

The Dynamics Of Aging Process Adaptation From the Late Adulthood To the Elderly in Panti Werdha X

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Abstract

Elderly refers to individuals aged 60 years and over. The aging process in the elderly occurs with a gradual decline in the ability and function of organs. This study aims to determine the dynamics of adaptation to the aging process from late adulthood to old age in the elderly at the Panti Werdha X nursing home. This study only used one participant with purposive sampling method criteria. This research is a case study that is assessed using the methods of observation, interviews, and psychological tests. The results showed that there was a decrease in cognitive function and stress that caused the delay in the aging adaptation process from late adulthood to the elderly. Suggestions are given to improve the welfare of the elderly in terms of physical and psychological. So that it can help the elderly reduce the stress experienced in the elderly phase because they do not have activities or busyness and can achieve happiness in the elderly. In addition, it can help the elderly reduce the stress experienced in the elderly phase because they do not have activities or busyness and can achieve happiness in the elderly.

Keyword: Dynamics, elderly, Adaptation, Aging Process, Panti Werdha, Late Adulthood

Abstrak

Lansia mengacu pada individu berusia 60 tahun ke atas. Proses penuaan pada orang tua terjadi dengan penurunan bertahap dalam kemampuan dan fungsi organ. Penelitian ini bertujuan untuk mengetahui dinamika adaptasi terhadap proses penuaan dari akhir masa dewasa hingga usia tua pada lansia di panti werdha X panti jompo. Penelitian ini hanya menggunakan satu peserta dengan kriteria metode purposive sampling. Penelitian ini merupakan studi kasus yang dinilai dengan menggunakan metode observasi, wawancara, dan tes psikologi. Hasil penelitian menunjukkan bahwa terjadi penurunan fungsi kognitif dan stres yang menyebabkan keterlambatan proses adaptasi penuaan dari akhir masa dewasa hingga lansia. Saran diberikan untuk meningkatkan kesejahteraan lansia dalam hal fisik dan psikologis. Sehingga dapat membantu lansia mengurangi stres yang dialami pada fase lansia karena tidak memiliki aktivitas atau kesibukan serta dapat mencapai kebahagiaan pada lansia. Selain itu, dapat membantu lansia mengurangi stres yang dialami pada fase lansia karena tidak memiliki aktivitas atau kesibukan serta dapat mencapai kebahagiaan pada lansia.

Kata Kunci: Dinamika, lansia, Adaptasi, Proses Penuaan, Panti Werdha, Akhir Masa Dewasa

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BACKGROUND

Adapting in a social environment requires a process for each individual (Dewi, Ramadhani, & Lestari, 2022). Since their birth, humans are physiologically getting older along with the times. The increase in age lets the tissues and cells within the body get old (Afrizal, 2018). Aging is a natural process encountered and lived by everyone in the phase of life. It comes with the changes during the course of an individual's life. Changes begin or can be felt since his/her birth, then he/she will grow along with ages (Amarya et al., 2018). Every human being is in the phase of aging which is a gradual process of decline in various aspects and is an unavoidable passageway (Hadipranoto et al., 2020).

Aging process happening to the elderly occurs continuously so that the body's functions begin to decline which affects the pathological and health problems. In Indonesia, the number of old people, those who are aged 60 years and over, in 2017 reaches 23.66 million or 9.03% of the population. It is predicted that by 2025 they reach 48.19, and by 2030 they can get into 40.95 (Annisa et al., 2019). Aging process in structural and psychological changes or decreases in the elderly such as vision, hearing, pulmonary system, and bone joints. Along with the decline in these physiological functions, the body's resistance to the elderly is also decreasing so that they are infected with various diseases. This decline in physical abilities can cause the elderly to become stressed, who used to do all the work alone, now sometimes have to be helped by others. This feeling of burdening others can cause stress (Kaunang et al., 2019)

The adaptation process of the individual from the late adulthood phase to the elderly begins from the age of 60 (Santrock, J. W., 2012). The adaptation process by the elderly tends to be different, but it is mostly assessed from the attitudes before entering the elderly phase, which is the late adulthood phase, in the form of life experience and physical strength, which obviously affect the adaptation. If they perform daily activities regularly and have a good relationship with people around in their

adulthood, at the age of the elderly they will continue to perform the activities (Afrizal, 2018).

