



Analysis of Factors Affecting the Well-Being of the Elderly in Bengkulu City

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ABSTRACT

Well-being is a broad concept that has many factors that can influence it. One indicator that reflects the success of development is the increase in life expectancy (UHH) of the population, which also has an impact on the increasing number of elderly people. This study aims to analyze the factors that affect the welfare of the elderly in the city of Bengkulu. The influence of education level, employment status, income, marital status, and health access to the welfare of the elderly in Bengkulu City. The sample size was 100 elderly people out of a total of 31,857. Samples obtained from the calculation of the number of elderly populations in Bengkulu using Slovin formula and error rate of 10%. Data collection was conducted through the dissemination of questionnaires, structural interviews and in-depth interviews. Analyzed by logistic regression analysis. Based on the results of the study, the level of education, employment Status, marital Status and Health Access does not affect the welfare of the elderly and income significantly and positively affect the welfare of the elderly in the city of Bengkulu.

INTRODUCTION

The main objective of development is to create the welfare of the community which can be seen from increased economic growth and equitable income distribution (Yasa and Arka, 2015). The increase in population causes Human Resources (HR) to increase and is seen as development capital, but on the other hand can be an obstacle to successful development. Slowly but surely, the problems of the elderly began to receive the attention of the government and society. The rise in life expectancy and consequent growth in the number of old individuals in Indonesia are a natural result of development's success. (Maryam et al., 2008: 10).

The increase in the number of elderly population is due to the increase in life expectancy as a result of improving the quality of Health (Andini et al., 2013). Life expectancy (AHH) is an estimate of the average length of life of the population assuming that there is no change in mortality patterns according to age (BPS, 2018). The increase in life expectancy (AHH) is one of the indicators in assessing the health status of the population to increase and prolong one's life (Utami and Rustariyuni, 2016).

Life expectancy is one indicator of the success of government programs such as improving the welfare of the population in general, and improving health in particular, but on the one hand increasing life expectancy will cause various problems (Rammohan & Magnani, 2015). The increase in the number of elderly people basically has a positive and negative impact. Positive impact, if the elderly population when in a healthy, active and productive, while the negative impact if the elderly have health problems resulting in increased health care costs, decreased income/earnings, increased disability, and the absence of social support and a less friendly environment with the elderly population (Dewi Utami & Rustariyuni, 2016).

According to a UN estimate, by 2050, there would be 74 million senior people in Indonesia, or 25 percent of the country's total population. In the next few years Indonesia will enter the elderly population structure (ageing population) when the percentage of the population aged 60 years and over reaches 10 percent (Hukum, 2015). This condition is due to the increasing number of elderly people every year, where the population aged over 60 years has reached 8.47% in 2015, an increase of almost double when compared to 1971 with a percentage of 4.5% (Dharmayanti et al., 2017).

Elderly (elderly) is someone who has entered the final stage of the phase of life. Groups categorized as elderly will experience a process that Aging processor aging process (Wahyudi, 2008). Growing old is a natural process that means a person has gone through three stages of life, namely children, adults and the elderly (Nugroho, 2006). Elderly is the final stage of the aging process. The process of getting old will be experienced by everyone. Old age is the last period of human life, where at this time a person will experience a gradual physical, mental and social decline so that he cannot perform his daily duties (stage of decline).

Aging is a cumulative change in living beings, including the body, tissues and cells, which suffer a decrease in functional capacity. In humans, aging is associated with degenerative changes in the skin, bones, heart, blood vessels, lungs, nerves and other tissues of the body. With limited degenerative abilities,

they are more susceptible to various diseases, syndromes and pain compared to other adults (Kholifah, 2016). In the elderly will experience the process of loss of tissue ability to repair itself slowly so that it can not defend the body from infection and is not able to repair damaged tissue (Constantinides, 1994 in Sunaryo, et.al, 2016).

Some expert opinion (Efendi, 2009) on age restrictions in the elderly as follows:

- a. Law No. 13 of 1998 in Chapter 1 Article 1 Paragraph 2 which reads "elderly is someone who reaches the age of 60 years and over".
- b. World Health Organization (WHO), elderly are divided into 4 criteria, namely middle age (middle age) from age 45-49 years, elderly (elderly) from age 60-74 years, elderly (old) from age 75-90 years and very old age (is the age above 90 years).
- c. Dra. Jos Mas (psychology UI) there are four phases, namely: investus phase from age 25-40 years, virilities phase from age 40-55 years, prasenium phase from age 55-65 years and phase from 65 years until death.
- d. Prof. Dr. Koesoemanto Setyonegoro elderly age (geriatric age) divided into 3 criteria, namely young old from age 65-75 years, old from age 75-80 years and very old 80 years and above.

