

# The Relationship Of Social Role On Depression In The Elderly In Candimulyo Village, Jombang District

Niki Natalia

Nursing S1 Study Program, Jombang Medical Cendekia College of Health Sciences

ARTICLEINFO	ABSTRACT
<i>Keywords</i> : Social Roles, Depression, Elderly	Depression is one of the disorders in the natural feeling (affective, mood) which is characterized by moodiness, sadness, lethargy, loss of passion for life, no enthusiasm in oneself. The elderly will be more susceptible to depression if the elderly are less able to socialize with the surrounding environment towards a decrease in social function. The purpose of this study was to determine the relationship between social roles and depression in the elderly in Candimulyo Village, Jombang Regency. The research design is correlation analytic. The population in this study were the elderly in Candimulyo Village, Jombang Regency. In this study, the sampling technique used was Simple Random Sampling. Collecting data using a questionnaire with data processing using editing, coding scoring, tabulating with Spearman rank statistical test. The results showed that 50 respondents found that 19 respondents who experienced bad social roles (38.0%), respondents who experienced severe depression (48.0%), moderate depression (40%), very severe depression (8.0%) and mild depression (4.0%) with Spearman rank test results 0.05 with p value = 0.000 The conclusion of this study is that there is a relationship between social roles and depression in the elderly in Candimulyo Village, Jombang Regency.
<b>E-mail:</b> nikinnatalia123@gmail.com	Copyright © 2020 Eduhot Journal.All rights reserved. is Licensed under a Creative Commons Attribution- NonCommercial 4.0 International License (CC BY-NC 4.0)

# **1. INTRODUCTION**

Elderly is a condition or natural process that occurs in human life. Entering old age there are many changes, both physical and functional changes, mental changes and psychosocial changes[1]. One of the most common changes that occur in the elderly is mental changes such as depression. Depression is one of the most common problems found in the elderly, it occurs because it is influenced by unsupportive social roles, cannot interact well with people around them, such as: the elderly consider themselves useless to those around them, they are often aloof and do not follow activities that should be carried out in the community so that it causes depression in the elderly[2].

It is estimated that the elderly population aged 60 years and over will double from 11% around 650 million in 2006 to 22% around 2 billion in 2050. Reports from countries in the world say depression in the elderly is 13.5% with the ratio of women with men 14.1 : 8.6. The prevalence of depression in the elderly undergoing treatment in hospitals and nursing homes is 30-45%.[3]. Statistics of East Java Province show that the number of elderly population in East Java in 2015 increased by 0.1% or 90,484 people. This shows an increase compared to 2014 where in 2015 there were 3,832,295 people, while in 2014 there were 3,741,811 people. It is estimated that in 2020



depression will occupy the top rank of diseases experienced by the elderly in developing countries, including Indonesia[3]. Reduced social roles can cause feelings of isolation, so that the elderly are alone or experience a decrease in social roles which can cause the elderly to be less enthusiastic, easily discouraged, decreased activity, and they do not care about themselves.[4]. Depression is one of the mental health disorders experienced by the elderly. This situation occurs due to the disconnection or loss of social interaction which is one of the triggering factors for depression in the elderly[5]. In the elderly depression is more common than in the general population. The older they are, the more they will experience a setback, especially in the field of mental abilities which can lead to a decrease in social roles[2] [6].

Someone who is depressed will experience changes in the form of thinking, somatic sensations, activity, and less productive in the development of thought, speech, and socialization.[7]. The solution that can generally be done to overcome the problem of depression is to provide social support to the elderly to prevent feelings of depression such as providing support to increase social roles such as attending recitations, elderly gymnastics, elderly posyandu and other elderly activities in the community so that the elderly can be more productive in their activities. live daily life, feel that he is cared for, loved and appreciated by the surrounding environment[8]

### 2. METHOD

# 2.1. Types of research

This type of research is an analytical survey research. This study aims to analyze the relationship of social roles to depression in the elderly in Candimulyo Village, Jombang District. This research uses correlation analytic method with cross sectional approach. That is a type of research to study the relationship between risk factors and effects including independent variables and dependent variables which are measured at the same time.

# 2.2. Population and Sample

The population is the entire data source that is needed in a study. The population in this study were 100 elderly people in Candimulyo Village, Jombang District. Part of the population that represents a population. The sample size is determined using the Slovin formula as follows:

$$n = N = \frac{N}{N(d)2 + 1} = 50$$

#### Information:

n = The required sample size N = the number of population

d = desired level of confidence or accuracy (5% = 0.05)

Sampling is the process of selecting a portion of the population to be able to represent the population. The sampling technique used is sample rendem sampling, which is random sampling and the sample obtained is called a random sample.