The adaptation process in the elderly phase, an individual experiences various changes. Changes experienced by the elderly include changes in physiological, psychological and socioeconomic status. Physiological changes in the elderly such as hair becomes gray and diminishes, skin becomes dry and wrinkled, bones change in composition, after the age of 60 humans become shorter, the heart does not react as fast as it used to, blood circulation slowly begins to be disturbed, and digestion is not so good anymore. The most common psychological problems that affect the elderly are depression, dementia, and delirium. Economic problems associated with decreased work productivity will have an impact on decreasing economic income in the elderly (W. M. Tabita, K. Angkit, 2019).

Elderly in adaptation process who suffer from disease can cause change physiological function in people who suffer from it. Changes in these functions can affect a person's life cause stress in the elderly who experience it. Changes in physiological function experienced by a person depend on the disease he suffers. The more physically healthy the elderly are the less often they are exposed to stress and conversely the more retarded their health is the easier it is for the elderly to be exposed to stress (Kaunang et al., 2019).

Elderly will affect the activities of the elderly this cause the emergence of social problems such as physical disability and psychological disorders in the elderly. In line with the statement that joyfull and health in the elderly are two things that cannot be separated because they influence each other (Pusvitasari & Jayanti, 2020). The success of the elderly in the aging process is influenced by internal factors, such as cognitive, psychological and behavioral factors in the form of physical activity, nutrition or food supply, health, alcohol, drugs, and accidents. Besides, it is also affected by external factors, which are the health and social services obtained (Gonzalez & Baltar, 2017).

The services affect the health improvement and disease prevention. It can also be measured

with the condition of their home and the surrounding environment, whether they are free from pollution or not. Furthermore, social conditions, such as social support, violence or abuse, and education are also prominent factors. Not to mention, economy is also obvious to the success of the aging process. The amount of salary or wages earned, social security, and employment are also determining factors (Gonzalez & Baltar, 2017).

The decline in the physical and psychological conditions of the elderly can cause stress and have an impact on the success of aging experienced by the elderly. Psychosocial problems in the elderly in the form of stress, anxiety, and even depression come from several aspects, namely physical, psychological, and social aspects. These symptoms can be seen from emotional changes that become unstable, irritable, easily disappointed, feelings of loss, and feelings of worthlessness (Kaunang et al., 2019). Success in adaptation in the elderly can be obtained when the elderly can minimize limiting conditions and increase the opportunity for self-development. Although most assume that the elderly have decreased, but at that age growth still occurs such as maintaining the function of the physical aspect by maintaining health (Kosalina, 2018)

Individual adaptation in the elderly phase based on adjustment to the environment has 2 aspects, namely personal adaptation in the form of successful personal adjustment which is characterized by not having feelings of hatred, avoiding, disappointed, distrusting people or conditions experienced, the emergence of anxiety, and dissatisfaction between individuals with demands. or the current environmental changes. In addition to social adaptation, there is a pattern of culture and behavior in accordance with values, laws, and rules so that social adjustments can be made, namely by adapting with other people. The relationship is related to relationships with family or friends in the social environment (Duduk Adi Prasetyo, 2014).

The objective criteria of successful aging among the elderly cover longevity, biological

health, mental health, and cognitive function. Meanwhile, the subjective criteria are affective well-being, fulfillment of social relationships, and productivity in everyday life (Sasmita et al., 2012). Successful Aging is a universal goal, yet it is a challenge because of the declining physical, psychological, and social conditions along with the ages. In order for the adaptation process to aging to be successful, physical, mental, and social health conditions should be maintained (Ulfa & Sartika, 2019). It will be a problem if these aspects cannot be fulfilled (Budiyono & Abidin, 2020).

The adaptation process of the elderly living in the nursing homes, especially in Indonesia, is significant to help the productivity of the elderly at their age. Elderly people living in the nursing homes are also able to do activities involving physical and mental strength. Nursing homes play a vital role to help the elderly adapt to their "new home". The needs of individuals in the elderly phase are different from those in other phases, making the efforts that can be made for the welfare or welfare of individuals in the elderly phase also differ. Living in a nursing home is often considered to hinder the welfare of life in the elderly phase. However, welfare or happiness and life satisfaction can be achieved if the elderly can adapt successfully (Pusvitasari & Jayanti, 2020).