Of the world's 7 billion people, 1 billion of them are elderly (elderly). In 2020, the number of elderly people in Indonesia reached 26.82 million people (9.92 percent). Meanwhile, in 2020, the number of elderly residents in Bengkulu province was 162.26 thousand people or reached 8.06 percent of the total population. This percentage puts Bengkulu as the province with the highest percentage of elderly number 5 in Sumatra.

The problems experienced by the elderly, especially in Indonesia, according to the deputy for disability and elderly empowerment of the Coordinating Ministry for Human Development and Culture (2017) there are 3, namely:

1. Health problems

Based on basic health research data (Riskesdas) in 2018, the most non-communicable diseases experienced by the elderly in Indonesia are hypertension, dental problems, joint diseases, oral problems, heart and stroke. Infectious diseases, among others, such as upper respiratory tract infection (ARI) and pneumonia.

2. Declining economic productivity

3. Social issues

Based on Susenas data in 2019, nationally the poverty rate in the elderly is higher than that of other age groups, the poverty rate of the elderly in Indonesia reached 11.1%. According to BPS in 2019 the dependency ratio of the elderly to the productive age population reached 15%, which means that 15 elderly people were covered by 100 productive age residents.

Elderly who have experienced physical deterioration can not do much movement, especially when afflicted by disease. The dependency ratio of the elderly in Indonesia to young people is quite high, it can be one of the problems. One of them appears violence against parents or elderly abuses such as parents who are not taken care of or abandoned. Based on the results of a study said that the elderly in Indonesia are in economically vulnerable groups, as many as 6.3% of the elderly live alone this is certainly at high risk due to physical abilities,

health conditions, and social mental changes of the elderly that tend to continue to decline. Based on data from the World Health Organization (WHO) regarding plan of healthy aging 2020-2030 there are 4 goals to support the welfare and health of the elderly in various countries including Indonesia, the four goals are as follows:

1. Collaboration with various sectors to support the elderly
2. Integrate various social services focused on the elderly
3. Community health services focused on the elderly
4. Provide access to long-term care for the elderly who are experiencing problems

The elderly population in Bengkulu province is included in the 5 provinces with the highest number of elderly residents in Sumatra. With an elderly population of 162.26 thousand (8.06%). The percentage of the elderly population in Bengkulu province in 2020 was 8.17%, up from 2010 which amounted to 5.86%. BPS Data shows that in 2020 a third of the elderly in Bengkulu were in the expenditure group of 40 percent and below. Of course this is worrying, because the condition of the elderly who are susceptible to illness and certainly require medical expenses. 1 in 2 elderly people is still active in work. Even this condition tends to increase in the last five years. It's just that the working elderly 88.30 percent work in the informal sector (own business, assisted business, non-permanent/unpaid workers, free workers, family workers). If you look at their working hours, there are still 15.89 percent of seniors who work more than 48 hours a week. In fact, according to the Convention the working hours threshold is 48 hours per week. Working with excessive working hours will adversely affect the physical and mental health of the elderly.

After all, the elderly are Indonesian citizens whose welfare is guaranteed by law. To solve the problem, both central and local governments have tried to issue social protection and health insurance programs. But the most important thing is that the government must ensure that the programs and guarantees are on target, so that the recipients of the benefits are the elderly who really need them.

This study provides empirical contributions related to the welfare of the elderly at the municipal level in Bengkulu city, namely with the title analysis of factors that affect the welfare of the elderly in Bengkulu City. In contrast to the previous study which was only at the sub-district level in Mengwi District, Badung Regency, Bali with the title analysis of factors that affect the welfare of the elderly in Mengwi District, Badung Regency. In addition, the culture and customs between different regions that require different research for each region.

Research Objectives

This study aims to analyze the influence of education level, employment status, income, marital status and health access to the welfare of the elderly in Bengkulu City.

LITERATURE REVIEW

Maslow's Hierarchy of Needs Theory

Maslow's Hierarchy of Needs Theory was introduced in 1943 through "A Theory of Human Motivation" in the psychological Review. In general,

Abraham Maslow argued that to meet the needs of the upper level, an individual must first meet the needs of the lower level and use these desires as things to motivate them.

