

# The Relationship between the Employment Status of the Elderly and the Quality of Life of the Elderly in Giling Village, Gunungwungkal District, Pati Regency in 2021

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## Abstract

The results of the National Labor Force Survey (Sakernas) in 2011, almost half (45.41%) of the elderly in Indonesia have the main activity of working. Data for December 2021 at the Bergas Waras Elderly Posyandu in Giling Village, the number of elderly belonging to the Bergas Waras Elderly Posyandu area is 209 elderly from 7 Rukun Warga (RW). Of the total registered elderly, 167 elderly are still working in various professions. With the large number of elderly who are still working, it shows that the physical condition of the elderly is still able to work but on the other hand the welfare of the elderly is still lacking because they still have to work at an elderly age. To determine the relationship between the work status of the elderly and the quality of life of the elderly in Giling Village, Gunungwungkal District, Pati Regency. The population in this study was 209 respondents, the sampling technique was purposive sampling, the sample was 68 respondents, the data collection tool used the WHOQoL-BREF questionnaire, the analysis test was Chi Square test with  $p < \alpha$  (0.05). The results showed that some of the respondents worked as many as 39 (57%), and most of them had a moderate quality of life as many as 50 (73%) and a high quality of life as many as 12 (18%) with the result  $p\text{-value} = 0.007 < \alpha$  (0, 05) then  $H_a$  is accepted, meaning that there is a significant relationship between the work status of the elderly and the quality of life of the elderly. Because the  $p\text{-value} = 0.007 < \alpha$  (0.05) then  $H_a$  is accepted, meaning that there is a significant relationship between the work status of the elderly and the quality of life of the elderly. It can be concluded that there is a relationship between the work status of the elderly and the quality of life of the elderly in Giling Village, Gunungwungkal District, Pati Regency in 2021.

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## Introduction

Elderly (elderly) is part of the population aged 60 years and over. WHO ( World Health Organization ) categorizes elderly people based on their age levels, namely middle age (45-59 years ), old age (60-74

years), old age (75-84 years), very old age >84 years (RI K. ,2017) .

The elderly population in the world is increasing annually where the increase in the number of elderly is the largest

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population increase compared to the population growth at other ages. Data on World Population Prospects : the 2015 Revision, in 2015 there were 901 million people aged 60 years (12% of the total global population). In 2030 it is estimated that this will increase by about 56%, to 1.4 billion (Christy & Bancin, 2020) .

The elderly population in Asia is the first order of the largest elderly population, data in 2015 with a total of 508 million elderly population, this number is 65% of the total elderly population in the world. The elderly population in Indonesia experienced an increase in 2010 of 18.1 people, then in 2014 of 18,781 people and it is estimated that the number will continue to increase per year. The largest percentage of the elderly in Indonesia is found in three provinces, namely DI Yogyakarta (13.81%), Central Java (12.59%) and East Java (12.25%) (RI K. , 2017)

The results of the Population Census in September recorded that the population of Central Java was 36.52 million. From 2010 to 2020, the increase in the population in Central Java is around 4.1 million people or an average of 400 thousand/year. Based on the results of SP2010 there was an increase in the population from 10.34% to 12.15%. In 2020, Central Java has entered the era of the aging population, when the percentage of the population aged 60 years and over reaches 10 percent and above (Statistics, 2020).

Data from the Central Statistics Agency for Pati Regency in 2017, the number of elderly people aged 60 years and over in Pati Regency was recorded as 127,077 people or 10.2% of the total population in Pati Regency of 1,239,989 people (Pati, 2017).

The results of the National Labor Force Survey (Sakernas) in 2021, as many as (59.21%) elderly in Indonesia have the main activity of working and are responsible for daily needs. As many as 86.02% of the elderly work in the

informal sector, which makes them vulnerable because they do not have employment protection, employment contracts, or proper compensation. The high percentage of the elderly who work can be concluded that the elderly are still able to carry out daily activities and work, on the other hand, it shows that the elderly have low welfare because at the elderly age they still have to work to meet their needs (Statistics, 2021).

