose all of her property (land, houses and gardens).
Finally, she an initiated to meet a pastor. The pastor then prepared all of her documents and brought her to the nursing home. It can be seen from the statement below:

“Karna kita so nda ada sudara kandung toh..mama dan papa so meninggal, jadi kasiang hidup sebatang cara lah..kong ada keponakan bikin macam-macam pa kita (wajah geram dan emosi)..si keponakan itu datang .."oh tante..tante kurang sendiri” kalo tante kurang sandiri boleh tinggal deng torang..jadi kita percaya kasiang kang..karna kasiang kang ya..manusia nda bapikir panjang (menarik nafas panjang)..rumah waktu itu di kakaskasen tu x..(keponakan) oh Tuhan…(wajah menunduk dan tangan menutupi wajah mengingat peristiwa itu) dia beking bodok pa kita bu…sampe surat-surat tu mulai da beking ini, dia ambe samua, supaya kita nda dapa ini dang..karna apa dia beking suatu pernyataan yang mana dia mo piara pa kita sampe tua..sampe tutup mata ini pa kuntua bukan numa asal-asal. Kita tinggal situ tahan berapa eh..(sambil mengintegnta)..ta so lupa..Oh Tuhan…(wajah ditutupi kedua tangan) dia beking sia-sia pa kita lawang-lawang pembantu rumah tangga..kita nyanda mampu..nyanda mampu kasiang..kita kram kita pe kaki..”

“I had no biological siblings. My parents passed away so I had to live alone. My nephew tricked me with all of my belongings (look furious and emotional). When my nephew came to me, he told me “aunty, just stay with us. You suffer alone and let us be with you”. I believed them because.. you know. I am a human too and I could not see what behind all of these (deep breath).. my house in Kakaskasen .. oh God.. (face down and hands cover her face while trying to remember what happened). They made a fool of me. They took all of my property and left me nothing.. They stated that they would become my guards. so that they had an authority of all I had. I stayed there.. Oh, God I forgot (recalling, face covered with both hands). And they made me work for them like a housemaid. As an old lady I could no longer do the house chores anymore.

I was cheated by my nephew and it was so confusing. Then I thought.. aah, maybe if I stayed with my cousin, I would find happiness but then, O, God.. it was much worse than I expected. They put me at the attic of the house as my room because of my snore..oh God (face covered with both hands). My cousin in law said: “hey (the name of the informant). you should find a job. Do not just come and stay here and think that we will be giving you money”. Oh, God.. they just do not want to take care of me then. I thought out a solution. I went to the “gunung” Maria Hospital to meet a pastor (quiet). Then the pastor prepared all the documents needed, then a nurse from the mountain Maria arranged everything to bring me here (the nursing home)).

(Informant C, 73 years)

2. The needs of the elderly toward family social support

The results showed that the needs of the elderly toward family social supports are: the attention of the family, regular family visit, as well as a cohesive family. It can be seen from the following statements:

“Ya.. suka dang katu biar dorang (keluarga) ini..(sibuk) ya..cuma mo datang ba besuk hehehheh.. mar nda ada tu keluarga ja datangdatang sini (pantiwerda) numa ya.. paling satusatu taon stou numa 1 kali…2 kali.. sudah..cuma dang katu oma kalo berdoa semoga Tuhan bukahubakakan hati for dorang (keluarga) mo datang ba lia pa kita pe keadaan bagimana..(nada rendah dan mata berkaca-kaca)"

(Means: I want my family, even though they are busy, to come to visit me in here, hehe..
but none of them came to see me here (in nursing home). They came only once or twice a year. However I pray that God will open their heart so that they may come here to see me (low tone and teary eyes)).

(Informant A, 66 years)

“Kita ingin kompak tu keluarga, rupa kita ada beking ulang tahun tu lalu...kompak dorang samua datang (wajah gembira)...Cuma karena skarang kita masih ja bajalang jadi dorang belum datang. Mar tantu kalo kita so nda bias bajalan, kita somo pangge dorang satu-satu datang ba lia pa kita”

(Means: I want a cohesive family. Just like what I had last year when I celebrated my birthday party, they all came here (happy face) .. Just because I was able to walk without any help from others, so they did not like to visit me anymore but if I am not able anymore, I will call them one by one to see me here).

