Abstract

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### Successful Aging Among Community-Dwelling Older Adults in Rural Areas of Jember District

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**Background**: Successful aging is a condition when the elderly not only

live long but remain in good health so that they can be independent, and

useful. Purpose: This study aims to determine the description of

successful aging in the elderly at Karang Werda, Rambipuji District,

Jember Regency. **Methods**: This study used a descriptive observational design with a cross-sectional approach and involved 213 elderly people

selected by total sampling. The research instrument used the Successful

Aging Scale (SAS). Data analysis used descriptive statistical tests and a

chi-square test in crosstab analysis to analyze the characteristics of

respondents with successful aging. Results: The success rate of aging in

the elderly was mostly high. The highest indicators of successful aging were primary and secondary control, while the lowest were selection

optimization and compensation. Analysis showed associations between

the characteristics of age, gender, education, and smoking habits with successful aging (p-value < 0.05), while marital status, medical history,

living status, employment, and income were not associated (p-value >

0.05). Conclusion: The majority of the elderly in Karang Werda,

Rambipuji District, Jember Regency, showed a high level of successful

Keywords: Elderly, Karang werdha, Successful Aging, Rural area

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#### 1. BACKGROUND

Old age is a natural stage in human life, characterized by changes or declines in physical, psychological, and social status (Hanifah et al., 2023). The decline in function due to aging in the elderly has an impact on increasing the burden on the national health system, especially the number of elderly people who increase every year (Fahlevi et al., 2023). National survey (Susenas) 2023 data shows that there was a surge in the number of elderly people in Indonesia in 2022 of around 11.75% from 7.59% in 2010, seen from the change in the shape of the population pyramid from expansive in the 1971 census to constructive in 2020 (BPS, 2023). The phenomenon of the elderly population is

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the impact of successful health development, which can provide demographic benefits if the elderly are healthy, independent, and productive. The situation will reverse when the elderly have health problems that require an increase in the budget for health compensation every year (BPS, 2023).

According to the census of the Central Bureau of Statistics of Jember Regency, (2024), Jember Regency has an elderly population of 396,925 people, while the Rambipuji District reaches 13,885 people. Previous research conducted in Indonesia showed that the level of successful aging in 2014 was 5.6% with a percentage of having no disease at 56.2%, no physical function difficulties at 57.7%, no depressive symptoms at 83.5%, no cognitive impairment at 40.0%, having social support 57.1%, actively participating socially 79.2%. Research in Singapore in 2015 showed successful aging of 25.4% with the percentage of not having a major disease (55.3%), high cognitive function (50.4%), high physical function (61.7%), not experiencing disability (80.9%) and actively involved in life 95.1% (Subramaniam et al., 2019). A comparison of the two studies shows that the level of successful aging in Indonesia is low.

Successful aging in each elderly person will be different due to individual human differences in living life which cannot be separated from past experiences and struggles in each phase of life (Ariani & Putri, 2023). One of the components of successful aging includes avoiding disease and disability, maintaining mental and physical function, and being actively through productivity involved and intrapersonal relationships. Freedom from disease and disability facilitates the maintenance of mental and physical function, which in turn enables active engagement in life and intrapersonal relationships (Rowe & Kahn, 1998). Elderly people who are unable to adapt to changes and setbacks, cause a crisis of confidence and affect their lives (Ariani & Putri, 2023). Seniors who do not achieve successful aging commonly experience problems such as withdrawal (Touhy et al., 2016), limited intellectual options (Birren, 2007) and depression (Mauk, 2006).

Highlighting the importance of a deeper understanding of successful aging. One of the interesting areas for this study is Karang Werda in Rambipuji District, Jember Regency. The results of the preliminary study showed that of the 10 elderly interviewed, some elderly experienced physical impairment and

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decline due to health history such as cholesterol, gout, and stroke which hindered their ability to do activities and participate in activities at Karang Werda. In the indicators of psychological wellbeing, the elderly tend to accept life changes and destiny with peace of mind, but some of them still have not accepted the loss due to the death of a spouse which causes a sense of loneliness, lack of satisfaction with life's achievements and often sad remembering past failures so that they lose the meaning and purpose of life due to lack of motivation.