The elderly morbidity rate is the number of elderly people who have health problems that interfere with their activities. In 2012, 26.93% or 27 out of 100 people were sick. The elderly experience a decrease in physiological function and body resistance due to the degenerative process (aging) so that the elderly are more susceptible to disease. In 2011 the cause of death in 15 districts/cities, the largest proportion in the 55-64 year age group and >65 years old was stroke and ischemic heart disease (Ekasari, 2018) .

Midwives have an important role in implementing the posyandu for the elderly, in posyandu services, midwives are at Table 5, namely the health service desk in the form of blood pressure measurements and physical examinations. The role of midwives in posyandu is very much needed with regard to monitoring the health of the elderly who are experiencing physical decline, so it is necessary to carry out health monitoring of the elderly to improve the quality of life of the elderly (Ekasari, 2018).

According to (Ekasari, 2018) suggests that the factors that affect the quality of life of the elderly include age, gender, education, marital status, employment status, and support systems. Quality of life has 4 influencing domains, namely the domain of physical health, psychological health, social relationships, and the environment. The domain of physical health is a domain that has an influence on the work



capacity of an individual. The lower the quality of life of the elderly, the higher the risk of degenerative diseases that will affect the decline in productivity and social life of the elderly.

Lumanauw's research (2017), it was found that there was a relationship between work status and quality of life with a p value of 0.000. Rohmah's research (2012), found that physical factors, psychological factors, social factors, and environmental factors affect the quality of life ( $p = 0.004$ ). Ardiani's research (2014) found that there was a relationship between work and quality of life with a p value of 0.02.

Data for November 2021 at the Gunungwungkal Health Center in Pati Regency, the 3 villages with the highest number of elderly people still working are Gunungwungkal Village with a total of 134 working elderly, Bancak Village with 153 working elderly people, and Giling Village with 167 working elderly people. Of the three villages, the largest number of elderly people who are still working is Giling Village with various professions.

Data for December 2021 at the Bergas Waras Elderly Posyandu in Giling Village, the number of elderly belonging to the Bergas Waras Elderly Posyandu area is 209 elderly from 7 Rukun Warga (RW). Of the total registered elderly, 167 elderly are still working in various professions. The number of visits to the Posyandu for the elderly in November 2020 – November 2021, the elderly visits to the Posyandu have an average monthly attendance of only 36 people or 17%. This data means that the majority of the elderly are still working in various professions, then the average number of visits by the elderly to the posyandu every month is still very low, less than 50% of the total elderly registered at the Bergas Waras Posyandu, Giling Village.

The results of the preliminary study interview conducted door to door on

October 20-22, 2021 for 7 elderly people in Giling Village, Gunungwungkal District, Pati Regency, it was found that 4 elderly people stated that they worked in different professions. Of the 4 elderly, 3 of them said that on average they have health problems often feel pain in the body and get tired easily, often feel stressed because they still have to work and meet higher financial needs, then 1 elderly said they often have difficulty sleeping at night and the next day have to work again. Meanwhile, 3 elderly people who do not work, 2 of whom say they sometimes complain of body aches or pains, and these 2 elderly people feel happy at home by playing with their grandchildren and sometimes chatting with their neighbors. Meanwhile, 1 elderly who did not work said they rarely felt sore or had body aches but said they were lonely and sad because they did not have activities at home that they could do. Based on the results of the preliminary study, it can be concluded that in the elderly who work or who do not work there are still complaints that affect the quality of life.

Based on the data and phenomena above, the researchers feel it is necessary to conduct research on the Relationship between the Employment Status of the Elderly and the Quality of Life of the Elderly in Giling Village, Gunungwungkal District, Pati Regency in 2021.