(Informant B, 73 years)

“Selama kita di sini (8 tahun di pantiwerda), nda ada orang pernah besuk, sudara nda pernah datang besuk...nda pernah (wajah sedih)...cuma yang 3 bulan lalu (ada saudara) mo cari tau di mana kita da tinggal akang...artinya dang kita senang skali bu...dari ada sudara datang cari bagitucari adang...jadi dorang so tau kita di sini, kita pe be ban hati jadi ringan begitu (sambil memegang dada)... eh...ada perhatian dari keluarga, walaupun dorang kurang anak basudara, cucu basudara, tapi dorang mo cari tau kita pe tampa tinggal...”

(Means: Since I first got here (8 years in nursing home), no one has once visited me. Even my family members have never come (sad face) to see me. Just three months ago, there were some relatives who were looking for me. I was so happy. Well, at least they have known where I live in. It lightened my burden (while holding the chest) because I knew there was attention from my family.

(Informant C, 73 years)

3. The needs of the elderly toward the role and support of the government in health care

The result obtained through in-depth interviews to one of the informants was that while living in the community, the informant delayed to get an eye treatment due to insufficient fund which ultimately led her to blindness and finally was taken to a nursing home for treatment. The informant also wanted a free medical treatment from the government especially for the elderly. It can be seen from the following statement:

“Kalo sakit berat so musti pi rumah sakit...noh...kalo pi rumah sakit, rupa oma kasiang (nada rendah dan tertawa) mo biaya deng apa? Oma so nda dapai lia...ba awang-awang (mata melihat ke atas dan kedua tangan memперagakan)...kong ada advis dari tu tetanggatetangga manjo pi puskemas kong mo ba priksa, mar kita bilang...cuma alasan dang, nda ada orang mo antar, mo pangge tu kemenakan ato anak basudara dorang leh pe kesibukan dorang pe keluarga. Jadi kita ba tolik-tolok sampe ta tutup terus kong so nda ba lia. Serta so nda ba lia kong dorang bawa di panti werda supaya ada yang mo urus. Oma baru ba operasi tu bulan November (thn 2011), eh...ada dapai bantuan dari yayasan panti werda, samua dorang tanggung katu tu biaya biar baru satu mata tu ada operasi.”

“Kalo gratis lebih bagus noh...hehehe (saran untuk pemerintah) Cuma katu kan malo mo ba bilang”

(Means: If I get a severe illness, of course I need to be admitted to a hospital.. Well, just like me (low tone and laughing), how could I pay for it? I was not able to see clearly anymore, my eyes were blurred (eyes looking up and hands demonstrating). My neighbor advised me to get my eyes checked at the health center, but I only replied that I had nobody to bring me there. I called my relatives but they were so busy. I kept rejecting the advice of my neighbors until I got blind. Then they brought me here, the nursing home. I was operated in November 2011 by the help of the nursing home foundation. It covered all my operation bills. It would be better if the operation were free of charge hehehe (advice for the government). However I am embarassed to tell them).

(Informant A, 66 years)

The result of the other in-depth interviewed with the other informant was that she had a history of high cholesterol and sugar level in her old age. It required her to have a regular check up with a doctor. So she had to spend her own money. She also had a foot injury as she fell down and was helped by the neighborhood. She mentioned never getting any donation from any material aid from the government in her old age when she got sick. She suggested that the government provide free medical check up, especially for those
who are financially limited. It can be seen from the following statement: “Kita ada saki gula, kolestrol.. kita so coba pa dokter sini (panti werda) mar nda cocok. Jadi kita pi pa dokter X..kong biaya dari kita. Kita bukan mo sombong, kita masih bisa biayai sendiri mar tu laeng-laeng (lansia di panti werda)… ada 8 yang nda ba bayar (suara pelan dan menunjukkan dengan jari-jarinya)..jadi kalo gratis..maulah begitu. Pengalaman kita da jatuh, tetangga da datang..kuring da uru-uru sandiri kong bae”.

(Means: "I once had a high sugar and cholesterol level. I tried to see the doctor here (in nursing home) but the treatment did not make me better. So I went to visit another doctor with my own money. Well, not to feel proud that I am still able to support myself but the other elder people in this nursing home are not. There are eight of them who can not afford to do it (quietly and showed with her fingers). So, if it were free, that would much better. In my experience when I fell and hurt my foot, my neighbors came by and massaged me. Then I did it myself until I got well.")

