

The Role of Family in Bringing the Elderly's Well-Being into Reality in Rural Areas of Central Java, Indonesia

Argyo Demartoto¹

¹ Department of Sociology, Faculty of Social and Political Sciences, Sebelas Maret University, Surakarta, Indonesia

Correspondence: Argyo Demartoto, Department of Sociology, Faculty of Social and Political Sciences, Sebelas Maret University, Ir. Sutami Street 36 A Kentingan, Surakarta 57121, Indonesia. Tel: 62-271-637-277. E-mail: argyodemartoto@gmail.com

Received: February 9, 2013 Accepted: March 14, 2013 Online Published: April 27, 2013

doi:10.5539/ass.v9n5p191

URL: <http://dx.doi.org/10.5539/ass.v9n5p191>

Abstract

In Indonesia, social welfare is generally defined as only well-being. In Javanese perspective, well-being is not only an economic phenomenon but also a social cultural one in which the social interaction values running determining more the attempt of achieving the well-being. Family played an important part in bringing the elderly well-being into reality according to the social-cultural values developing within the society. Several aspects were related to the role of family in bringing the elderly well-being into reality: family economic income, family dependents, interaction and communication process, elderly existence and potential. The attempts of family in bringing the elderly well-being into reality included providing physical facilities, health care, social-emotional support, and recreational activity for the elderly.

Keywords: role, family, elderly, well-being, welfare

1. Introduction

The number of elderly in Indonesia increases along with the improved condition of society welfare. The change of demographic transition affects Indonesian population structure particularly the elderly population (60 years and so) shows an increase. On the other hand, the presence of change from extended family into nuclear family meaning the decreased size of family results in the increased number of family with less children. In 1990, the number of elderly who live in urban area was 5.26 percents, while those who live in rural one was 6.75 percents. This data still shows some difference. It is projected that the number of elderly people living in urban area will be same as those living in rural area in 2020, of 11.20 percents and 11.51 percents, respectively, with a variety of problems.

The management of elderly problems is conducted in two ways: government policy and service. Considering the current condition of elderly number, it is impossible for all elderly to live in nursing home (*panti jompo*) or elderly home. For that reason, it is expected that the family-based elderly management is expected to be primary option in the attempt of dealing with the elderly problems in the future.

In Javanese people, there is a social value that considers and that has been family habit, that a child or offspring is the caretaker and potential source to meet the parents' need. This habit has been existing from generation to generation and is difficult to remove. The reality of rural people's life is an environment in which the performers interact and establish subjective perception on the life welfare. Welfare is the manifestation of culture and welfare perception forms from the social interaction process of such the cultural manifestation. The presence of social change in rural area, however, has an implication to the change of relationship between the members of family including between them and elderly, social environment, and culture as well as perception on welfare. This research studied the role of family in bringing the elderly well-being into reality, particularly in rural areas of Central Java, Indonesia.

2. Literature Review

2.1 The Elderly Problems and Needs

World Health Organization (WHO) notes that the population aging process has generated a number of changes and challenges in several areas such as that in people demographic structure, epidemiological change (disease

transmission), socio-cultural change occurring as the result of eroded inter-generation relationship as well as the challenge resulting from the gender gap occurring so far (Arber & Ginn, 1993; Graeme, 1994).

The advanced age population (60 years and so) grows very rapidly even more quickly than other group. In 2000, the number of elderly in the world is about 60 millions, and this number is estimated to increase to 1.2 billions in 2025 and to 2 billions in 2050. At that time, the number of elderly will be higher than that of 1-14 age children. In 2002 about 61% (400 millions) elderlies were in developing countries. In 2025, this number is estimated to increase to 70% (840 millions) and to 80% (1.6 billions) in 2050. A half of world's elderlies live in Asia and its proportion tends to increase. Indonesia is on the fourth position in Asia following China, India, and Japan (WHO, 2012).

The population aging phenomenon is the most important trend in the 21st century. It has wide implication to entire aspect of life. In the world there are 2 persons celebrating their 60th birthday every second or about 58 millions 60th birthday events per year. Currently, there is 1 out of 9 persons aged 60 years or so. It is projected that 1 out 5 persons aged 60 years or so in 2050. Today, the Life Expectancy Age of 80 years occurs in 33 states, 5 years before only occurs in 19 states. Today only Japan has elderly >30%, in 2050 there will be 64 states (WHO, 2012).

The growth of elderly (60+) in Indonesia increases. It can be seen from the table below:

Table 1. The elderly (60+) growth in Indonesia

Year	Life Expectancy Age	Elderly Number	Proportion
1980	52.2	7,988,543	5.45%
1990	59.8	11,227,557	6.29%
2000	64.5	14,439,907	7.18%
2010	67.4	23,992,553	9.77%
2020	70.2	28,882,879	11.34%

Sources: The Statistic Bureau's (BPS's), 2010

The number of elderly in Indonesia was 14.4 millions in 2000 (7.18%), it is predicted to increase to 28.8 millions (11.34%) in 2020, and it is about 23 millions (10%) today (Graeme, 1994; Anwar, 1997). Based on the Statistic Bureau's (BPS's) data, the provinces with the number of elderly over 7% of total Indonesian population are Daerah Istimewa Yogyakarta (14.02%), Jawa Tengah (10.99%), Jawa Timur (10.92%), Bali (10.79%), Sulawesi Selatan (9.03%), Sulawesi Utara (8.91%), Sumatera Barat (8.69%), Lampung (8.29%), Nusa Tenggara Barat (8.21%), Nusa Tenggara Timur (8.01%), Jawa Barat (7.95%), and Maluku (7.27%). The social, economic and health conditions of elderly in rural area is generally worrying. The neglected elderlies are about 2.7 millions people. The ratio of elderly dependency is 13.52. The education level of elderlies is generally low, not graduated from Elementary School and not studied at school (BPS, 2010). Central Java's Demographic Profile based on 2010 Population Census Result states that the number of elderlies in Central Java is 2,323,541 (7.55 %) of total population number.