Based on the discussion above, the author aims to find out the description of successful aging in the elderly at Karang District Werda Rambipuji, Jember Regency. In addition, through careful research at Karang Werda, it is hoped that valuable insights will be gained for the development of programs and policies aimed at improving the quality of life of the elderly, both at the local and national levels. The results of this study can provide a strong foundation for the government and related institutions to design more effective interventions in supporting the elderly population.

### 2. METHODS

This type of research is quantitative with an observational descriptive design. Data were obtained through questionnaires which were conducted from June 1 to July 30, 2024. The research location was carried out at Karang Werda Rambipuji District, Jember Regency, which consisted of 8 Karang Werda. The sample was obtained from total sampling consisting of 213 elderly, who met the inclusion criteria including elderly aged > 60 years in Karang Werda Rambipuji District, having an MMSE score> 21 and cooperative, while the exclusion criteria were elderly who withdrew from the study. Primary data was obtained directly from respondents through a characteristic questionnaire sheet which included age, gender, education, marital status, medical history, living status, occupation, income, and smoking habits. The variable used in this is successful aging so researchers use the successful aging scale instrument as a measuring tool, which consists of answer choices: Strong Agree (SA), Agree (A), Moderately Agree (MA), Undecided (U), Moderately Disagree (MD), Disagree (D), and Strongly Disagree (SD). Secondary data was obtained from Karang Werda in the form of data on the total number of elderly registered at Karang Werda in

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Rambipuji District, Jember Regency. The type of analysis used is descriptive-analytic to describe data on respondent characteristics and the achievement of successful aging of the elderly. The chisquare test in crosstab analysis was also

used to analyze the characteristics of respondents with successful aging. This research protocol was approved and received an ethical certificate by the Health Research Ethics Committee FKEP UNEJ with No.246/UN25.1.14/KEPK/ 2024.

#### 3. RESULTS

Table I. Characteristics of elderly in Karang W	/erda Rambipuji, Jembe	er Regency (n=213)
Respondent Characteristics	Frequency	Percentage (%)

Respondent Characteristics	Frequency	Percentage (%)
Age	Md (66,00)	Min-Max (60-84)
Gender		
Male	27	12,7%
Female	186	87,3%
Education		
Not graduated from elementary school	19	8,9%
Elementary school	76	35,7%
Junior high school	51	23,9%
Senior high school	47	22,1%
Undergraduate	20	9,4%
Marital Status		
Not Married	2	0,9%
Married	114	53,5%
Widowed / Widower	97	45,5%
Health History		
None	48	15,5%
Hypertension	77	24,8%
Diabetes Mellitus	21	6,8%
Rheumatism	12	3,9%
Uric Acid	17	5,5%
Memory Impairment (Dementia)	65	21%
Others	70	2,6%
Living Status		
Alone	28	13,1%
Spouse (husband/wife)	62	29,1%
Children	63	29,6%
Extended Family	53	24,9%
Siblings	7	3,3%
Occupation		
Not Working	147	69%
Farmer/Laborer	12	5,6%
Self-employed	54	25,4
Income		
< Minimum Wage of Jember (IDR 2,665,392)	176	82,6%
≥ Minimum Wage of Jember (IDR 2,665,392)	37	17,4%
Smoking Habit		
Never	196	92%
Sometimes (1-4 cigarettes/day)	6	2,8%
Often (5-15 cigarettes/day)	6	2,8%)
Always (>15 cigarettes/day)	3	1,4%
Quit	2	0,9%