### Method

This research is a descriptive correlation research with approach cross sectional. The population in this study were 209 elderly with a sampling technique that was used proportional random sampling technique with a sample size of 68 respondents with sample criteria, namely 1) Elderly in good health. 2) Elderly with good communication, and the exclusion criteria are communication or psychiatric disorders.

The instruments used in this study were the employment status questionnaire and



the WHO-QOOL BREFF quality of life questionnaire which were adopted from WHO. The data analysis carried out is univariate analysis and bivariate analysis. This research was conducted in Giling Village, Gunungwungkal District, Pati Regency. This research was conducted on 6-11 December 2021.

## Result and Discussion

### Characteristics of Respondents

#### Age

Table 4.1 Frequency Distribution by Age of Respondents in Giling Village, Kec. Gunungwungkal Kab. Pati of 2021

Age	Frequency	Percentage (%)
60-74 (Elderly)	55	81
75-90 (Old)	13	19
>90 (Very Old)	0	0
<b>Amount</b>	<b>68</b>	<b>100</b>

Based on the results of the study, from 68 respondents, most of the respondents were respondents aged 60-74 years as many as 55 (81%) respondents.

#### Gender

Table 4.2 Frequency Distribution by Gender of Respondents in Giling Village, Kec. Gunungwungkal Kab. Pati of 2021

Gender	Frequency	Percentage (%)
Man	30	44
Woman	38	56
<b>Amount</b>	<b>68</b>	<b>100</b>

Based on the results of the study, of the 68 respondents, most of the respondents were female as many as 38 (56%) respondents.

### Univariate Analisis

#### Job Status

Table 4.3 Frequency Distribution Based on Respondents' Employment Status in Desa Giling, Kec. Gunungwungkal Kab. Pati of 2021

Job status	Frequency	Percentage (%)
Does not work	29	43
Work	39	57
<b>Amount</b>	<b>68</b>	<b>100</b>

Based on the results of the study, it showed that of the 68 respondents, most of the respondents worked as many as 39 (57%) respondents. This is because respondents who are still working are still in the age range of 60-74 years as many as 36 elderly. Elderly with this age range is an early age in the elderly category so that they still have a good physique to do work. This is in accordance with the theory of Triningtyas (2018), which states that the elderly aged 60-74 years consider themselves to be still like the age of 40 and feel strong. Supported by research Synthesa (2020), suggests that the age factor is related to the working status of the elderly in Indonesia (sig.0.000 <0.05 & coefficient phi-0.215) with the distribution of elderly workers in Indonesia being the majority in the age group 65-74 years, the more The older the elderly, the smaller the chance to return to work because they are physically weaker.

Respondents who work also because it is an activity to entertain themselves and hope to remain productive in old age. This is in accordance with the theory put forward by Suadirman (2011), that the elderly have increasing economic needs such as the need for nutritious food, the need for routine health checks, and social and recreational needs (recreation in this case is self-entertainment activities, one of which can done by work). Respondents who have economic pension benefits are better than the elderly who do not have pension benefits, this makes the elderly become dependents of the family so that many elderly choose to work. Then supported by research by Sari (2016), stated that the results of the study showed that working elderly were influenced by 2 factors, namely internal and external. The



internal factors of the elderly assume that work is fun, feels that their body is strong and capable, is a medium of entertainment. While the external factor of the elderly working is to carry out social relations in the elderly environment.

The majority of respondents who work are farmers, vegetable sellers, and traders, this is because the research locations are mostly plantations, rice fields, and community forests. This is influenced by the geographical situation of the respondents who live in the mountains so that it is very supportive for agricultural land so that the majority of people's work is farming, gardening, selling vegetables, and trading. The number of respondents who work is due to the large number of economic needs, they still feel physically able to work. This is in accordance with Suradi's theory (2020), suggesting that the occupations of highlanders include farmers, laborers, traders of produce sold to the market, tourism services, breeders, craftsmen. Supported by Andini's research (2011), suggests that in rural areas the elderly are more Many are oriented to the primary sector, especially agricultural businesses.