(Informant B, 73 years)

Furthermore, the third informant said that she had never received free care costs from the government. She lived alone and had never been visited by her family. She also mentioned that he could not afford to have any treatment if she got ill. One of the desires of the informants was not getting any illness. This can be seen in the following statement: “Biaya perawatan dari pemerintah…? Nda pernah..belum pernah..hehehee..ya kasiang itu keinginan bu selalu sehat jang sampe sakit, dari kasiang bapikir sapa yang mo kase biaya..mungkin ada kemungkinan supaya gratis ato bagimana kasiang tu biaya..dari kasiang kita selama di sini…nda ada orang pernah besuk (wajah sedih)”.

(Means: "The health aid from the government? No, I have never received it, hehehe.. I wished that I would not get any illness because I could not afford to have treatment if I got sick. So, if is it possible to get a free health aid because my family have never visited me? (sad face) ")

(The informant C, 73 years)

4. The need of the elderly toward the role and support of the community

The results of the in-depth interviews conducted with informant was that she lived alone in a boarding house. She was blind and often times asked for help from a neighbor to bring her to church because her nephew and cousin were embarrassed to escort her to church. She mentioned that her neighbors were very friendly and concerned with her situation. The church also helped her to stay in the nursing home for free, visited her and brought some daily needs for her. During her staying in the nursing home, she got help for her eye surgery funded by the nursing home foundation. In addition, she was also visited by those who celebrated their birthday in the nursing home and Santa Claus. She received gifts of money and daily necessities. It can be seen from the following statement: “Oma katu kan rajin ja pi ibadah, jadi katu dorang dang (majelis jemaat) peduli bagitu, dorang lialia kasiang toh oma so nda ba lia pi gereja sandiri, kan oma nda da anak. Ada anak basudara, kemenakan-kemenakan mar dorang mala mo antar..kuring ja tetangga-tetangga tu ja bawabawa. Dorang (tetangga) katu bae-bae, cuma waktu oma mo maso ke sini (panti werda) dorang noh..(terhenti sejenak berpikir) daripada mo lama-lama oma katu kan so nda dapa lia, dorang bilang kalo nda mo apa..(berpikir) sapa kata mo lia toh. Oma baru ba operasi tu bulan November..eh..ada dapa bantuan dari yayasan panti werda.”

“Ada juga dari dari wilayah (jemaat) ja datang, tapi nda tiap-tiap hari cuma tiap bulan..berapa kali dorang da datang, dari mulai maso (panti werda) dorang da antar toh, kong bulan februari 2011 dorang leh da datang kong da babawa akang, sabong..apa dg (berpikir) tu kebutuhan sehari-hari. Ada senter klas dari Airmadidi da datang sini kong dorang ada bawa-bawa hadiah ada dapa handuk, sabun. Kong ada tu bapak sapa itu (berhenti sejenak..kira-kira I menit sambil mencoba mengingat), dari bank da datang bekint di sini ulang tahun kong somo pulang da bagibagi envelop katu satu-satu dapa doi 50 ribu”

(Means: I am diligent to go to church, so the church board has great concern for me. They see me going to church alone with no children with me. I have some relatives and nephews but they feel embarrassed to bring me to church. Well, I cannot see clearly. I live alone with nobody, so the neighbors have brought me here, in nursing home (pause to think), because nobody will take care of me. I just got operated on my eyes in November, funded by the nursing home foundation."

190
The congregation of church from the region came by, but not everyday. They came here to visit me once a month starting when I was brought here for the first time. In February 2011, they came and brought me some (thinking) soap and my other daily needs. There was also Santa Clause from Airmadidi who gave me some gifts such as towels and soaps. And there was this.. (pause, thinking approximately one minute, trying to remember) a gentleman and a group of people from the bank, came here to celebrate the birthday of their bank. Before they left, they gave each of us here in nursing home, an envelope with 50 thousand rupiah.