Generally the social problem of elderly revolves around the dependence. Elderly period results in powerlessness deteriorated physical and mental power. This powerlessness leads to dependence, and dependency requires other's spiritually and morally help. In addition, as a human, elderly has need. These two factors become cause and effect, meaning that when immediate and compelling dependence and need are not dealt with or met, it will become a problem (De Beauvoir, 1972; Cumming & Henry, 1961; Hazan, 1993; Achenbaum, 1993; Arber & Ginn, 1993; Graeme, 1994; Oswari, 1997, Kreager & Butterfill. Eds, 2004).

The needs of elderly include decent standard of life and residence; social relationship and activity in any time to deal with silence; health care and prevention of damage attacking the elderly life. In addition, there are characteristic needs of elderly. The first is the well-fulfilled physical need such as the basic need of living fairly, food and clothing; well health care and spare time spending need fulfillment. The second is the well fulfilled spiritual need, such as the need of affection from family and community surrounding as well as the improvement of life passion and no apprehension in dealing with his/her remained life. The third is the well-fulfilled social need particularly the good relationship to the surrounding society (Friedan, 1993; Kreager & Butterfill. Eds, 2004; Demartoto, 2007). The complexity of elderly problem, borrowing Bernard Starr, PhD's term, a

Gerontology professor of Marymount Manhattan College, can be likened to a silent revolution “comparable to other great revolution of history, the Renaissance and the Industrial Revolution that transformed every aspect of life in this planet”.

2.2 Well-Being as a Part of Social Welfare

The welfare concept is frequently defined differently by different people in different countries. Referring to Spicker (1995); Midgley, Tracy and Livermore (2000); and Thompson (2005) the social welfare at least contains four meanings.

Firstly, it is as well-being. This definition usually points to the term social welfare as the condition in which the material and immaterial needs are fulfilled. Midgley et al defines social welfare as “a condition or state of human well-being” (Midgley et al., 2000: xi). Well-being occurs when the human life is safe and happy because its needs for nutrition, health, education, shelter, and income are met; as well as when the human obtains protection against the main risks threatening its life.

Secondly, it is as social service. In UK, Australia and New Zealand, social service generally embraces five forms: security, health care, education, housing, and personal social service.

Thirdly, it is as social benefit, particularly in United States, given to the poor. Because majority welfare recipients are poor, disabled, unemployed, this condition can lead to negative connotations against the term welfare such as poverty, laziness, dependency, and more properly called “social illfare” rather than “social welfare”. Linda Gordon wrote that the term social welfare in United States frequently becomes the word with negative connotation because social welfare is frequently only defined as the social benefit for the poor. In her opinion: “In the last half-century, the American definition of “welfare” has been reversed. A term that once meant prosperity, good health, good spirits and social respect now implies poverty, bad health, dependency, and social disrespect.” (Zastrow, 2000 : 21).

Fourthly, it is as a planned process or attempt taken by individual, social institutions, society or government institution to improve the quality of life (first definition) and to organize the social service (second and third definition).

In Indonesia, the term social welfare is generally defined as only a well-being (first definition). For that reason, to indicate that the social welfare meaning can also be defined as a process or activity system in social service and social benefit areas (second, third, fourth definition), a term social welfare development is introduced. The social welfare development is a series of planned and institutionalized activities intended to improve the standard and quality of human life. In other countries, the term used widely is “welfare conceptually including entire process and activity of making the citizen prosperous and of clarifying the social service system and social protection scheme to disadvantaged group (Suharto, 2006 b). In Indonesia the term social welfare should be used, but the word “social” use in social welfare development phrase is intended to confirm that “welfare” not merely refers to the physical or economic prosperity. In addition, the word “social” is also used to confirm that this activity focuses on making “many people”, particularly the disadvantaged group, prosperous. Thus, philosophically, the social welfare development focuses more on the welfare state concept, emphasizing on defending the weak, rather than the capitalists frequently only promoting the strong group’s interest such as investor, the have, and other elite groups.

In developed countries, particularly those holding ‘welfare state’ ideology, the social welfare development is the manifestation of state obligation in ensuring the citizen’s basic rights. Because this system’s substance refers to the importance of state role in the social welfare development, the welfare state can also be interpreted as “state welfare”, in the sense that the state playing an active role in developing its social policy specifically focusing on fulfilling its weak and disadvantage citizens’ basic needs.

In Indonesia, although its constitution *de jure* refers to the welfare state system, the implementation of the state’s plea on the rights of the poor and the deprived children, and the social security organization still faces various constraints. In addition to the state organization’s less solid conception and commitment to social welfare development, the neoliberalism sets forth the market power, financial capital investment, and aggregated economic growth is considered as more promising the prosperity than welfare approach setting forth the social justice, social investment and human resource capacity reinforcement.

In the national development context, the social welfare development can be defined as entire policy and program developed by government, business field, and civil society develop to deal with social problem and to meet the human need through social work approach. The objective of social welfare development, the first and the foremost, is poverty management in its manifestation form (Suharto, 2006 a). Although social welfare

development is designed to meet the wide public's needs, the primary target is those having constraints in undertaking their social function so that they cannot meet their very basic life needs and thereby needs social welfare care. For example: the poor, the disabled, the deprived children, the street child, the child/woman experiencing domestic violence, the deprived elderly, those with HIV/AIDS, informal sector workers, industrial workers who does not get social security and etc. So, the social welfare development has a strategic importance to the national development (Suharto, 2008).