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Table 1, showed a distribution of characteristics of research respondents covering the age of the elderly who have a median value of 66.00. By gender, most of the elderly in Karang Werda Jember Regency are known to be female as many as 186 elderly (87.3%). The most common elderly education is elementary school / equivalent as many as 76 elderly (35.7%). The marital status of the elderly who dominate is married as many as 114 elderly (53.5%). Data regarding the category of elderly disease history was taken with multiple response techniques that allowed respondents to choose more than one answer, the results obtained hypertension disease was most commonly found in the elderly, namely 77 elderly (24.8%). The living status of the elderly was found to live with children, namely 63 elderly (29.6%). Most of the elderly in Karang Werda have a non-working status as many as 147 elderly (69%). The results also showed that the elderly in Karang Werda had an income below the minimum wage of Jember Regency in 2024, namely 176 elderly (82.6%). The highest elderly smoking habit shows that 196 elderly (92%) have never smoked.

Table 2. Overview of Successful Aging in the Elderly at Karang Werda, Rambipuji District,Jember Regency (n=213)

Frequency Distribution of Successful Aging	Frequency (n)	Percentage (%)
Low	0	0%
Medium	15	7%
High	198	93%
High Total	213	100%

Table 2 shows that of the 213 elderly in Karang Werda, most have successful aging which is classified as high, namely 198 elderly (93%) and some are in the medium category as many as 15 elderly (7%).

Table 3. Specific description of Successful Aging in terms of its Indicators in the Elderly in
Karang Werda, Rambipuji District, Jember Regency (n=213)

Indicator	Min	Max	Mean
Disease Avoidance, high cognitive and physical, engaged with life	19	35	31,44
Selection, optimization, compensation	9	21	17,31
Primary and Secondary Control	9	21	17,83
Psychological well-being	8	21	17,55

Based on Table 3, it is found that the primary and secondary control indicators have the highest value compared to other indicators, while the lowest value is found in the selection, optimization and compensation indicators.

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Table 4. Cross tabulation of the description of successful aging in the elderly at Karang Werda
Rambipuji District, Jember Regency (n=213)