Individuals in the elderly phase have needs, namely biological needs include food and drink, clothing, shelter, exercise, rest/sleep. Psychological Needs includes often angry, sense of security and calm, addiction, sad and disappointed, loneliness. Social Needs includes useful activities, difficulty adjusting. Difficulty relating to other people. Socialize with other people and family visit. Recreation or entertainment (inside and outside the orphanage). Savings for the elderly with income. Spiritual Needs includes spiritual guidance, dignified end of life (Duduk Adi Prasetyo, 2014).

The adaptation process of the elderly from the late adulthood to the elderly phase in the nursing home can be successful if they are balance internally and externally (Afriansyah & Santoso, 2020). Those who are sent to the nursing

homes by the families tend to feel that no one took care of them, they are useless, and they lose the loved ones. The conditions affect their subjective well-being in their elderly phase. Well-being in the elderly phase can be seen from the health condition and feelings of happiness so as to achieve successful aging (Sasmita et al., 2012). Based on explanation above, we can see that the adaptation of the aging process affects the declining physical, psychological, and social conditions along with the ages.

Form another study that examined the dynamics of coping with stress and adaptation to the resilience of the elderly in overcoming life problems. How in this case it is still seen that the elderly are still active, productive and independent, able to survive in the face of life's problems by applying the dynamics of coping with stress and adaptation in resilience in addressing life's problems (Jannah, 2020). Thus, based on previous research, this study aims to improve the welfare of the elderly from a physical and psychological perspective so that they can help the elderly reduce the stress experienced in the elderly phase because they do not have

activities or are busy and can achieve happiness in old age. This can be seen from the dynamics of adaptation to the aging process from late adulthood to old age at Panti Werdha X.

RESEARCH METHODS

Research design

This study uses a quantitative approach. It is a case study with a single participant. It is expected that this study can explore the dynamics of aging process adaptation from the late adulthood to the elderly stages among older people in Panti Werdha X.

Research subject

The participant is selected by using purposive sampling technique or with the following criteria (Sugiyono, 2016):

1. An elderly aged 60 years and over
2. An elderly living in a nursing home

This research is conducted with one participant, Oma M, living in a nursing home, Panti Werdha X. The following is the identity of the participant in this study:

Table 1. Identity of Participant

Name	Oma M (pseudonym)
Gender	Female
Birthplace, Date of Birth	August 15, 1956
Age	66 years old
Religion	Christian
Address	City X
Education	Elementary School
Occupation	Selling crackers
Cultural Background	Chinese
Ethnic Group	Tionghoa
Birth Order	3th of 5 siblings
Marriage Status	Divorced dead since 2019
Daily Activities	Participate in activities at the Werdha

Oma M has been living in the nursing home since 2021. She is escorted to the nursing home by her 2nd and 5th siblings. No family is willing to live with her. At the beginning, since she lived in the nursing home, her families visited her sometimes, yet the last few months they did not come to visit. It made her upset

and disappointed with them for sending her to the nursing home with no care and visit. Currently, she is shrouded in feelings of anger and disappointment and desired not to meet them if they come to visit her someday at the nursing home.

The dependent variable in this study is the dynamic of aging process adaptation from the late adulthood phase to the elderly. Oma M is assessed through observation and interviews to acknowledge her aging process. In addition, it aims to assist the examiner in getting a picture based on aging factors in terms of internal factors, namely personality and behavior as well as external factors, such as health services, physical environment, social, and economic condition. It uses the WHODAS questionnaire to determine the difficulties experienced by her, in relation to physical and psychological conditions. It is an illness or health problem that last in the short or long term, also a psychological or emotional problem. WHODAS, which is Likert scale, contains 5 answer options: none, mild, moderate, severe, and extremely severe. Scoring is made by summing the scores on each domain and also the entire domain, which is then averaged and categorized. The following are the categories: score 1, no obstacles; score 2, mild obstacles; score 3, moderate obstacles; score 4, severe obstacles; and score 5,

extremely severe obstacles (Mayrink, et al., 2018).