The welfare philosophy is holistic and integrated in Indonesia; it is included into its constitution so that any development policy is undertaken comprehensively in the objective of developing the human being wholly. Indonesia is responsible fully for its people welfare. It is included into the article 27 clause 2 of 1945 Constitution reading: "Every citizen deserves decent job and life for the sake of humanity". In Republic of Indonesia's Law No. 13 of 1998 about Elderly Welfare, it is firmly stated that whom called elderly is the man or the woman in 60 or so age. Meanwhile, the social elderly welfare is a life and living order of elderly, either materially or spiritually, encased with feelings of security, morality, external and internal tranquility enabling the elderly to attempt to fulfill his/her physical, spiritual, and social needs as well as possible for his/her self, family and community by upholding the human rights and obligation, corresponding to Pancasila (Five Principles).

In Indonesia, the management of elderly problems is conducted in two ways: government policy and service. In government policy way, the Indonesian government's commitment to elderly welfare is manifested in a variety of government policies, programs and activities such as: the Republic of Indonesia's Law No. 13 of 1998 about Elderly Welfare, Republic of Indonesia's Government Regulation No. 43 of 2004 about the Implementation of Elderly Social Welfare Improvement Attempt; Republic of Indonesia's Presidential Decree No. 52 of 2004 about National Commission for Elderly; Republic of Indonesia's Interior Minister Regulation No. 60 of 2008 about the establishment of Elderly Local Commission and Community Empowerment in Dealing With Elderly in local area; National Action Plans of 2003 and of 2008 for Elderly Welfare; Republic of Indonesia's Law No. 11 of 2009 about Social Welfare as well as other policy, regulation, decision, and ministerial circular related to elderly. From normative and objective aspect, it is implied that actually there is government's strong seriousness in dealing with elderly problems (and it is what expected by the elderlies), but the government and related institutions, either the government-owned or private ones, attempt less optimally to bring it into reality.

Meanwhile, in service way, the attempt of dealing with elderly problem is divided into three interrelated service groups. The first is family-based service. In this service, the elderly lives in family atmosphere along with son/daughter or other relatives or in elderly house lonely, husband and wife, with or without the presence of son/daughter or relatives. The second is community-based service. In this service, the elderly remains to live in his/her own house or family and uses the service provided at certain place and time. This service is generally organized by the public social organization including the elderly social organization. The third is institution-based service. The service through institution is given to elderly requiring intensively management for short-term or long-term healing, rehabilitating, and treatment objective (Graeme, 1994; Demartoto, 2007).

2.3 Family in Kinship System in Rural Areas

This research was limited to the elderly living in rural areas. The classification of rural area is as follows: the rural area people are homogeneous (in the terms of livelihood, life values in culture, and attitude as well as conduct); the rural life emphasizes more on the family as an economic unit; geographical factor highly affects the existing life (i.e. the members of society's tie to their land or homeland) as well as more intimate and endured relationship of one members to each other, as well as the larger number of children in the family (Roucek & Warren, 1963 : 78).

In rural society the collectivity of relationship is still traditional, so that the any action or activity or behavior of society within it is still traditional as well. In Weber's perspective, traditional action includes the conduct based on the habit emerging in established practices and respect to the existing authority. So, in this case the strong consensus of the society leads to a traditional action (deriving from the ancestor that is still held strongly), still has strong existence in the social interaction of society. It means that the action remains to become the guidelines in society behavior as the attempt to pass the tradition down into the next generation. Such the patterns are still encountered in rural conservative society (Campbell, 1964). It appears in rural society's behavior in giving service to parents, particularly the elderly ones.

However, the typology of traditional society in its entire action tends to change with the social dynamics existing within the society. This change then enters social and cultural dimensions. These various social changes creates a new system in society life having life pattern replete with modernity values from the urban areas. It means that the rural area will experience modernization gradually. This modernization can change several social system of

rural society into the new social structure, oriented to urban society modernization, from mindset, way of behaving and even that related to ideology. The characteristics of modernization, according to Kumar, is the emergence of individualism, differentiation, rationality, economics, and development toward globalization (Sztompka, 1994).

A variety of changes generated in this modernization, brings significant change and effect into the rural society's life. These include the service to the elderly, in this case, appearing from the changes of traditional action into the rational one that will lead to the emphasis on the individual interest and advantage. In the rural society life, this condition befalls nearly all social institutions existing. They generally begin to change and to shift in their function following the dynamics occurring within the society. Gradually, the society begins to move from the homogenous to heterogeneous one. It is also true in the family institution, constituting the one considered as important to the society life growth.

The conception of family is frequently differentiated according to the approach. The structural functional approach views family as a small group with certain characteristics (structure and function) to maintain survival (Murdock, 1965; Coser & Rosenberg, Ed, 1957; Goode, 1970; Coser, 1974; Turner, 1978; Anderson, 1973). The basic characteristic of a social structure, according to Merton, is a status not only involving a related role but also a number of related roles. Merton introduces the concept of role set, defined as "complement of role relationships which persons have by virtue of occupying a particular status" (Merton, 1965: 369). The Sociologists identifies a variety of family functions: sexual organization, reproduction, socialization, affection, status definition, protection and economy (Horton & Hunt, 1984).