# 2.3. IdentificationVariable

A variable is something that is used as a characteristic, trait, or measure that is owned or obtained by a research unit about a certain concept of understanding. In this study the variables are divided into Independent Variables (Free Variables) and Dependent Variables (Bound Variables).

Independent variable is a variable that affects or its value affects other variables. A stimulus activity that is manipulated by the researcher to create an impact on the dependent variable. In this study the independent variable is Social Role. Dependent variable is a variable whose value is determined by another variable. The response variable will appear as a result of the manipulation of other variables. In this study the dependent variable is depression in the elderly.

#### 2.4. Operational

Operational definition is a definition based on the observed characteristics of something that is defined. It is the observable (measurable) characteristics that constitute the operational definition. The operational definition is a guideline for researchers to measure or manipulate research variables so as to facilitate data collection.



Table. 1 Operational definition of research on the relationship of social roles to depression in the	
elderly in Candimulyo Village, Jombang District	

Variable	Operational definition		Parameter	Measuring instrument	Scale	Score/ Category
Variable	The role that a	a.	Following the	questionnaire	ordinal	Categorical:
Independent:	person plays in	1.	study			a. Good (70 –
Social role	his social environment	D.	Elderly exercise			100) b. Medium (50
	environment	с	Elderly			- 69)
		•.	Posyandu			c. Bad (< 49)
		d.	Elderly			
			entertainment			
			therapy			
			(cooking			
			competition,			
			creative			
			painting competition)			
Dependent	It is a mood	a.	Change of	DASS	ordinal	Category
Variable:	disorder		mindset			a. Normal (0-
Depression	characterized by	b.	Somatic			14)
	loss of feeling		sensation			b. Mild (15 –
	of control and	c.	Activities and			18)
	subjective	1	socialization			c. Medium (19
	experience of	a.	Feeling isolated			-25)
	suffering		Isolated			d. Weight (26 – 33)
						e. Very
						heavy $> 34$
2.5 Data Col	llection and Analysi	c				5

# 2.5. Data Collection and Analysis

Data collection instruments are tools that are selected and used by researchers and their activities are to collect data so that these activities become systematic. The instrument for this study used the measurement of social roles by distributing questionnaires and measuring depression using the Depression Anxiety Stress Scale. The assessments were orientation, motor registration, attention to calculation, recalling, language and copying. In this study, respondents had to fill out the DASS questionnaire. The values obtained will be added up and the amount becomes the total value. This total value will be interpreted as the respondent's position.

The data collection procedure is an approach to the subject and the collection of the characteristics of the subject is carried out in a study. In this study, the procedures set were as follows: Licensing The initial stage of the data collection procedure was carried out by requesting a letter of introduction for PreSurvey data and Preliminary Studies to the College of Health Sciences Insan Cendekia Medika Jombang; Researcher permission to the head of Bakes Bangpol Jombang Regency; permission to the Head of the Health Office of Jombang Regency. Permit to the Head of Candimulyo Village, Jombang Regency.

Efforts to determine respondents who fit the criteria for elderly people who experience depression; The researcher provides an explanation of the objectives and benefits of the research entitled "The Relationship of Social Roles to Depression in the Elderly in Candimulyo Village, Jombang Regency: Giving informed consent to respondents. Respondents signed a letter of consent to become respondents; Identifying the response by using a questionnaire; Next do the Editing, Coding, Scoring and Tabulatin.

# 3. RESULTS AND DISCUSSION

# 3.1. Result

Based on research in Candimulyo village, Jombang district, the following data were obtained:



Table. 1 Characteristics of the frequency of respondents by age in Candimulyo Village, Jombang

No	Age	Frequency	Percentage
1.	60 – 65 years	14	28.0
2	66 – 70 years old	13	26.0
3	71 – 74 years old	23	46.0
	Total	50	100.0

Table. 1 shows that almost half of the respondents aged 71-74 years were 23 people (46.0%). Table. 2 Characteristics of the frequency of respondents based on education in Candimulyo Village,

		Jombang Regency	
No	Education	Frequency	Percentage
1	SD	18	36.0
2	junior high school	21	42.0
3	senior High School	11	22.0
	Total	50	100.0

Table. 2 shows that almost half of the junior high school education respondents are 21 people 42.0%) Table. 3 Characteristics of the frequency of respondents by gender in Candimulyo Village, Jombang

	Regency			
No	Gender	Frequency	Percentage	
1	Man	22	44.0	
2	Woman	28	56.0	
	Total	50	100.0	

Table 3 shows that most of the respondents are female as many as 28 people (56.0%).