The results of the study also showed that some of the respondents did not work. This is because respondents who do not work experience a physical setback, causing respondents to choose not to work. This is in accordance with the theory of Twilight (2019), which states that the elderly experience physical decline in the form of physiological physical changes, the elderly who have daily activities consider themselves healthy. While the elderly who have physical, emotional, and social disorders that hinder activities will consider themselves sick. Supported by research Andini (2011), suggests that the reason the elderly do not work is because the condition of the body is no longer strong.

### Quality of Life

Table 4.4 Distribution of Frequency Based on Quality of Life of Respondents in Giling Village district. Gunungwungkal Kab. Pati of 2021

Quality of Life	Frequency	Percentage (%)
Low	6	9
Currently	50	73
Tall	12	18
<b>Amount</b>	<b>68</b>	<b>100</b>

The results showed that most of the respondents had moderate quality of life as many as 50 (73%), high quality of life as many as 12 (18%) respondents. Most of the elderly have moderate and high quality of life because these respondents have good daily activities so that they have a better physique. The respondents' good quality of life (medium and high) can also be seen from filling out the questionnaire where the majority are in the physical domain in question number 10 with the question "Do you have enough vitality for daily activities?" of the total respondents with moderate and high quality of life as many as 62 (91%) respondents got the answer as many as 49 (72%) respondents answered "in large quantities" and as many as 13 (19%) other respondents answered "very often". This is in line with Yuliati's theory (2014) based on standard references from the World Health Organization Quality of Life (WHOQoL), quality of life is a functional condition of the elderly which includes physical health in the form of daily activities, dependence on medical assistance, rest needs, sleep anxiety, disease, energy and fatigue, mobility, work capacity. Supported by research by Rohmah (2012), it was found that physical factors affect the quality of life ( $p = 0.000$ ).

The cause of the two respondents having medium and high quality of life based on the psychological domain, respondents enjoy the life they live, have good social relationships and a good environment. When viewed from the results of filling out the questionnaire on the psychological domain in question



number 26 with the question "How often do you have negative feelings such as "feeling blue" (lonely), hopelessness, anxiety, and depression ?" respondents answered " Never" and as many as 17 (25%) respondents answered "Rarely". This is in line with the theory of Yuliati (2014), which states that psychological health is positive feelings, physical appearance and images, negative feelings, thinking, learning, concentration, remembering, self-esteem and individual beliefs. Then supported by research by Rohmah (2012), it was found that psychological factors had an effect on quality of life ( $p = 0.000$ ).

The respondent's good social relations can also be the cause of the respondents' moderate and high quality of life. Based on the results of filling out the questionnaire on the social relations domain in question number 20 with the question "How satisfied are you with your personal/social relationship?" of 62 (91%) respondents, 50 (73%) answered "Very Satisfied" as many as 12 (18%) others answered "Satisfied". Yuliati's theory (2014), suggests that the social relationships of the elderly are social support, personal relationships, and sexual activity. The better the social relations of the elderly, the better the quality of life of the elderly. This is supported by research by Rohmah (2012), which found that social relations factors affect the quality of life ( $p = 0.000$ ). Furthermore, Ningrum research (2017), found that there is a relationship between family support and the quality of life of the elderly with a significance value of  $0.048 < 0.05$ .

The thing that causes the respondent's quality of life to be moderate and high is the environment. Good environmental conditions and support the elderly in daily activities can make the elderly comfortable so that it helps the quality of life of the elderly to be better. The respondents' good environmental conditions were also seen from the results of filling out the majority of the

questionnaires in question number 23 with the question "How satisfied are you with the condition of your current place of residence?" of 62 (91%) respondents, 55 (81%) respondents answered "Very Satisfied" then 7 (10%) answered "Satisfied". This is in accordance with Yuliati's theory (2014), which states that good environmental conditions such as home environment, freedom, physical safety, activities in the environment, vehicles, security, financial resources, health and social care can affect the quality of life of the elderly. Supported by research by Rohmah (2012), it was found that environmental factors affect the quality of life ( $p = 0.004$ ).