Meanwhile anthropologists view the family as having different meaning according to local custom. Family is composed of and consists of people bond in a marriage, blood relationship and adoption according to the custom the community recognizes. In the family, there are people units who interacting; it is identified as kinship system (Murdock, 1965; Jay, 1968; Bell, 1979; Geertz, 1985; Lee, Mancini & Maxwell, 1990). Kinship system is a very important part of social structure. Meyer Fortes suggests that a society's kinship system can be used to describe the social structure of corresponding society. Kinship is a social units consisting of several families having blood or marital relation. The members of kinship are father, mother, children, children in law, grandchild, brother, sister, uncle, aunt, grandfather, grandmother, and so on (Fortes, 1969). In sociology-anthropology study, there are some types of kinship group from the relatively small number to the large one such ambilineal family, clan, fatri and paroh of society. In general society, we also recognizes other kinship groups such as nucleus family, extended family, bilateral family, and unilateral family.

(Javanese) Family is a marriage bond the community recognizes in which the members of it (father, mother, and offspring) relate familiarly, having their own position and doing their own role according to the cultural values of their community. The family assumes the duty of nurturing (socializing) the welfare values and attempts to achieve its members' life welfare (Geertz, 1985). Javanese perspective does not separate physical (material) from spiritual (non-material) welfare, because Javanese people's life is a spiritual experience. In undertaking their status and achieving degree, property, and competency in life, the feeling of composed (inner happiness) should grow. It can be accomplished when Javanese people can perform their role according to their status. Such the feeling of composed includes three grades: feeling of healthy (*rahayu*) as an individual, feeling of secure (*slamet*) as social creature, and feeling of peaceful (*ayem tentrem*) as the creature relative to supernatural world (God) (Geertz, 1985; Mulder, 1986; Kartodirdjo, 1987; Suseno, 1996).

In the term of elderly welfare, the writer views that a family social unit is a social-cultural unity. Thus, the social interaction process (social network) between the members of nuclear family (father, mother and not-married children) is the most important thing, because it is the channel of socializing the welfare values reflected through ceremony, exchange (communication) of life experience stories. Even this social welfare can extend to the wide relativity level in the attempt of achieving the family's life welfare.

3. Research Methods

This research is a qualitative research with case study, the one conducted intensively and in-depth to a case in certain social environment (Yin, 1981; Denzin & Lincoln Eds, 2000). The case study selected was intrinsic case study meaning to study the case specifically. In line with the objective of research to find out the role of family in bringing the elderly well-being into reality in rural area, this research was conducted in Berjo Village, Ngargoyoso Subdistrict, Karanganyar Regency, Central Java of Indonesia, because many elderly populations remain to live along with their family. The data collected in this research derived from the primary data including elderly, elderly' son (daughter)/family, neighborhood chief (*Ketua RT*), neighbors, and secondary data including village monograph. Meanwhile the quantitative data became the supporting data in this research. The sampling

method used in this research was purposive and snowball sampling techniques to represent the population. Techniques of collecting data used in this research were in depth interview, interview guide, direct observation and documentation. The data obtained from the field was then analyzed qualitatively using an interactive model of analysis encompassing data reduction, data display, and conclusion drawing (Miles & Huberman, 1994).

4. Results and Discussion

Berjo Village administratively lies in Ngargoyoso Subdistrict, Karanganyar Regency, Central Java Province of Indonesia. In 2012 monograph of Berjo Village, it is mentioned that the population of Berjo Village consists of 5281 people divided into 1401 households. The number of male populations is 2648 or 50.1%, while the female is 2633 or 49.9% out of Berjo Village's total population. Viewed from education group, it can be seen that the largest number is in 19 years and so age group of 3075 people or 58.2% and the smallest one is in 04-06 years age group of 275 people or 5.2%. Meanwhile for the worker group, the largest number is in 57 years and so age group including elderly of 1395 people or 32.9%, and the smallest one is in 15-19 years age group of 360 people or 8.6%. The elderly generally lives along with their family. Majority populations of Berjo Village are farmers.

4.1 Social, Economic, and Cultural Aspects of Family in Rural Areas

House is the place where all individuals socialize related to the genealogic bond. Genealogic bond is due to the presence of marriage, blood, or adoption bond. Family is a place where husband, wife and son/daughter undertake social economic function according to their own right and obligation. A husband's obligation in a family is as a chief of household, to make living to meet the economic need of family and to educate the child. Meanwhile a husband's right is to get happiness. Similarly, a wife's obligations include to meet husband's need, to educate child, to create happy circumstance within the family. And the wife's right is to receive expenditure money as well as to get protection. In the context of patriarchic culture, the family head highly affects the family service process, so that a good or bad service is determined by the family head or leader's wisdom and authority.

Generally, a type of job affects any income. Majority respondent's job is farmer. The farmer is differentiated into owner farmer, worker farmer, and labor farmer. Some respondents are civil servants and entrepreneurs. The family's economic income is varied from less than IDR 750,000 to more than IDR 1,500,000. The respondent income is obtained routinely and non-routinely. The income obtained routinely every month occurs in the respondents working as civil servant, while non-routinely one occurs in the respondent working as farmer.

The burden of every family in rural area is not always the same because it is affected by the number of family members and their own welfare level. From the result of research, the answer about the burden of family is obtained, majority of which consists of 3-5 members including husband and wife, child (offspring) and parents (grandfather/grandmother).

Interaction and communication process can occur when an individual meets another. In the family, there is an interaction and communication process when the members of family gather during having dinner, watching television, performing religious service or *sholat* and etc. Many respondents having family gathering hour in the evening at about 06:30 p.m. From the result of research, it can be found that the gathering schedule is related to the respondent's job. Majority respondents only sometimes conduct gathering and relaxing activity because every member of family cannot always assemble. The reason is because one member of family should make living outside town. It makes the family gathering schedule cannot be held routinely. Meanwhile, for those answering 'routinely', they have a reason that all members of family can meet and assemble because there is no member working outside town.

