Level of Elderly Depression in Palopo City

Awaluddin Amrin STIA Puangrimagalatung awalstiaprimabone@gmail.com

Yusriadi Yusriadi Sekolah Tinggi Ilmu Hukum Pengayoman yusriadi.yusriadi@uqconnect.edu.au

Abstract- Depression is a mental health problem. The number of elderly now increasing, so that the elderly with a variety of changes both biologically, socially, culturally, economically, healthy, and psychologically become a vulnerable group to a variety of mental and behavioral problems. Elderly in the City of Palopo. This type of research is a descriptive correlation analysis with a cross-sectional method approach. The researchers recommend that local governments and health workers pay attention to factors associated with elderly depression because it plays an essential role in the prevention and cure of depressed elderly.

Keywords—depression, anxiety, family support, spirituality

I. INTRODUCTION

Old age is an event that will surely be experienced by all people who blessed with a long life; no one can avoid the occurrence. In old age, various setbacks will occur in the body's organs. But no need to be discouraged, always be optimistic, cheerful and try to always stay healthy at an advanced age, so even though old age must maintain health [1]

The number of elderly is increasing now, so that the elderly with various changes both biologically, socially, culturally, economically, healthily, and psychologically become a group that is vulnerable to a variety of mental problems and depressive behavior. The increased prevalence of depression in older people is likely to be related to an increased disability, cognitive impairment, a drop in economic status and a decline in social support especially in families. When feelings of isolation increase, the elderly will be vulnerable to depression.

Based on the above statement, depression is one of the problems of the mental disorder found in the elderly. Palopo City is one of the places with the elderly, on average has a low economy, some needs are farming or just expecting help from their children, and often found to only live because they do not have families who are in the same environment.

II. METHOD

The analytic observational research design using a crosssectional approach is a study that studies factors related to A. Cahaya STIA Puangrimagalatung cahayaprimabone@gmail.com

Geminastiti Sakkir Universitas Negeri Makassar geminastitisakkir@unm.ac.id

depression levels — this research conducted by identifying through a questionnaire to the elderly in the City of Palopo. The sample is determined based on the formula for estimating the size of the sample and then analyzing it to find the factors most related to the level of depression in the elderly in Palopo City.

III. RESULT AND DISCUSSION

A. Relationship Anxiety with Elder Depression

Based on the results of the study showed that there was a significant relationship between anxiety and depression in the elderly, where the more severe stress experienced by the elderly, the level of misery experienced was getting worse. Tension arises because it is not able to adapt or adjust to the problems faced so that anxiety becomes insoluble; this will cause depression feelings to arise marked by sadness, guilt, despair, feelings of emptiness.

Ikasari's research states there is a relationship between anxiety in the elderly with depression. Based on the results of the study, it also happened because it influenced by other subvariables namely family support and spirituality, so that it could not assure that the elderly experiencing mild anxiety would experience mild depression, as well as the elderly with moderate anxiety, would experience moderate depression too [2].

In Gallo & Gonzales, symptoms of depression in the elderly are anxiety and anxiety, despair [3]. Sumarni's research results show that there is a difference between fear and depression; the higher the tension, the more likely it is to experience depression and where psychosocial stressors and depression get very statistically significant differences [4].

The research results of Agus stated that there is a relationship between anxiety and depression [5]. Depression caused by low neurological activity in the brain that functions to regulate pleasure. This caused by an insufficient supply of neurotransmitters at synapses. Two neurotransmitters have something to do with depression, namely norepinephrine and serotonin. One symptom that is associated with depression but not associated with norepinephrine or serotonin is anxiety. Anxiety is a response to an unpleasant condition due to grief, but there is also evidence that stress may have a physiological basis. Fear is a problem that often accompanies depression.