This study also provides a questionnaire of Mini Mental Status Examination (MMSE), which aims to determine if the cognitive function still works optimally (I Rodriguez, et al., 2021). In addition, it is intended to reveal whether there is a decline in the cognitive function or not. The assessment categories in the MMSE questionnaire are based on education, score <23: abnormal for high school graduates, and score <24 abnormal for college graduates. This study also assesses by the degree of problem, scores 24-32: no cognitive impairment, scores 18-23: there seems to have a cognitive impairment, and scores 0-17: there is a cognitive impairment. The other questionnaire given to Oma M is Depression Anxiety and Stress Scale (DASS) (Roya, Younesi, Barekati, Ramshini, & Ghyasi, 2020). DASS is given to Oma M to know the level of depression, anxiety, and stress that may be experienced in association with the aging process. The following are the norms of DASS scoring:

Table 2. DASS Questionnaire Norms

Level	Depression	Anxiety	Stress
Normal	0-9	0-7	0-14
Mild	10-13	8-9	15-18
Moderate	14-20	10-14	19-25
Severe	21-27	15-19	26-33
Extremely Severe	>28	>20	>34

Finally, Oma M is given a psychological test kit, Senior Apperception Test (SAT) (Bellak & Abrams, 2008). SAT is given to determine the psychological state of emotions, needs, pressures, and perceptions of Oma M on the environment and the people in her life. SAT contains 16 cards with pictures. There are 7 cards used to acknowledge her needs: card 1 to find out about social relationships/social interactions; card 6 to know her feelings related to loneliness, abandonment, and distress, and as well as thing that can bring up anxiety due to waiting for a phone call. Card 7 aims to find out her attitude after leaving home

and joining others in a new place of residence. Card 8 aims to reveal her attitude when making mistakes in her life. Card 10 aims to know the feelings of loneliness, illness, feelings of isolation, and poverty. Card 12 aims to know the grief over death, illness, and bad news. Finally, card 13 aims to know how it feels when leaving a place or joining someone or going on a trip.

RESEARCH RESULTS

Based on the results of the assessment, the following are the details of the results of *Depression Anxiety and Stress Scale (DASS)*:

Table 3. Result DASS

Depression	Anxiety	Stress
Total scores= $7 \times 2 = 14$	Total scores= $7 \times 2 = 14$	Total scores= $15 \times 2 = 30$
Moderate	Moderate	Severe

Based on the results of the DASS questionnaire, it was found that the level of depression was in the moderate category, the level of anxiety was in the moderate category, and Oma stress level was in the severe category. This means that environmental changes that occur in Oma's life, namely living

in a nursing home because no one wants to live with Oma, requires Oma to adjust so that it indirectly causes physical and emotional stress on her.

The following is the result of Mini Mental Status Examination (MMSE):

Table 4. Result MMSE

No	Test Material	Highest Score	True	False
1	Orientation Problem			
a	Time Orientation	5	5	0
b	Place Orientation	2	2	3
2	Registration Ability	3	1	2
3	Calculation & Attention Skills	5	0	5
4	Recall	3	1	2
5	Language and Practical Abilities			
a	Naming	2	2	0
b	Repetition	3	1	2
c	Command	3	3	0
d	Reading	1	1	0
e	Write	1	1	0
f	Copying Objects	1	1	0
Total scores		32	18 (suspect have cognitive impairment)	14

Based on the results of the Mini Mental Status Examination (MMSE) questionnaire given to Oma M, the correct answer score obtained was 18. This means that Oma M's cognitive function tends to decrease or there is

cognitive damage caused by the age factor, namely the elderly phase. Also, this following is the result of World Health Organization Disability Assessment Schedule 2.0 (WHODAS):

Table 5. Result WHODAS

No	Domain	Score	Raw Score	Domain Average Score	Domain Category
1	Understanding and Communication	2,3	14/30	$14/6 = 2,3$	Mild
2	Moves	1,4	7/25	$7/5 = 1,4$	Mild
3	Caring for and Taking Care of Herself	1,25	5/20	$5/4 = 1,25$	Mild
4	Getting Along with Others	2	8/20	$8/4 = 2$	Mild
5	Household Activities	1,5	6/20	$6/4 = 1,5$	Mild
6	Participation in Social Environment	1,75	14/40	$14/8 = 1,75$	Mild
Total			54/155	$54/31 = 1,74$	Does not lead to disorder