Elderly can be categorized into productive and non-productive. The productive elderly can spend their time loneliness by doing some activities according to their ability and physical strength (Hazan, 1993). Considering the elaboration above, the elderly potential that still exists should be utilized. It means that elderly activity can affect the family-based service process. Modernization has result in changing mindset (education) and high mobility among the rural populations. There is a change of Javanese perspective in looking for the feeling of composure for the family (Butterfill, 2004: 132). Some people feel happy in the presence of elderly in the family, but some other feel burdened. Most household heads in Berjo village consider that in the presence of parents amid the family, they can repay their merit or attention they had given to them and as the form of a child's respect to his/her parent all at once. Meanwhile some others consider that the presence of elderly burdens them because of the elderly's attitude and the chief of family's feeling of less capability in the term of economic income and too many burdens in the family.

4.2 The Attempts the Family Took to Bring the Elderly's Well-Being into Reality

Family as a social cultural unity is a channel for socializing the welfare values manifested in a variety of actions.

The attempts the family took to bring the elderly's well-being into reality included providing the decent shelter (residence), meeting the clothing and food need, providing health care, giving social emotional support as well as recreational activity.

The elderly's physical need fulfillment includes the provision of bed and bedroom, clothing, food and beverage. The result of research showed that the provision of bedroom and bed for the elderly conducted by the family head to elderly falls into two categories of answers: 4 respondents or family head builds room and provides bed specially according to the (elderly) needs. Meanwhile 6 respondents or family head do not builds room and provides bed specially with the reason that their parents prefer taking a rest along with their grandchild. Some other state that they do not provide special rest room because of their too many burden, thereby the elderly should take a rest along with other members of family (grandchild).

There are three categories of clothing provision by the family head to the elderly: 5 respondents provide the need for clothing once in six months, 2 respondents are less capable of doing so because they have no special cost to meet such the need, and 3 respondents sometimes provide such the need because the elderly receives help from other family. Meanwhile, there are three ways of fulfilling the elderly's need for food taken by the family head. In the first category, it is mentioned that the food fulfillment has been adequate, meaning that the family head provides food, beverage as well as side dishes according to their (elderly's) wants. The food is served three times a day. The second category has not been adequate, meaning that the family head serving the food inconsistent with the elderly's want. The third category has not been consistent (has not been appropriate), meaning that the family head serves the food not consistent with the elderly's want and event it is served less than three times a day.

In Berjo Village, some family head develop routinely schedule of health care and some other do not so. Majority respondent answer 'not routinely' meaning that the implementation of health care is only conducted when the elderly develop health disorder (is ill). Social emotional support for the elderly is highly required, because the elderly will usually face problems, either physically or socially. Physical problem is due to the natural process everyone cannot avoid, while social problem results because of environment influence, such as retired period arrival, life style change, decreased economic income due to post termination, feeling or aware of death and many other social problems due to environment. The social emotional support for the elderly can derive from the family or other's family (MacDonald & Rich, 1991). The majority respondents answer "necessary" and some other answer 'very necessary'. It proves that the social-emotional support for the elderly should be taken into account.

Considering the problems faced by the elderly above, the elderly needs motivation either from inside or outside family in order to be able to deal with their problems. The motivation here is defined as the creation of good interaction and communication process by the members of family and the people surrounding the elderly. It is conducted by carrying out recreational activity. The recreational family activity is spent by relaxing and chatting activities with the fellow members of family, watching television together and visiting the relative's and neighbor's houses (Agustina, 2001; Marianti, 2004).

The family recreational activity can be carried out at home or outside home. The recreational facility at home may include: watching television together, assembling with all members of family and doing hobby or preferred house work, such as making handicraft, cultivating the flower and so on. Meanwhile the recreational activity outside home includes: visiting the relative's or neighbor's houses and visiting the tourist objects or worship places, such as attending religious events (*pengajian*).

The result of research showed that the activity of fulfilling recreational need for the elderly was done mostly at home, while the recreational activity outside home was done by visiting the relative's and neighbor's house. The number of families visiting the tourist object was very small. It was because the family head feels incapable of assuming the recreational cost of all members of family. 30% or 3 family heads made recreational activity schedule outside home, while 70% or 7 family heads did not so. The recreation activity was carried out by visiting the tourist object and visiting the relative's house outside town. According to the result of research, the recreation activity was usually conducted once or twice a year.

4.3 The Family Attempted to Provide the Best Service to the Elderly

In Indonesia, the effect of environment, custom, Eastern culture contributes very considerably to the family's attitude and behavior in dealing with the elderly issues. Indonesia is known as agrarian country, the society of which giving more place or respect to the elderly compared with that of industrial countries. Generally, the society has good attitude toward the elderly and puts the elderly on to the respected position. Indonesian people generally still holding extended family system will adequately welcome the presence of the elderlies with them.

In Java, the society highly respects the elderly (*mikul dhuwur mendem jero*: raising highly and digging deeply).

In the past, Indonesian families was generally happy for being able to nurture and to take care of their parents well, but when their children or children in law began to be preoccupied with their own interest, the elderly was considered as disturbing. Nurturing the elderly involves a number of ethical consideration recently. It is particularly related to the change of kinship pattern. In Indonesia, in rural (traditional) community, there is still extended family, generally an individual is not afraid of being old because his/her role and position remains to be guaranteed within the society. So are the respect from family and the society (Butterfill, 2004; Marianti, 2004). But, it is in contrast to the modern society consisting of nuclear family. When privacy and independence becomes paramount value, nurturing and taking care of parents are considered as secondary burden or even distraction to the family (Parsons, 1973).