(Informant A, 66 years)

There was also an informant who was supported by the church while living in the community where the church used to give assistance to the elderly once in one year. The informant had received aid and care from the neighbors when she fell and injured her knee. She was also entrusted by the community to be a treasurer in a big social gathering for quite a long period of time and received money if a family member died. It can be seen from the following statement:

“Kita pigi di gunung Maria ketemu deng pastor..torang pe apa itu berpikir)..ada dang torang pe ketua ja minta..ada ja dapa..kalo dorang bawa beras kita terima kong abis itu kita se pulang ulang pa dorang hehehe..mar katu itu ada terima noh..kalo gereja 1 kali setahun.
Pengalaman kita da jatuh..tetangga da datang katu noh, biar cuma mo ba lia pa kita kong babacerita kiapa sampe da jatuh. Kita slalu beking kumpulan besar yang ratusan anggota..setiap akhir tahun beking kumpulan..kita 25 tahun bendahara kong kita ja bagi-bagikan kalo hari natal, ada bantuan kalo orang meninggal dapa 7 juta..”

(Means: I went to “Gunung Maria hospital and met my pastor in Kakaskasen region. I told him that I was old and I had no place to stay and I just did not want to stay with other people anymore since I was treated badly. The pastor then took care of all my documents and the paperwork, brought me to meet the nun in the hospital and she brought me here in nursing home.

"I would be happy if I were visited many times, because I could get some gifts. There are people from Kakaskasen who have already, visited me for three times”)

(Informant C, 73 years)

IV. DISCUSSION

According to the research that has been described, the discussion of the research are as follows:

1. Reasons for the elderly living in nursing home

The reasons for the elderly to stay in a nursing home are: they lived alone because they did not get married and got an unpleasant experience when staying with family. The family is the primary support system for the elderly in maintaining their health. The roles of the family in taking care of the elderly, among others, are to care for the elderly, maintain and improve mental status, anticipate a socio-economic changes as well as to motivate and facilitate the spiritual needs of the elderly.

According to Carter and McGoldrick as quoted by Maryam et al (2008), the task of development of families with elderly is to maintain satisfactory living arrangements. Living arrangements for the elderly is a very important factor in supporting the welfare of the elderly. Transfer of residence for the elderly is a traumatic experience, since
resettled means change of habits that have been carried out by the elderly in the previous neighborhood. In addition, resettled means that the elderly will lose friends and neighbors that have interacted and have provided a sense of security to the elderly.

2. The needs of the elderly toward the family and community as social support

The needs of the elderly are attention and visit from family and community at nursing home: a cohesive family, cost of living assistance from the church, funded operation by the nursing home foundation, help from the priests and nuns in providing shelter, a visit of donators and the distribution of present in the form of goods and materials as well as the attention of the neighbors during their staying in the community. According to Carter and McGoldrick as quoted by Maryam et al. (2008), the family continues to be the focus of the interaction of elderly and a major source of social support.

Kuntjoro (2002) stated that humans as social beings cannot live alone without the help of others. Physical needs (clothing, food, housing), social needs (association, recognition, school, work) and psychological needs including curiosity, a sense of security, feelings of religiosity, can not be fulfilled without the help of others.

Social support is defined by Gottlieb in Kuntjoro (2002) as verbal or non-verbal information, advice, assistance tangible or behavior given by people who are familiar with the subject in a social environment or in the form of presence and stuff can provide an emotional benefit or effect on the behavior of the recipient.

In this way, people feel that they have social support and feel relieved because their emotional aspects are taken care. They get advice and good impressions on themselves. Moreover, when they face some mild or severe problems. In times like this, the people will find their social support from the people around them.

3. The needs of the elderly and support of the government in health care

Health care needs of the elderly include: “free of charge” access to health services for the elderly. According to interviews, the elderly could not find health treatment because of the financial status. She never received material aids either the government. The elderly who has chronic diseases (diabetes and high cholesterol) finds treatment by herself because she is not satisfied with the service from the hospital. There is no special clinic for the elderly. The elderly also wants efforts of health a protection for them by reducing injury because of falls. According to WHO (1991) as quoted by Mary et al. (2008), the principles adopted by the Ministry of Health in Indonesia is add life to the years, add health to life, and add years to life, that is to improve the quality of life of the elderly, improve health, and extend life.