Rambipuji District, Jembe		ful aging			
Characteristics	Medium	High	Total	P-value	
A	Medium	nign			
Age	11(5,70)	102(0420)	104 (1000)	0.022	
60-74	11 (5,7%)	183 (94,3%)	194 (100%)	0,033	
75-90	4 (21.1%)	15 (78,9%)	19 (100%)		
> 90	0 (0,0%)	0 (0,0%)	0 (0,0%)		
Gender					
Male	5 (18,5%)	22 (81,5%)	27 (100%)	0,028	
Female	10 (5,4%)	176 (94,6%)	186 (100%)		
Education					
Not graduated from elementary school	1 4 (21,1%)	15 (78,9%)	19 (100%)	0,033	
Elementary school	6 (7,9%)	70 (92,1%)	76 (100%)		
Junior high school	2 (3,9%)	49 (96,1%)	51 (100%)		
Senior high school	3 (6,4%)	44 (93,8%)	47 (100%)		
Undergraduate	0 (0,0%)	20 (100%)	20 (100%)		
Marital Status	0 (0,0 /0)	20 (100 /0)	20 (100 /0)		
Not Married	1 (50%)	1 (50%)	2 (100%)	0,136	
Married	5 (4,4%)	109 (95,6%)	114 (100%)	0,10	
			· · · ·		
Widowed/Widower	9 (9,3%)	88 (90,7%)	97 (100%)	0.520	
None	2 (4,2%)	46 (95,8%)	48 (100%)	0,529	
Health History					
Hypertension	10 (13%)	67 (87%)	77 (100%)		
Diabetes Mellitus	1 (4,8%)	20 (95,2%)	21 (100%)		
Rheumatism	0 (0,0%)	12 (100%)	12 (100%)		
Uric Acid	1 (5,9%)	16 (94,1%)	17 (100%)		
Memory	9 (13,8%)	56 (86,2%)	65 (100%)		
Impairment					
Others	11 (15,7%)	59 (84,3%)	70 (100%)		
Living Status	11 (15,1 /0)	33 (01,370)	10 (100 /0)		
Alone	3 (10,7%)	25 (89,3%)	28 (100%)	0,425	
Spouse	3 (4,8%)	59 (95,2%)	62 (100%)	0,125	
(husband/wife)	J (4,0%)	J9 (9 <u>J</u> ,2%)	02 (100 %)		
	5 (7 00/)	=0(0210)	(2(1000))		
Children	5 (7,9%)	58 (92,1%)	63 (100%)		
Extended Family	2 (3,8%)	51 (96,2%)	53 (100%)		
Siblings	2 (28,6%)	5 (71,4%)	7 (100%		
Occupation					
Not Working	13 (8,8%)	134 (91,2%)	113 (100%)	0,155	
Farmer/Laborer	0 (0,0%)	12 (100%)	12 (100%)		
Self-employed	2 (3,7%)	52 (98,1%)	54 (100%)		
Other	0 (0,0%)	0 (0,0%)	0 (0,0%)		
Income	0 (0,0 /0)	- (0,0 /0)	- (0,0 /0)		
< Minimum Wage of Jember	15 (8,5%)	161 (91,5%)	176 (100%)	0,079	
(IDR 2,665,392)	1) (0,5%)	101 (91,970)	1/0 (100 /0)	0,079	
	0(0,00)	27(1000)	37 (100%)		
≥ Minimum Wage of Jember	0 (0,0%)	37 (100%)	57 (100%)		
(IDR 2,665,392)					
Smoking Habit		100 (0 ( 0 - 1))			
Never	10 (5,1%)	186 (94,9%)	196 (100%)	0,003	
Sometimes (1-4 cigarettes/day)	2 (33,3%)	4 (66,7%)	6 (100%)		
Often (5-15 cigarettes/day)	2 (33,3%)	4 (66,7%)	6 (100%)		
Always (>15 cigarettes/day)	1 (33,3%)	2 (66,7%)	3 (100%)		
Quit	0 (0,0%)	2 (100%)	2 (100%)		

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Table 4, show that elderly people aged 60-74 years with a total of 183 elderly people achieve high aging success. The gender category in the elderly women achieved high aging success more than the elderly men, namely 176 elderly. The most education is obtained in elementary school / equivalent as many as 70 elderly with high aging success. In this study, elderly people who had a partner achieved more successful aging with a total of 109 elderly people. Elderly with hypertension disease achieved more successful aging with a total of 67 elderly. Elderly who live with their spouses, 59 elderly, more often achieve high aging success. In terms of occupation, more elderly who are not working have a high level of successful aging, namely 134 elderly. More elderly with income above the minimum wage of Jember Regency in 2024 have a high level of successful aging, namely 161 elderly. The results also show that elderly people who have never smoked more have a high level of successful aging as many as 186 elderly people.

The results of further analysis in Table 4.3 regarding the analysis of the description of successful aging in 213 elderly people in Karang Werda in Rambipuji District, it was found that the characteristics of age, gender, education, and smoking habits had a relationship with the level of successful aging indicated by the p-value of age (0.033), gender (0.028), education (0.033), and smoking habits (0.003). Other characteristics such as marital status, medical history, living status, employment, and income, were found to have no association with successful aging as indicated by the p-value of marital status (0.136), medical history (0.569), living status (0.425), employment (0.155) and income (0.079)

### 4. DISCUSSION

### **Respondent Characteristics**

The results of research conducted on 213 elderly people in Karang Werda, Rambipuji District, Jember Regency, obtained the elderly with the highest age, namely with a median of 66.00 years. In line with Hanum & Darubekti's research, (2021) shows that the majority of the elderly are in the category of 60-69 years. Other research reports that social engagement with age will be abandoned after reaching the age of 80 (Wanchai & Phrompayak, 2019). According to researchers, participation provides psychological benefits such as feelings of recognition and positive self-image in the elderly. However, participation in productive activities is also related to age, which means that as people get older, social participation tends to decrease. This