The family's service to the elderly is highly affected by the internal factors of family such as: economic income, number of burden, interaction and communication process as well as the presence and potential of elderly. The social-cultural value of rural society encourages the rural families to attempt to provide the best service to their parents moreover to those elderly (Suseno, 1996). It can be seen from the families in Berjo Village that provided decent residence, comfortable bed or resting place adjusted with the elderly's need. The elderly has physical condition not as perfect as the younger. Elderly frequently develops muscle spasms; for that reason, they need comfortable bed to take a rest well without pain physically when they wake up. The most important thing the family should do is to give protection to the elderly from the hot and cold weather, or perhaps from living organism's disruption such as from those irresponsible people or animal. In addition, the worship facility should also be provided. Observing other's opinion stating that generally in advanced age, an individual will usually spend his/her time to close to the Creator, by means of performing religious service (*beribadah*) persistently and asking for God's forgiveness to his/her sins (Demartoto, 2007). Considering the opinion above, the provision of religious service performance facility for the elderly is desirable in the family. Such the facility provision can be done by preparing the place for *wudlu* that should take into account the physical condition of the elderly, and then adjusted the *sholat* place.

The families in rural area also provided services in the term of fulfilling the elderly's need for food and clothing. All of the ten family heads (respondents) stated that what they did to meet the food need was to provide the meal need for the elderly. This meal provision was adjusted with the elderly's need. The elderly usually develops some disorders during consuming food. Such the disorders are due to loose teeth because of natural process, digestion disorder, and disease suffered from. Thus, the fulfillment of family's food need should be adjusted with the elderly's condition existing within the family (Kane, 1994). Meanwhile, the clothing fulfillment is to provide cloth. The cloth functions to protect body from hot and cold weather, as well as to cover body in order to look tidy and beautiful. In fulfilling the clothing need, the family should pay attention to and should ensure the cleanliness of the clothing (Oswari, 1997). In the past, the cloth was not basic need for the primitive (traditional) people, but in the present, cloth is the basic need. It is because of the cultural and age development effect. So, if the cloth is the basic need for the elderly, it should be fulfilled.

Health care is needed by everyone, moreover by those who have immediately health care need such as the elderly. The service intended here is the health care carried out by the family at home (Sing, 2009). Generally, the health care is usually carried out in the hospital or in *Puskesmas* (Public Health Center), but the health care to the elderly needs to do at home as well, such as maintaining the health and cleanliness of house environment, particularly the elderly's bed room; organizing daily menu according to the need as well as taking some action immediately when the elderly develops some disorder.

Maintaining the health and cleanliness of house environment is the family's duty and obligation. The elderly, in this case, is dependent on this service process, moreover in the term of daily meal need. The family has big contribution and is very determinant, because the elderly has not been productive anymore, and the nutrition fulfillment usually becomes the difficulty for the low-income family. Therefore, there should be help (grant) from the have family. The elderly usually develops some diseases. For that reason, the family should provide special fund in dealing with the elderly's health care problems. The health care is intended to maintain the elderly's body condition in order to remain healthy. Because of family's limited ability of providing health care, when the elderly is ill, the family should take him/her to the hospital or *Puskesmas* in order to get more intensive treatment.

Social-emotional support is very desirable to every living human, because in the presence of other's support or motivation, the human will have the spirit of living. Having entered advanced age, human being will experience physical deterioration and social problems. Physical deterioration in elderly is due to natural process such as the

changes occurring in body organ. It has been mentioned that the causes of physical changes are: the changes of cell number and size within the body, that of nervous system, of auditory system, of visual system, of respiratory system, of genital urinary system, of endocrine system, of dermatology system and musculoskeletal system (Darmojo & Hartono, 1991; Kane, 1994).

Meanwhile, the social problem the elderly faces is generally due to the social changes such as retired period arrival, feeling or being aware of death, change in living, economic problem due to termination from the post, chronic disease and incapability, loneliness due to isolation from social environment, five sensory nervous disorder, leading to blindness and deafness, malnutrition due to the loss of post, a series of losses, the loss of relationship with friends and families as well as that of power and physical failure (Perlmutter, 1992; Arber & Ginn, 1993; Agustina, 2001; Weiner & Solomon, 2007).

Considering the problems the elderly faces as elaborated above, the elderly has dependence on the family, particularly child (son/daughter) or offspring of the elderly. The family plays an important role in helping deal with the problems the elderly faces, either physical or social problems. Social emotional supports is very needed from the family, because in the presence of support, the elderly is expected to enjoy his/her remained life with pleasure and happiness. The social emotional support can be carried out by creating good interaction process between the fellow members of family as well as by giving the elderly the opportunity of interacting and communicating with the fellow elderlies to recall their happy times in the past Agustina, 2001; Butterfill, 2004).

Culturally, Indonesian people, the majority of which are Muslim, emphasizes more on the role of family, either nuclear or extended family, to take care the elderly. For some Indonesian people, sending the elderly to the elderly house (nursing home) is considered as indecorous or disrespectful action (Adi, 1982; Butterfill, 2004).

The need of recreation is necessary to everyone, because by means of recreation, the life weariness can be reduced, moreover when the recreation is carried out by those who need relaxing time, such as the elderly. The recreation activity can actually be carried out everywhere, at home or outside home. The recreational facility at home may include: watching television together, assembling with all members of family and doing hobby or preferred house work, such as making handicraft, cultivating the flower and so on. Meanwhile the recreational activity outside home includes: visiting the relative's or neighbor's houses and visiting the tourist objects or worship places, such as attending religious events or *pengajian*. The recreation activity outside home is usually carried out in certain day but that at home can be carried out everyday.