Usually, anxiety arises first before depressive symptoms. Anxiety can also worsen the condition of depression. Some of its characteristics are looking tense, worried and scared. There is anxiety related to fear of loss, fear of being left alone. Stress in the elderly is the most common thing. Most of the elderly experience anxiety as they get older. Psychological factors include feeling bored, tired or depressed. Generally, this anxiety is an unpleasant thought, characterized by worry, discomfort, and bad feelings that can not be avoided by someone [6]. As humans get older, they tend to experience more permanent health problems and have the potential to cause disability. Most elderly have one or more chronic physical conditions or limitations. Some older adults also have the potential to experience anxiety and depression.

B. Relationship of Family Support with Elderly Depression

The family is a support system which means it can give a clue about the mental health of the client, events in his life, and the support system received. The support system is essential for elderly health, especially physically and emotionally. Elderly frequented, accompanied and supported will have better mental health [7].

Depression in the elderly starts with feelings of loneliness and alienation. But with the support of the family that can make the elderly feel safe, feel there is accompanying, there is caring about the existence of the elderly. Family support that given can make the elderly feel cared for especially about health issues. Thus the elderly feel helped in finding solutions for their health so that the elderly become calm and have adaptive coping in solving a problem. With this, it can conclude that excellent family support can make the elderly feel relaxed and the elderly can have good dealing in solving problems to cause the elderly to have mild levels of depression.

Older adults in Indonesia generally live with families so that families can classify as people who matter to the elderly. Family support is one form of family therapy that included in the management of depression in the elderly. Through family support, the elderly will feel that someone is still paying attention, feeling like they want to help overcome the burden of their lives. So the support of families who have emotional ties will provide strength to the elderly to live a better old age [7].

With that, family members need to have coping mechanisms to ease the crisis in the problem in the family. The coping comes from the ability of individuals to solve problems, have a positive outlook, physical health, adequate social and material skills and family support. Then coping can lead to adaptive, where the elderly can overcome the problem and avoid depression. But if coping falls into the wrong state, the elderly will tend to be depressed [7].

C. Relationship of Family Spirituality with Elder Depression

The spirituality factor is very instrumental in overcoming the problems faced, seeing that some of the elderly have high spirituality, it is possible that the elderly only experience depression with a mild level because they already have a defense in the form of positive coping mechanisms to deal with the problems that come. Related to the level of depression experienced by the elderly in addition to the influence of spirituality which owned this might also influence by the support of the family and anxiety experienced by the elderly [8].

The identification of elderly spirituality from the results of the study showed that most of the informants had high spirituality. A person's spirituality can influence by his life experience, meaning that positive and negative life experiences can affect one's spirituality and vice versa is also influenced by how someone interpreted the experience spiritually [9][10].

The results showed that most of the elderly experienced depression, but only limited to mild depression, so it did not interfere with the daily activities of the elderly themselves. Here the spirituality factor is very instrumental in overcoming the problems faced, seeing that some of the elderly have high spirituality, it is very likely that the elderly only experience depression with a mild level because they already have a defense in the form of positive coping mechanisms to deal with the problems that come.

If a person grows more and more mature, then the experience and spiritual knowledge are increasingly developed because spiritually is closely related to an individual's daily life. The same as spiritual development that occurs in the elderly. Religious someone who is vulnerable to the elderly experience a more profound spiritual experience or it can be said that an elderly person generally has a high spirituality because when someone has entered an advanced age, he tends to want to get closer to the Almighty and can also begin to accept changes in daily life and activities as well as the existence of destiny in the form of death that afflicts oneself, relatives or friends of the elderly [11].

IV. CONCLUSION

Based on the results of research and discussion, it concluded that there is a significant relationship between anxiety among the elderly and depression experienced by the elderly in Palopo City, the higher the stress experienced by the elderly, the greater the level of misery experienced. There is a significant relationship between family support and depression experienced by the elderly in the City of Palopo; the higher the family support obtained by the elderly; the level of distress experienced is lighter. There is a significant relationship between the level of spirituality with grief experienced by the elderly in the City of Palopo, the higher the level of spirituality that is owned by the elderly, the level of depression experienced by the lighter.

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