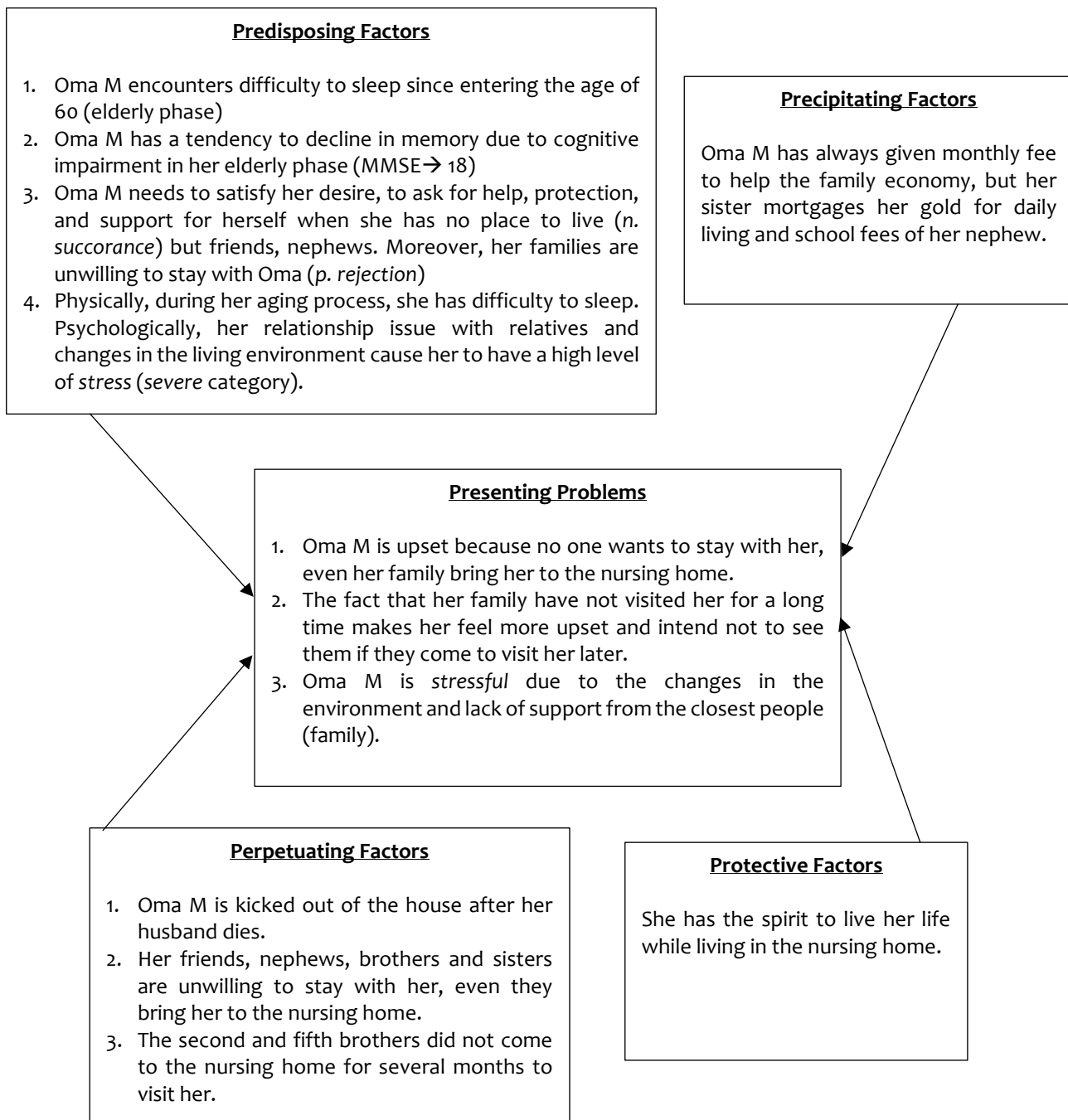
Based on the results of the total score for the entire domain, namely 1.74, which means the obstacles are in the mild category and do not show a tendency to lead to disorder or disturbance. Judging from the 6 domains above, Oma got a score of 2.3 in the domain of understanding and communication and a score of 2 in the domain of getting along with other people. This means that Oma has few obstacles in understanding or interacting with other people in the social environment and has few obstacles in socializing as a result of understanding and communication that have few barriers. However, this obstacle is not a serious obstacle so that it can interfere with the communication and understanding process when interacting with other people in Oma M's social environment.