The family plays a very important role in nurturing the welfare value and in achieving the welfare (Adi, 1982). Although the small (nuclear) family pattern had developed in Berjo village, but the extended family life sufficiently occurred and ensured the welfare of both young and elderly families by giving the feeling of secure and composed.

In the attempt of ensuring the elderly welfare, spiritually and materially, in addition to the services explained above, the preventive action and the development of elderly potential should also be taken into account. It is because the welfare is not only economic phenomenon but also social-cultural phenomenon in which the social interaction values proceeding determining more the attempt of achieving life welfare.

5. Conclusion and Recommendation

5.1 Conclusion

Considering the ever increasing number of elderlies in Indonesia, it is impossible for the nursing homes (elderly houses) to accommodate them. For that reason, family is the primary option in the attempt of dealing with the elderly problem.

Family is the most decent means of dealing with the elderly, particularly because of the family's social-emotional support highly endorsing the successful elderly problem management. In the presence of economic-financial support, the elderly problem will be coped with more easily. In practice, the elderlies can transfer their ability and experience to all members of family, particularly the young generation. In the family, inter-generation interaction is manifested more easily in the attempt of preventing the gap between two generations. In addition, it can reduce the government's and community's (social organization's) burden in dealing with the elderly problem.

5.2 Recommendation

The elderlies tend to experience certain problems from self adjustment and social problems that are unique in nature, such as increased physical and economic dependence on others. Considering the problem faced by elderly, special management as well as service are required to make the elderly enjoys the rest of his/her life journey with

the feelings of composed, secure, and happy. Such the management can be carried out by means of giving the elderly the opportunity of transferring his/her ability or experience into the family, particularly into the young generation.

Recalling that all needs still exist in the elderly despite different level, it is easy to presume that such the image is not consistent with the actual condition of the elderly. For that reason, it is recommended to attempt the productive activity forms and positive social relationship for the elderly who lives along with his/her family.

In addition, it should be taken into account the balance of the external-oriented attitude by considering the physical and psychical needs existing in the elderly and the internal-oriented one by always remembering to be close to God as the creature with religion and God. It is through this attitude balance, that the elderly could reach the true life happiness.

The elderlies should have an attempt of surviving such as: attempting early to be elderly, never expecting that their children will nurture them, and it is a less appropriate thought and opinion. For that reason, the parents that would be elderly should be ready to face the life independently.

Regarding the elderly dependence problem on the family, there should be such attempts as giving compensation (sympathetic) fund for the poor family that should cater the non-potential elderly, productive business help for the potential elderly, house repairing help as well as social illumination to the family about the elderly service. The government should carry out this in the attempt of helping the implementation of family-based service.

References

- Achenbaum, W. A. (1993). "Old Age". In Mary et al. (Eds.), *Encyclopedia of American Social History* (Vol. 3). New York: Charles Scribner's Sons.
- Adi, R. (1982). *The Aged in The Homes for The Aged in Jakarta: Status and Perceptions*. Jakarta: Pusat Penelitian Unika Atma Jaya.
- Agustina, N. (2001). *Back to Childhood: A Study on Urinary in Continence Perception among the Female Elderly in Jakarta*. Thesis Master Medical Anthropology. Amsterdam: Universiteit Van Amsterdam.
- Anderson, M. (Ed.). (1973). *Sociology of the Family*. New York. London: Penguin Education.
- Anwar, E. N. (1997). *Demographic Characteristics of Aging in Indonesia*. Jakarta: National Family Planning Coordinating Board. Ministry of Population.
- Arber, S., & Ginn, J. (1991). *Gender and Later Life: A Sociological Analysis of Resources and Constraints*. London: Sage Publications.
- Badan Pusat Statistik. (2010). *Sensus Penduduk 2010*. Jakarta: Badan Pusat Statistik.
- Bell, R. R. (1979). *Marriage and Family Interaction*. Homewood IL: Dorsey Press.
- Butterfill, E. S. (2004). Adoption, Patronage and Charity Arrangements for Elderly without Children in East Java. In P. Kreager, & E. S. Butterfill (Eds.), *Ageing without Children European and Asian Perspectives*. New York & Oxford: Berghahn Books.
- Campbell, J. (1964). *Honor, Family and Patronage*. Oxford: Clarendon Press.
- Coser, L. A., & Rosenberg, B. (Eds.). (1957). *Sociological Theory: A Book of Readings*. New York: Macmillan Company.
- Coser, R. L. (Ed.). (1974). *The Family : Its Structures and Functions*. New York: Macmillan Publishing Co. Inc.
- Cumming, E., & Henry, W. E. (1961). *Growing Old: The Process of Disengagement*. New York: Basic Books.
- Darmojo, R. B., & Martono, H. (Eds.). (2000). *Ilmu Kesehatan Usia Lanjut*. Jakarta: Balai Penerbit Fakultas Kedokteran Universitas Indonesia.
- De Beauvoir, S. (1972). *The Coming of Age*. London: Puttman.
- Demartoto, A. (2007). *Pelayanan Sosial Non Panti Bagi Lansia Suatu Kajian Sosiologis*. Surakarta: UNS Press.
- Denzin, N. K., & Lincoln, Y. S. (Eds.). (2000). *Handbook of Qualitative Research*. California: Sage Publications Inc.
- Fortes, M. (1969). *Kinship and the Social Order: The Legacy of Lewis Henry Morgan*. New Brunswick, New Jersey: Transaction Publishers.
- Friedan, B. (1993). *The Fountain of Age*. New York: Simon & Schuster.