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study also found that there were more elderly women than elderly men with a presentation of 87.3%. This research is by research by Pertiwi, (2019) which shows that most of the elderly respondents at Karang Werda Senja Sejahtera are female, namely 17 people (53.1%). Elderly men who live alone have an inverse correlation with social participation (Wanchai £Z Phrompayak, 2019); whereas men mainly focus on direct household interactions (Ong et al., 2024). According to researchers, women tend to have a higher level of social participation in community activities and interactions with friends, while men focus more on interactions in the context of the household.

The results showed that the majority of education owned by the elderly was elementary school / equivalent with a percentage of 35.7%. In line with Riskiana et al.'s research (2021), shows that of the 20 respondents, 9 people (45%) graduated from elementary school/equivalent. According to the researcher, the factor of limited access to education in the past, as well as differences in education between rural and urban areas in Indonesia, causes the tendency of the elderly to have lower levels of education, especially in elderly women. This study also shows that the majority of elderly people in Karang Werda

have a partner with a percentage of 53.5%. In line with the research of Fitriana et al., (2021) a total of 33 elderly respondents at Karang Lansia Bahagia Banjarmasin showed that most of the respondents were married, namely 20 people (60.6%). Elderly people who have a partner report a greater ability to engage in social activities independently compared to those who do not (Isherwood et al., 2017). According to the researcher, older people who have a partner tend to be more able to engage in social activities independently than those who do not have a partner.

The results of this study indicate that the majority of elderly people have a history of hypertension. This study is in line with previous research, namely Ikrimah et al., (2023) which showed that out of 91 elderly people, 58 people (63.7%) had a history of hypertension. According to the researcher, the majority of elderly people have hypertension, but they remain active in activities at Karang Werda because the gymnastics held there increase their interest in maintaining physical health. This study also shows that most of the elderly live with their children. This research is by the research of Ada et al., (2019) showing the results of 59 elderly people there are 26 people (46%) elderly living with family members, namely

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children and grandchildren. Hanum & Darubekti's research, (2021) states that children's support can help the elderly to overcome problems and get support such as psychological and economic support. According to researchers, the presence of children in the household provides important support in the form of psychological, and economic support, as well as assistance in personal management and physical care for the elderly.

The results showed that the majority of elderly people were not working at 69%. This is by research (Sumandar et al., 2021) from a total of 102 elderly respondents showing that the majority of respondents did not work as many as 72 people (70.6%).

Elderly people who are no longer working have positive motivation because they have more time at home so that they can utilize their free time to do sports activities regularly compared to those who are still actively working (Ernawati & Hellen, 2022). According the to researchers, most of the elderly who are not working or retired remain active in various activities, including sports. This indicates that the non-working elderly have greater leisure time to engage in regular physical activity, which can support successful aging. This study also shows that the majority of elderly people have an income

below the minimum wage of the Jember Regency in 2024. This is by the research of Ada et al., (2019) showing that out of a total of 56 elderly people, there were 42 people (75%) earning below the minimum wage. The socioeconomic status of older people and their children's income may be related to social engagement (Wanchai & Phrompayak, 2019). According to the researcher, the socioeconomic status of the elderly, including income, can affect the level of social involvement of the elderly.

The results showed that the majority of elderly people have a non-smoking habit. In line with research conducted by Pelin et al., (2023) 32 elderly people (60.4%) reported not smoking, in this study more respondents were female. Pelin et al., (2023), mentioned that the elderly are often more aware of the health risks associated with smoking, including its links to cardiovascular disease and cancer. According to the researcher, the majority of elderly people do not smoke and the female gender has a higher proportion. This is because elderly awareness of the health risks associated with smoking and family and community support can influence the decision not to smoke.