The last, the result of Senior Apperception Test (SAT) show that the main need in Oma is the need to satisfy the desire to ask for help, protection, and support (n. succorance) for her current state or condition. Oma who was kicked out of the house by her husband's nephew since her husband died so that Oma has no place to live. At first, Oma tried to live alone, but Oma didn't have enough money because she didn't have any savings. The property owned, namely the gold given by her husband, was pawned while the mother was still alive to pay for the needs of Oma's relatives and nephews.

When Oma needs help from relatives, namely by providing a place to stay or giving a ride to Oma but the family refuses (p. rejection). None of the siblings wanted to live with Oma. Oma's attitude towards the actions of her siblings was to accept and not do anything when she was brought to a nursing home by her brother (n. abasement). Since living in Oma's family nursing home, Oma's second and fifth siblings don't often visit Oma that they haven't come in the last few months.

Oma is waiting for your arrival because Oma actually wants your presence (p. lack of human support). Oma's daily life in the nursing home is actually filled with sadness because Oma's brother doesn't visit and see her condition. Currently, Oma accepts the conditions and circumstances of living in a nursing home because there is no relative who wants to live with her, Oma does not refuse and surrenders to your actions (undoing). When Oma's brother comes to visit later, Oma has a desire not to see you because of the frustration and disappointment you feel because you haven't visited Oma for a long time.

The current condition of Oma which is shrouded in anger can be an obstacle to the adaptation process of aging in her elderly phase. The following is a case formulation, the dynamics of the problems experienced by Oma M:



Picture 1. Formulation Of Case Dynamics

Based on the results of the assessment and it can be seen from the dynamics of the case, it can be concluded that the aging process in the elderly that occurs in Oma M experiences the following things, namely:

1. Have a tendency to decline in cognitive function
2. Experiencing physical stress, namely having difficulty sleeping and psychological stress due to changes in the living environment

- and lack of support from the closest people (family)
3. Oma M's feelings are filled with sadness and anger towards you refusing to stay with Oma, taking her to a nursing home and having not visited Oma M for a long time. This causes Oma M to not want to see you if you come to visit Oma because Oma can't forgive your actions. The study results reveal that the factors inhibiting her adaptation process from the late adulthood phase to

the elderly cover a decrease in physical, psychological, and social conditions. The prognosis for Oma M is as follows:

Table 6. Prognosis

No	Indicators	Data	Prognosis	
			Positive	Negative
1	Problems	1. Experiencing stress due to the residential change and lack of support from family 2. Feeling sad and disappointed because her families have not visited the nursing home for a long time and unwilling to meet them once they come because she cannot forgive their actions.		v
2	Stressor	Bad relationship with relatives		v
4	Social Support	Having friends at the nursing home	v	
5	Marital Status	Death Divorce	v	
6	Access to Health Services	Getting health services easily from the nursing home	v	
7	Supporting Factors	Internal Having the spirit to live the life while living in the nursing home External Having friends at the nursing home	v v	
8	Inhibiting Factors	Internal Shrouded in feelings of resentment and disappointment to her families External The families refuse to stay with Oma M and have not visited Oma M at the nursing home for a long time.		v v

The prognosis indicators obtain a positive result. It proves that the supporting factors can help Oma M overcome her current problems optimally. The supporting factors can help the success of her aging adaptation process. The internal supporting factor is the spirit to live life while living in the nursing homes, and the external factor is the ability of Oma M to socialize and have friends.

DISCUSSION

The formulation results of the dynamics of Oma M cases show that the barriers to the aging process adaptation from the late adulthood phase to the elderly decline her cognitive function. This can be seen from the results of the Mini Mental Status Examination (MMSE) questionnaire given, the score obtained is 18. This means that Oma has cognitive impairment. It causes her to forget the unwanted and

unmemorable events in the past. However, she still remembers the experience meaningful to her life clearly.