- Geertz, H. (1985). *Keluarga Jawa*. Jakarta: Grafiti Press.
- Goode, W. J. (1970). *World Revolution and Family Patterns*. New York: The Free Press.
- Graeme, H. (Ed.). (1994). *Future Directions in Aged Care in Indonesia, Proceedings of Joint Indonesia-Australia Seminar*. Hilton International Hotel. Jakarta.
- Hazan, H. (1993). *Old Age: Constructions and Deconstructions*. Cambridge: Cambridge University Press.
- Horton, P. B., & Hunt, C. L. (1984). *Sociology*. Tokyo: Mc Graw-Hill International Book Company.
- Jay, R. R. (1968). *Javanese Villagers Social Relations in Rural Modjokuto*. Cambridge: MT Press.
- Kane, R. L. (1994). *Essensial of Clinical Geriatrics*. New York: Mc. Graw Hill.
- Kartodirdjo, S. (1987). *Modern Indonesia, Tradition and Transformation*. Jakarta: PT Gramedia.
- Koentjaraningrat. (1983). *Kebudayaan Mentalitas dan Pembangunan*. Jakarta: PT Gramedia.
- Kreager, P., & Butterfill, E. S. (Eds.). (2004). *Ageing without Children European and Asian Perspectives*. New York & Oxford: Berghahn Books.
- Lee, T. R., Mancini, J. A., & Maxwell, J. W. (1990). Sibling Relationship in Adulthood: Contact Patterns and Motivations. *Journal of Marriage and the Family*, 52, 431-440. <http://dx.doi.org/10.2307/353037>
- MacDonald, B., & Rich, C. (1991). *Look Me in the Eye: Old, Aging and Ageism*. San Fransisco: Spinsters Book Company.
- Marianti, R. (2004). In The Absence of Family Support Care of Childrens Widows in Urban Neighbourhoods of East Java. In P. Kreager, & E. S. Butterfill (Eds.), *Ageing without Children European and Asian Perspectives*. New York & Oxford: Berghahn Books.
- Merton, R. K. (1965). *Social Theory and Social Structure*. New York: Basic Books.
- Midgley, J., Tracy, M. B., & Livermore, M. (2000). Introduction: Social Policy and Social Welfare. In J. Midgley, M. B. Tracy, & M. Livermore (Eds.), *The Handbook of Social Policy*. London: Sage Publications.
- Miles, M. B., & Huberman, A. M. (1994). *Qualitative Data Analysis: An Expanded Source Book* (2nd ed.). California: Sage Publications Inc.
- Mulder, N. (1986). *Kepribadian Jawa dan Pembangunan Nasional*. Yogyakarta: Gadjah Mada University Press.
- Murdock, G. P. (1965a). *Culture and Society*. University of Pittsburgh Press.
- Murdock, G. P. (1965b). *Social Structure*. New York: The Free Press.
- Oswari, E. (1997). *Menyongsong Usia Lanjut Dengan Bugar dan Bahagia*. Jakarta: Pustaka Sinar Harapan.
- Parsons, T. (1973). The Family In Urban-Industrial America. In M. Anderson (Ed.), *Sociology of the Family*. New York. Penguin Education.
- Perlmutter, M. (1992). *Adult Development and Aging*. New York: John Wiley and Sons. Inc.
- Roucek, J. S., & Warren, R. L. (1963). *Sociology: An Introduction*. New Jersey: Little, Brown and Co.
- Sing, C. M. (2009). Ageing With Joy: The Effect of Physical Activity Programme on The Well Being of The Older People: A Study Conducted in Five Homes for The Elderly in Paramaribo. PhD. Dissertation. Groningen: Groningen Rijksuniversiteit.
- Spicker, P. (1995). *Social Policy: Themes and Approaches*. London: Prentice Hall.
- Suharto, E. (2006a). *Analisis Kebijakan Publik: Panduan Praktis Mengkaji Masalah dan Kebijakan Sosial*. Bandung: Alfabeta.
- Suharto, E. (2006b). *Membangun Masyarakat Memberdayakan Rakyat: Kajian Strategis Pembangunan Kesejahteraan Sosial dan Pekerjaan Sosial*. Bandung: Refika Aditama.
- Suharto, E. (2008). *Kebijakan Sosial Sebagai Kebijakan Publik*. Bandung: Alfabeta.
- Suseno, F. M. (1996). *Etika Jawa Sebuah Analisa Falsafi Tentang Kebijaksanaan Hidup Jawa*. Jakarta: PT Gramedia Pustaka Utama.
- Sztompka, P. (1994). *The Sociology of Social Change*. Oxford: Blackwell Publishers.
- Thompson, N. (2005). *Understanding Social Work: Preparing for Practice*. New York: Palgrave.
- Turner, J. H. (1978). *The Structure of Sociological Theory*. Homewood, IL: Dorsey Press.

- Weiner, A. S., & Solomon, J. R. (2007). Historical Overview of Philanthropy and Aging. *Generations*, 31(2), 13-14
- Wisadirana, D. (2004). *Sosiologi Pedesaan: Kajian Kultural Dan Struktural Masyarakat Pedesaan*. Malang: UMM Press
- World Health Organization. (2012). *World Health Statistics 2012*. Switzerland: WHO Press.
- Yin, R. K. (1981, March). The Case Study Crisis: Some Answers. *Administrative Science Quarterly*, 26, 58-65. <http://dx.doi.org/10.2307/2392599>
- Zastrow, C. (2000). *Introduction to Social Work and Social Welfare*. Pacific Grove: Brooks/Cole.