According to WHO (1982) in Maryam et al. (2008), the type of health care for the elderly includes five health services, namely health promotion, illness prevention, early diagnosis and treatment, reduction of disability, and rehabilitation. Health promotion is a direct and indirect act to improve health and prevent disease. Efforts to health care for the elderly are as follows: Reduce injury, reduce the incidence of falls, reduce fire hazards at home, increase the use of safety devices, and reduce the incidence of food poisoning or chemicals. Facilities and infrastructure used to carry out the service for the elderly, whether physical, social, and spiritual, being run at various levels, of which there are community-level services include LKMD, karang wreda, day care, health funds. The result showed that the elderly did not receive fund assistance for their health care. There is also a reference level of service, which is usually held in the hospital and specialty hospitals. Referrals can be simple, medium, full and complete such as: a).The level of simple, just provide clinic services for the elderly; b) Moderate level, where the services provided in addition to the clinic during the day care. However the fact is, there is no elderly clinic and the elderly mentioned that the treatment in one general hospital was not compatible with her case so she decided to see another doctor in different hospital.

4. The needs of the elderly society on community support

The results showed that the support received by the elderly include: church attention because of the physical condition (blind) and poor treatment of the family that is facilitated by the community for them to live in nursing house (panti werdha), good relationships and
attention from neighbors, assistance in the form of daily necessities from the church, a visit from a few people to bring gifts, help from foundation operating costs, gain the trust of the public to be treasurer in a big gathering, and regular visits from the public.

Syerman (2007) stated: “social protection is the efforts of the government and the community to provide service for the elderly who are not potential, for them to fulfill and enjoy their standard of living. While social support is the efforts to provide social assistance that is not permanent that potentially increase the level of social welfare of the elderly. Efforts to improve the social welfare of the elderly covers several aspects including strengthening of institutions for elderly care providers, both public and private as well as improving / strengthening support system that includes various facilities in the elements which are administrative, accessibility, selfdevelopment advice and employment opportunities”. Kuntjoro (2002) stated: “humans as social beings cannot live alone without the help of others. Physical needs (clothing, food, housing), social needs (association, recognition, school, work) and psychological needs including curiosity, a sense of security, feelings of religiosity, not be fulfilled without the help of others. Social support can be demonstrated through tangible support and actions of the people closest to the subject in the social environment. You could say the presence of people nearby can have a positive influence on a person’s behavior because they feel the attention and appreciation of others”.

V. CONCLUSIONS AND SUGGESTIONS

Conclusion
Based on the research results, it can be concluded that the description of the welfare needs of the elderly living in a nursing home at Werdha Bethania Airmadidi are as follows:

1. Reasons for the elderly living in nursing home

Several reasons were given by the three informants in this study. The reasons were because of an unpleasant experience when staying with the family, either in the form of treatment or words. Two of them were not married and the declining of physical condition was cause by illness (blind and diabetes).

2. The needs of the elderly toward the family social support were: the attention from the family member, regular family visitation, as well as cohesive family.

3. The needs of the elderly and support of the government in health care include: In general, the three informants want free health care service for the elderly, an increased elderly protection to reduce injuries, and a special examination of the elderly in every hospital.

4. The needs of the elderly toward social support from the community / society: church attention because of the physical condition (blind) and poor treatment of the family that is facilitated by the community for them to live in nursing house (panti werdha), good relationships and attention from neighbors, assistance in the form of daily necessities from the church, a visit from a few people to bring gifts, help from foundation operating costs, gain the trust of the public to be treasurer in a big gathering, and wanted regular visits from the public.

SUGGESTIONS

The following recommendations are put forward based on the research results, discussions and conclusions:

1. The health care practitioners (doctors and nurses), families and communities are expected to be familiar with the needs of the elderly, care for them and continue to provide support to improve their welfare in their old age.

2. The government is expected to increase the awareness and protection of the elderly, especially in access to affordable health care, especially for the elderly who are not potential, and to have a specialized doctor in every nursing home to monitor the health conditions of the elderly.

3. The hospital is suggested providing an out patient department for the elderly who have health problems.

4. The elderly empowerment agencies can empower the elderly to play an active role in their social life and in their community, nation and state.
5. For the next researcher, it is expected to conduct a more in-depth study on the relationships and social support among elderly in a community.

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