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#### Successful Aging Overview

Based on the results of research conducted on elderly aged 60 years and over in Karang Werda Rambipuji District, Jember Regency, it was found that there were mostly 198 elderly (93.0%) with a high level of successful aging. This research line with Susanto is not in 3 Soetjiningsih's research, (2021) which states that most of the elderly (57.7%) have an aging success score in the moderate category and low category (42.3%), and there are no participants with an aging success score in the high category. In theory, successful aging includes aspects of acceptance of the death process, life satisfaction, and feelings of well-being, as well as efforts to prevent disease and disability (Mauk, 2006). Inaccurately assessing the level of aging of the elderly, it is important to focus on functional abilities and psychological health rather than focusing solely on physiological or objective aspects, such as the absence of chronic diseases (Kim, 2023). Based on research conducted by Teater & Chonody, (2020) mentioned that older people with chronic diseases and functional difficulties still rate themselves as psychologically healthy and aging successfully. According to the researchers, there may be a factor of subjectivity in the assessment of successful

aging, especially if the assessment is based on self-assessment or questionnaires that ask respondents to rate themselves. Seniors who are satisfied with their lives, in general, may tend to give a more positive assessment of their successful aging, regardless of their physical condition or health.

In this study, the highest indicators obtained by the elderly were the primary and secondary control components. In line with research by Anggun et al., (2018) shows that the which strongest relationship is found in the primary and secondary control components (r = 0.705, p = 0.000). In theory, the primary control component involves actively changing the environment to suit one's needs and desires, and secondary control involves changing oneself which includes thoughts and feelings to suit the situation (Lufanna, 2021). The cognitive process of overcoming problems is related to primary and secondary assessments. Primary appraisal is a person's assessment of life situations as stressful or not, and secondary appraisal is the way a person feels to master the situation (Birren, 2007). According to the researcher, the elderly's tendency to the physical environment manage (primary) and manage their thoughts and feelings (secondary) will help the elderly

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improve successful aging. In the field situation, the elderly actively participate in the morning exercise program at Karang Werda (primary control), while the elderly also manage stress by interacting socially in the surrounding environment (secondary control).

The results of this study show that the lowest indicator obtained by the elderly is the selection, optimization, compensation (SOC) component. Based on research conducted by Regier & Parmelee, (2021), it shows that around 38% of respondents reported not adapting to selection. using optimization, compensation (SOC). Participants who did not use SOC showed difficulty in finding ways to obtain the necessary means to maximize their ability to achieve goals (i.e. optimization), as well as deficits in developing or mobilizing alternative means to achieve goals (compensation). The component also has the lowest score because based on the results of Revista et al.'s research (2020), age is a determining factor in successful aging, where the elderly use fewer compensatory strategies than the younger generation to overcome the shortcomings of aging. Compensation strategies generally reflect the ability to access and use various resources to compensate for the decline in performance

of the aging arena. This ability declines with age. Therefore, successful aging involves selecting functional areas according available resources, to optimizing evolutionary potential (maximizing gains), and compensating for losses (Setoodeb et al., 2020). Selective optimization with compensation facilitates successful aging. As individuals age, they learn to cope with declining function by carefully selecting the activities they do and the roles they take on (selection). Seniors will focus on the things that are most important to them (optimization), and if needed, they adjust by finding alternatives when they can no longer maintain their previous roles or activities (compensation). This process is crucial as it helps them deal with health challenges, mortality rates, and improve quality of life as they age. (Mauk, 2006). According to researchers, the ability of older adults to use SOC (selection, optimization, and compensation) plays an important role in ensuring successful aging of older adults. However, as people age, they may experience barriers in optimizing and compensating for shortcomings that arise due to the aging process. In the field situation, it was seen that financial limitations and the fact that many older

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people live alone make it difficult for older people to overcome their shortcomings.