When entering the age of 60, Oma begins to find difficulty to sleep. It causes her to wake up at night frequently. The changes in the environmental condition experienced by Oma in her elderly phase make her stressful. This is in line with the results of the Depression Anxiety and Stress Scale (DASS) questionnaire given to Oma. The stressful conditions experienced by Oma due to environmental changes caused Oma's stress level to be included in the severe category.

Previously, she lived with her husband and aunty of her husband. When the husband died, she had to leave the house because she was expelled by the husband's nephew. Then, she lived with a friend for 2 months and lived with her nephew for a year. After that, she was taken to the nursing home by her second and fifth brothers. The fact that her closest ones, relatives,

are unwilling to live with her causes her to feel upset because she needs protection and support them. This is in line with the Senior Apperception Test (SAT) results, namely Oma feels rejected even though she needs support from her family.

She is mad because the family do not count on her sacrifice. She always gives monthly money to the family and give up the husband's gift, which is gold, to be mortgaged for extra daily costs and school fees for the nephews. While staying at the nursing home, her family do not visit her. It makes her even more upset and disappointed. She intends not to meet her family once they visit her in the nursing home. Her feeling is shrouded by sadness and anger, which causes her not to forgive them. However, she has the spirit to live her life even though she lives in the nursing home. In addition, she is also desired to establish relationships with other people in the nursing home. Therefore, we need an activity that is recreational, relaxing and trains sensory and motor skills, and develops in groups.

Based on the results of the WHODAS where the six aspects, namely understanding and communication, moves, caring for and taking care of herself, getting along with others, household activities, participation in social environment of Oma do not cause disturbances that can hinder daily activities in the social environment. Social functioning in the elderly can be measured based on the ability to care for themselves/functional, instrumental and executive functions and social relations (Syamsuddin, 2018).

The results obtained were that although Oma had cognitive impairment due to age, her physical health function was not impaired. Thus, suggestions for activities given to Oma to help reduce stress as a result of the Adaptation of the Aging Process from late adulthood to the elderly at Panti Werdha X are in the form of providing activities on the physical aspect, namely by providing activities such as elderly gymnastics and psychological aspects, namely providing daily activities that are beneficial for the elderly. light, for example peeling ingredients.

It can be seen that other studies that discuss the process of adaptation to aging mostly

discuss older adults adapting to a shift in the balance of benefits and losses of resources.

Based on other research shows that conditions decrease such as stiff joints, shaking hands, head, lower jaw and psychological conditions with decreased motivation and doing simple things that can be done. Older people tend to be less imaginative about things they have just learned. They are not very motivated to remember because of a lack of focus and poor hearing. Changes in health and physical can be seen from the desire to look for activities carried out such as sitting continuously and a decrease in the desire to do activities that require physical and energy such as cleaning, washing, sweeping and others (Fadlurrohman, 2020). It can be seen that other studies that also discuss the process of adaptation to aging mostly discuss older adults adapting to a shift in the balance of benefits and losses of resources (Nikitin & Freund, 2019).

The positive expectations of the elderly living in the nursing home on the success of the aging process with a balance of cognitive, psychological, and social functions (Azara & Qoyyimah, 2020). Thus, life satisfaction in the elderly phase can be achieved for the success of aging process adaptation (Amarya et al., 2018). Oma M being able to apply physical and psychological activities, it is hoped that Oma can achieve prosperity in the elderly and can adapt to the social environment in the elderly phase.

CONCLUSION

The results of the assessment conducted to Oma M conclude that aging process in the elderly cover the following experience: tendency to decline in cognitive function, physical stress in the form of difficulty to sleep, and psychological stress due to changes in the environment and lack of support from the closest ones. Besides, she is shrouded with sadness and anger to the family as they refuse to live with her, bring her to the nursing home, and do not visit her for a long time. It makes her unwilling to meet them once they come for a visit because she cannot forgive their actions. Thus, the aging process adaptation of Oma finds obstacles as she had difficulty to

adapt to the new circumstances and environment. Before being sent to the nursing home, she can easily meet with the family, yet today she is only waiting for their visit. Moreover, she is currently mad as they have not visited her for a long time.

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