The results also showed that some respondents who had a low quality of life were 6 (9%) respondents in this study because many respondents had complaints on physical health, then felt lonely and lacked recreation, lack of social relationships, and a bad environment. This is seen based on the majority of answers to the questionnaire in the elderly who have low quality of life in each domain of quality of life. In the domain of physical health in question number 3 with the question "How often do you need medical therapy to be able to function in everyday life?" respondents answered "Very Frequently" as many as 4 (6%) and answered "In large quantities" as many as 2 (3%) respondents. On the psychological domain question in question number 5 with the question "How much do you enjoy your life?" as many as 3 (4%) respondents answered "a little" and as many as 3 (4%) respondents answered "not at all". The domain of social relations in question number 20 with the question "How satisfied are you with your personal/social relationship?" as many as 2 (3%) respondents' answers were "Not Satisfied" and as many as 4 (6%) respondents answered "Very Dissatisfied". Then on the environmental domain in question number 14 with the question "How often do you have the opportunity to have fun / recreation?" as



many as 6 (9%) respondents answered "Not at all".

In accordance with the theory of Sitanggang (2021) which suggests that the elderly can experience setbacks from physical and psychological aspects. Elderly people who have low motivation tend to experience a process of physical decline quickly too, while elderly people who have high motivation have the possibility of slow physical decline, the elderly as a minority group due to a lack of tolerance for other people so that it often results in negative perceptions from the community. Poor treatment of the elderly often results in a bad self-concept of the elderly. For example, if in a family, the elderly are often not involved in making decisions because they are considered old-fashioned. This can lead to withdrawal disorders from the elderly.

Supported by Lumanauw's research (2017), the results of research on physical activity with quality of life show a p value = 0.000. Rohmah's research (2012), found that physical factors affect the quality of life (p=0.000), psychological factors affect the quality of life (p=0.000). Then the research of Khayati & Veftisia (2018), showed the results that mothers with moderate stress had a significant relationship with pre-eclampsia p = 0.001. The results of this study indicate that a person's stress (psychological state) affects a person's health status as well as his quality of life.

### Bivariate Analysis

The bivariate test was conducted to determine the relationship between work status and the quality of life of the elderly in Giling Village, Kec. Gunungwungkal Kab. Starch.

Table. 4.5 Frequency Distribution of the Relationship between Occupational Status and Quality of Life of the Elderly in Desa Giling, Kec. Gunungwungkal Kab. Pati of 2021

Job status	Quality of Life						Total	p-value	
	Low		Currently		Tall				
	F	%	F	%	F	%			
Does not work	5	7.4	23	33.8	1	1.5	29	42.6	0.007
Work	1	1.5	27	39.7	11	16.2	39	57.4	
<b>Amount</b>	<b>6</b>	<b>8.8</b>	<b>50</b>	<b>73.5</b>	<b>12</b>	<b>17.6</b>	<b>68</b>	<b>100</b>	

Based on the results of the study, the results of the Chi Square test showed a p-value of 0.007. Because p-value = (0.007) <  $\alpha$  (0.05), then  $H_0$  is rejected and  $H_a$  is accepted, meaning that there is a significant relationship between work status and quality of life of the elderly in Giling Village, Kec. Gunungwungkal Kab. Starch. This is because the elderly who work more activities so that they have a better quality of life, in contrast to the elderly who do not work with a lack of daily activities so that there are complaints on their physicality, so it is true that work status affects the quality of life of an elderly. In accordance with the theory put forward by Sitanggang (2021), that there are differences in the quality of life between residents with student status, working residents and residents who do

not work where the quality of life of residents who do more physical activity (work) has a better quality of life. This is supported by Ardiani's research (2014), the results of the chi square test obtained p value 0.02 < 0.05 there is a relationship between work and quality of life. Lumanauw's research (2017), the results of work status research with quality of life showed a p value = 0.000. Research (Rohmah, 2012) found that physical factors affect the quality of life (p = 0.000).