Table. 4 Characteristics of the frequency of respondents based on information sources in Candimulyo Village, Jombang Regency

No	Resources	Frequency	Percentage
1	Once	15	30.0
2	Never	35	70.0
	Total	50	100.0

Table 4 shows that most of the respondents have received information about depression as many as 35 people (70.0%)

 Table. 5 Characteristics of the frequency of respondents based on the activities of the elderly in Candimulyo Village, Jombang Regency

No	<b>Follow activities</b>	Frequency	Percentage
1	Yes	14	28.0
2	There is not any	36	72.0
	Amount	50	100.0

Table 5 shows that most of the respondents do not have other activities around their homes as many as 36 people (72.0%).

Table 6 Characteristics of the frequency of respondents based on social roles in Candimulyo Village, Jombang Regency

No	Education	Frequency	Percentage
1	Well	1	2.0
2	Currently	25	50.0
3	Bad	24	48.0
	Total	50	100.0

Table 6 shows that half have moderate social roles as many as 35 people (50.0%)

Table. 7 characteristics of the frequency of respondents based on depression in Candimulyo Village, Jombang Regency

No	tiers	Frequency	Percentage
1.	Light	2	4.0
2	Currently	20	40.0
3	Heavy	24	48.0

So heavy	4	8.0
Total	50	100.0

Table. 7 shows that almost half of the respondents experienced severe depression as many as 24 people (48.0%).

 Table. 8 Cross tabulation The relationship between social roles and depression in the elderly in Candimulyo Village, Jombang Regency

	•	
1)@	pression	<b>AVA</b>
	pression	10,001

No	Social role	Light ∑	%	Currently $\sum$	%	Heavy Σ	%	So heavy ∑	%	$\overset{\text{Total}}{\Sigma}$	%
1	Well	0	0	1	2.0	0	0	0	0	1	2.0
2	Currently	2	4.0	15	30.0	5	10.0	3	6.0	25	50.0
3	Bad	0	0	4	8.0	19	38.0	1	2.0	24	48.0
	Total	2	4.0	20	40.0	24	48.0	4	8.0	50	100.0

Based on the table. 8 shows that respondents have a good social role with a moderate level of depression as much as 1 respondent (2.0%), respondents also have a moderate social role with a moderate level of depression 15 respondents (30.0%) and almost half of respondents have a bad social role with a level of severe depression with a total 19 respondents (38.0%). The results of the Spearman rank statistic test obtained a significant number or p value ( $\rho$  value = 0.000), which was significantly lower than 0.05 or showed that the relationship between the roles of depression was significant ( $\rho < a$ ). The Spearman correlation value of 0.441 indicates that the direction of the correlation is positive with the strength of the correlation being. So H0 is rejected and H1 is accepted which means that there is a relationship between social roles and depression in the elderly in Candimulyo Village, Jombang Regency.

# 3.2. Discussion

The older a person gets, the more his body functions decline. This is because the older the respondent is, it will hinder the interaction process in his social environment because the older a person is, the strength of the body will experience a physical decline. If the respondent can perform a good social role, the respondent will interact or socialize well with the surrounding environment. It is an individual activity in society by taking part in existing activities in society in various sectors, whether social, political, economic, religious and others. Taking this role depends on the demands of society and or on the ability of the individual concerned and his sensitivity in seeing the state of his community.

Based on table 1, it shows that almost half of the elderly aged 71-74 years are 23 respondents (46.0%). Age is one of the triggers for social roles, the older the respondent is, the more difficult it is to interact or socialize with the immediate and surrounding environment, the grasping power of age like this also greatly affects the process of social interaction, the respondent will experience a decrease in social roles in society. Entering old age, there are many setbacks, for example, physical decline which is marked by the skin becoming wrinkled due to reduced fat pads, gray hair, reduced hearing, deteriorating vision, tooth decay, activity becomes slow, appetite decreases and other body conditions also decline.

Based on table 3 shows that most of the respondents are female as many as 28 respondents (56.0 %). Respondents who are female are very susceptible to depression due to hormonal changes in themselves, the estrogen hormone that is in the respondent is getting less and less so that the respondent's movement system experiences changes in body functions such as experiencing bone and joint loss. So that the emotions in the respondent cannot be controlled because of changes in body functions that are not like before.

Based on table 5 shows that most of the respondents do not have other activities around their homes as many as 36 people (72.0%). If the elderly who are less active or have never participated in social activities that can be done in the community, their level of socialization is very less then they will experience a decrease in social roles and have an impact on poor social interaction. Individual activities in society by taking part in existing activities in society in various sectors, whether social, political, economic, religious and others.



Based on table 8 the results of the research conducted, it is known that from 50 respondents, almost half of the respondents experienced severe depression as many as 24 people (48.0%). Poor social support can also affect depression. therefore the motivation of the family and the condition of the elderly who live alone in the house. These things can trigger feelings of prolonged sadness, loneliness and even become the cause of depression. Feelings of sadness, helplessness and pessimism, which are associated with suffering, can be self-directed attacks that are controlled unconsciously.