## Analysis of Respondent Characteristics with Aging Success

The results of the analysis on the age category in this study showed that most of the high aging success occurred at the age of 60-74 years (elderly), namely 183 (94.3%) with the median respondent aged 66 years. The age aspect is related to the level of successful aging as shown by the p value (0.033). In theory, compensation scores and aging success scores are significantly lower in the elderly compared to younger people (Soylu & Irmak, 2021). In line with Hanum & Darubekti's research, (2021) shows that the proportion of successful elderly occurs at the age of 60-69 years as much as 10.4% and age 70 years and over as much as 6.8%. Halter et al., (2009) mentioned that increasing age is associated with significant changes in the function of various physiological systems, including the endocrine and immune systems. According to researchers, age category has a relationship with the success rate of aging. Younger elderly tend to have better ability to achieve successful aging than older elderly. This decline in ability can be attributed to physiological changes in the elderly body as they age.

In this study, most of the successful aging occurred in women as many as 176 (94.6%). In the aspect of gender, there is a relationship with successful aging indicated by the p-value (0.028). Not in line with the results of research which states that the level of successful aging is higher in men, namely 31.7% and 29.4% in women (Liu et al., 2021). In theory, women have a life expectancy advantage of nearly five years over elderly men and tend to spend the remaining half of life independently. Elderly people, especially men, who do not have close friends or family are more likely to fall ill and less likely to live long (Rowe & Kahn, 1998). According to the researchers, gender has a bearing on successful aging, with older women having a longer life expectancy of almost five years than older men, and a tendency for older women to spend most of their remaining life with independence.

Most of the elderly who have a high level of successful aging are elderly who have elementary/equivalent education as many as 70 (92.1%). In the aspect of education, there is a relationship with successful aging indicated by the p-value (0.033). In line with Soylu & Irmak's research, (2021) shows that elderly people with bachelor's degrees (91.7%) and associate degrees (80.0%) are more likely

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to experience successful aging than elderly people who only have literature (45.5%), elementary school (25.0%) and secondary education (36.4%). Low levels of education and illiteracy are associated with an increased risk of disability and death with age, as well as higher unemployment rates. Education with opportunities for lifelong learning can help people develop the skills and confidence they need to adapt and remain independent as they age (Halter et al., 2009). According to researchers, education has a link to successful aging. Education has the potential to improve successful aging by supporting mental health and thinking skills.

Married seniors were more likely to achieve high successful aging as many as 109 (95.6%). In this aspect, there is no relationship with successful aging as indicated by the p-value (0.136). In theory, regarding the marital status variable, older individuals without a partner have a greater risk of having failed aging compared to those with a partner (Ulfa et al., 2019). Research by Gu et al., (2023), as many as 81.9% of the elderly were married and lived with a partner, they were enthusiastic, had a better lifestyle, shared thoughts and feelings with a partner, and received more family support than unmarried participants. Lack of social

connection leads to loneliness and contributes to the onset of illness and death (Rowe & Kahn, 1998). According to the researchers, marital status has no association with successful aging, but in the univariate analysis, it was found that married or partnered older adults had a higher level of successful aging than unmarried. This may be due to stronger social, emotional, and economic support from children or family, which can improve overall well-being.

Elderly with hypertension were found to have a high level of successful aging as many as 67 (87%). In the aspect of medical history, there is no relationship with successful aging as indicated by the pvalue (0.529). The occurrence of chronic diseases causes a decrease in physical function (Hanum & Darubekti, 2021). Research by Susanti et al., (2020) shows that from a physical perspective, there is a proportional direct relationship between the amount of physical morbidity and the level of successful aging. Individuals who reported no or less than two physical morbidities showed a higher likelihood of achieving successful aging. The incidence of disease certainly changes with age, and the likelihood of chronic disease becomes greater, for example, hypertension and diabetes (Rowe & Kahn, 1998). According

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to the researchers, disease history has no relationship with successful aging, but in the univariate analysis, it was found that elderly people who have hypertension disease have a higher level of successful aging than other disease histories. This may be due to their ability to manage their health conditions.