Another theory that supports this research, according to KPKN (2019), suggests that elderly people aged >65 years who do physical activity (work) are very good at maintaining physical endurance and reducing the risk of various diseases. With a good physical



condition will certainly affect a person's quality of life. This is supported by Purwanto's research (2011), suggesting that someone who has daily activities such as work and other activities can prevent non-communicable diseases (PTM). Furthermore, Surbakti (2014) research suggests that work has a positive impact on energy balance so that individual productivity increases.

There are working respondents who have a low quality of life as many as 1 (1.5%) respondents. Based on the data from the questionnaire, the elderly who work with low quality of life are 75 years old and are female. Based on the age of the respondents aged 75 years. The increasing age of the elderly also increases the various declines in the physiological functions of the elderly body. This is in accordance with the theory of Ekasari (2018), suggesting that physiological changes in the elderly occur in body changes that continuously occur as the elderly age. Supported by Wikananda's research (2015), the results of the study show that poor or poor quality of life is associated with the >70 year age group.

Then based on gender is female. Gender between men and women is different because physiologically men are stronger and better than women. This is in accordance with Ekasari's (2018) theory, which states that gender is one of the factors that affect the quality of life. There is a difference between the quality of life for men and women, where the quality of life for men tends to be better than the quality of life for women. Supported by research by Ardiyani (2014), with the results of  $r = 0.89-0.95$  and  $R = 0.66-0.87$  that gender is related to the quality of life of the elderly.

Respondents who do not work have a high quality of life as many as 1 (1.5%) respondents, this happens because even though the respondents do not work but still have good daily activities, always think positively, have good social

relations and the surrounding environment. This can be seen based on the results of filling out the questionnaire to the respondent in the physical health domain in question number 3 with the question "How often do you need medical therapy to be able to function in everyday life?" The respondent answered "Not at all". On the psychological domain question in question number 5 with the question "How much do you enjoy your life?" respondents answered "Very Often". The domain of social relations in question number 20 with the question "How satisfied are you with your personal/social relationship?" the respondent's answer is "Very Satisfied". Then on the environmental domain in question number 14 with the question "How often do you have the opportunity to have fun / recreation?" the respondent's answer is "Very Often". This is not in accordance with the theory of Sitanggang (2021) which suggests that the elderly who do not work tend to feel lonely more easily because they spend more time at home and are limited to doing activities or socializing with the environment. Supported by the results of Lumanauw's research (2017), the results of research on physical activity with quality of life show a  $p$  value = 0.000 and work status with quality of life shows a  $p$  value = 0.000. This shows that in this study the elderly who work have a better quality of life compared to the elderly who do not work. The discrepancy between the theory and the results of the study can occur that the quality of life of the elderly is not only influenced by work status, it is due to various reasons. possible factors such as the respondent has a good lifestyle so that the quality of life and health is better.

### **Conclusion**

Based on the results of the study, it can be concluded that most of the respondents work, have moderate and high quality of life. The results of the Chi Square test show that there is a relationship between the work status of the elderly and the quality of life of the





elderly with p-value is 0.007 . The elderly choose to work on the grounds that they still have a strong physique, as a means of entertainment, and must meet their daily needs. The elderly who work have a better quality of life compared to the elderly who do not work because the elderly who work have more activities so that in terms of physical they are better than the elderly who do not work.

The elderly are also faced with physical decline and changes so that the elderly really need regular health monitoring. This can be done through posyandu activities for the elderly. Posyandu for the elderly is expected to be a means for monitoring the health of the elderly, such as by changing the schedule of activities for the elderly to adjust to the leisure time of the elderly who are working and not working, providing activities that can improve the physical health of the elderly such as elderly gymnastics.

#### **Thank-you note**

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