Based on table 6, the results of the research conducted are known from 50 respondents showing that most of the respondents have never received any knowledge or information about what depression is and how to overcome it, as many as 35 people (70.0%). If respondents do not know what depression is, many of them will not know that they have depression in themselves, so without the support of family and people around for a long time, depression in the elderly will not be controlled and will have a negative impact on their health. a very broad condition. There are many things that must be done to treat depression according to the cause. Depression cannot be cured.

Based on table 7 the results of research that has been done from 50 respondents, shows that almost half of the respondents have bad depression with a total of 19 respondents (38.0%). Based on the Spearman Rank statistical test on the Independent Variable of social roles with the dependent variable depression in Candimulyo Village, Jombang Regency, the results obtained p ( $\rho$  value) = 0.000 which means 0.000 <0.05 then H0 is rejected and H1 which means there is a relationship between social roles and depression in elderly in Candimulyo Village, Jombang Regency. Based on the cross tabulation between the independent variable and the dependent variable, it was found that 19 respondents (38.0%). That depression occurs when social roles in society don't work as well as they don't do socialization,

With the social changes in the elderly, the social role also changes where the elderly are not respected or not respected but only tolerated. In the past, parents gave advice and guidance, now they are being cared for by others. Because they no longer play a meaningful role, elderly people feel that they are dependents and not social assets. This aging process is a direct and inevitable result of the social vacuum in which many elderly people are placed. In a society where the elderly are still given useful and well-defined social roles. It is better for the elderly to be included in social activities, but in these activities the elderly are given light tasks or responsibilities so as not to burden themselves. So that the elderly do not experience bad things, this is influenced by their declining health so they cannot carry out activities. Seeing this phenomenon, researchers want to know the relationship between social roles and self-concept in the elderly in the community. Depression is an extreme inability to react to stimuli, accompanied by a decrease in self-worth, delusions, inappropriateness, inadequacy and hopelessness. and vegetative symptoms (eg weight loss and sleep disturbances).

### 4. CONCLUSION

The social role of the elderly in Candimulyo Village, Jombang Regency based on research shows that almost half of the respondents experience moderate social roles; Depression in the elderly in Candimulyo Village, Jombang Regency based on research showing that almost half of the respondents experienced severe depression; There is a relationship between social roles and depression in the elderly in Candimulyo Village, Jombang Regency.

# 5. **REFERENCES**

- [1] S. M. Kiik, J. Sahar, and H. Permatasari, "PENINGKATAN KUALITAS HIDUP LANJUT USIA (LANSIA) DI KOTA DEPOK DENGAN LATIHAN KESEIMBANGAN," J. Keperawatan Indones., vol. 21, no. 2, 2018, doi: 10.7454/jki.v21i2.584.
- [2] D. Q. Ayuni, "HUBUNGAN DUKUNGAN KELUARGA DENGAN TINGKAT DEPRESI PADA LANSIA DI WILAYAH KERJA PUSKESMAS MARUNGGI 2017," J. Akad. Baiturrahim Jambi, vol. 7, no. 2, 2018, doi: 10.36565/jab.v7i2.62.
- [3] Kemenkes RI, "Analisis Lansia di Indonesia," Pus. data dan Inf. Kementeri. Kesehat. RI, 2017.
- [4] S. Sutinah and M. Maulani, "HUBUNGAN PENDIDIKAN, JENIS KELAMIN DAN STATUS PERKAWINAN DENGAN DEPRESI PADA LANSIA," J. Endur., vol. 2, no. 2, 2017, doi: 10.22216/jen.v2i2.1931.



- [5] T. Vitaliati, "Pengaruh penerapan reminiscence therapy terhadap tingkat depresi pada lansia [Bondowoso]," *J. keperawatan BSI*, vol. Vol 6 No., no. 1, 2018.
- [6] P. P. Nataswari, "Hubungan dukungan keluarga dengan depresi pada lansia di Panti Sosial Werdha Wana Seraya Denpasar Bali," *Dukungan keluarga, depresi, lansia*, vol. 7, no. 2, 2018.
- [7] S. Yuliharni, "Hubungan Dukungan Keluarga Dengan Kejadian Depresi Pada Lansia Di Wilayah Kerja Puskesmas Lubuk Begalung Padang Tahun 2017," *Menara ilmu*, vol. XII, no. 5, 2018.
- [8] N. Prabasari, L. Juwita, and I. Maryuti, "Pengalaman Keluarga Dalam Merawat Lansia Di Rumah (Studi Fenomenologi)," *J. NERS LENTERA*, vol. 5, no. 1, 2017.