The status of living with a spouse was found to be the most those who achieved high aging success, with a total of 59 seniors (95.2%). In the aspect of living status, there is no relationship with successful aging as indicated by the p-value (0.425). In theory, having a satisfying relationship with a spouse has a greater effect on successful aging than living with children. Older adults tend to favor independence in relationships with children over-dependence, reflecting their changing lifestyles (Jang, 2020). Older adults who live alone have a higher poverty rate than those who live with their spouses (Mauk, 2006). According to the researcher, living status has no relationship with successful aging, but in the univariate analysis, it was found that older people living with a partner had a higher level of successful aging than others. This may be due to the fact that in addition to getting support from their spouse, the elderly also get support from their community.

Most of the elderly who do not work have high aging success as many as 134 (91.2%). In the aspect of work, there is no relationship with successful aging as indicated by a p-value of 0.155. In theory, successful aging is not solely determined by objective measurements but involves subjective criteria. For example, some older people define successful aging as not recognizing their disability or considering themselves able to maintain their independence (Amaral & Soetjiningsih, 2019). Retirement has removed a major source of social and mental stimulation (Rowe & Kahn, 1998). Income that is far or less than before requires aspects of mental readiness in dealing with social change and good self-acceptance, so as not to cause depression, frustration, and stress in individuals (Fahlevi al., et 2023). According to researchers, work has no relationship with successful aging. Retirement provides an opportunity for older people to focus on physical and mental health without the pressure of work. In addition, older adults who are not working may have more time to maintain a healthy life balance, engage in physical activity, and engage in social activities that support their overall well-being.

Most of the elderly who have an income below the minimum wage of

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Jember Regency in 2024 have a high level of successful aging as many as 161 (91.5%). In the aspect of income, there is no with successful relationship aging indicated by the p-value (0.079). The results of research by Medawati et al., (2020), stated that elderly people who work as farmers have a high level of successful aging. In theory, successful aging does not necessarily mean prosperity, but poverty makes achieving it more difficult. Financial strain can trigger stress that impacts physical and mental health (Rowe & Kahn, 1998). Low-income people often experience difficulties in obtaining health-related service needs as they age (Halter et al., 2009). According to researchers, income has no relationship with successful aging. This is because older people with low incomes may be more accustomed to living with limited resources and have developed strong adaptation strategies to cope with economic challenges. In addition, they may also have social support from their community or family that helps improve their overall well-being.

Most of the elderly who have a habit of not smoking have a high level of successful aging as many as 186 (94.9%). In the aspect of smoking habits, it was found that the association with successful aging was shown by the p-value (0.003). In theory, high non-smoking is associated with greater chances of achieving successful aging (Bosnes et al., 2019). Smoking remains a predictor of mortality even for smokers who make it to 65 years of age, but quitting smoking even at advanced ages is associated with more positive outcomes. Moreover, the relative risk of developing lung cancer is at least additive among individuals who smoke (Halter et al., 2009). The relationship between smoking and various diseases has been well documented (Birren, 2007). According to researchers, smoking is related to successful aging, older people who have never smoked have a higher rate of successful aging due to good awareness of the dangers of smoking activity.

### 5. CONCLUSION

This study concluded that the majority of the elderly as many as 198 elderly (93%) had highly successful aging, while some were in the medium category as many as 15 elderly (7%). The results also show that the characteristics of respondents such as age, gender, education, and smoking habits have an association with the level of successful aging indicated by a p-value < 0.005. The characteristics of marital status, health history, living status,

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employment, and income were found to have no relationship with successful aging as indicated by a p-value > 0.005. In addition, the highest indicators of successful aging were found in primary and secondary control indicators. The lowest indicator of successful aging was the selection, optimization and compensation (SOC) indicator.

### AUTHOR CONTRIBUTIONS

The author contribute all research activity such as conceptualization, data curation, analysis, writing & editing, manuscript revisions.

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#### CONFLICT OF INTEREST

The authors declare no conflict of interest for this publication.

### DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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