Maslow's (1970) hierarchy of needs theory is about the hierarchy of needs which includes:

1. Physiological Needs

The lowest first-level requirements that must be satisfied for a person to advance to higher-level wants are physiological demands. Eating, drinking, breathing, and other physiological demands like sex and sleep are included in this list of needs.

2. Safety Needs

Second-level demands, security needs, must be satisfied only after first-level needs have been addressed. Stability, reliance, safety, and freedom from dangers are among the needs that are included in the category of security needs.

3. Social and Belongingness Needs

Once these two wants have been met to a degree of moderate satisfaction, emerge. That is, the need to relate to others. An individual will require friends and attention from someone during a period when they will feel incredibly alone and cut off from society.

4. Self-esteem Needs

Two types of self-esteem demands can be distinguished. Initially, there is the urge for strength, accomplishment, self-fulfillment, power, the capacity to inspire confidence, life, and independence. The second is the requirement for a good reputation, prominence, success, status, acknowledgement, and gratitude. Self-fulfillment, strength, ability, and self-confidence follow from meeting the demand for self-esteem.

5. Self-actualization needs

The fifth-highest level of need for someone who also wants to be satisfied is the urge for self-actualization or self-realization. This need only arises when the first four demands have been met to a satisfactory degree.

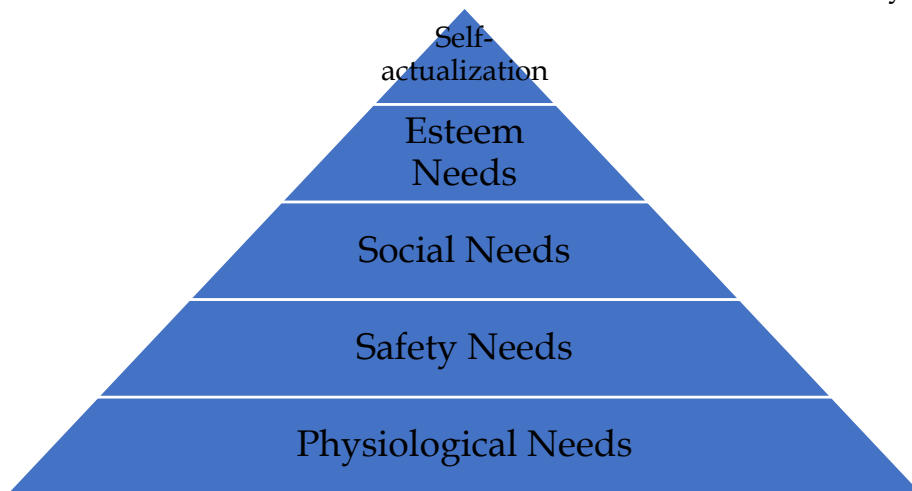


Figure 1: Maslow's Hierarchy Of Needs Theory

1. Welfare

The phrase "social welfare" is used to describe the state of well-being, which is a prerequisite for meeting both material and non-material requirements. Welfare is also related to the fulfillment of basic needs that are reflected in a livable home, adequate housing and food needs, affordable education costs and quality health. In general, welfare is the condition of a person who can optimize its utility at a certain cost limit and the condition of the fulfillment of physical and spiritual needs (Hukum, 2014).

2. Education Level

Education level is a long-term process that uses systematic and organized procedures. level of Education consists of: 1) Basic Education, is the level of early education during the first 9 years of school for children to underlie the level of Secondary Education, 2) Secondary Education, is the level of further education of basic education, 3) higher education, is the level of education after secondary education which includes Bachelor's, master's, and specialists organized by colleges.

3. Employment Status

The workforce is the population included in the working age. According to law No.13 of 2003 Chapter 1 Article 1 Paragraph 2 states that Labor is someone who is able to do the work to produce goods and or services in order to be able to meet their own or community needs. Broadly speaking, the population is divided into 2 groups, namely labor and non-labor.

When viewed from the ability and quality of workers, the workforce can be grouped into:

a. Educated workforce

This educated workforce acquires its ability in a field by means of formal education.

b. Skilled labor

Skilled labor is labor that requires expertise in a particular field by going through training or work experience.

c. Unskilled and unskilled workforce

The workforce is not educated and unskilled, working only on labor without any other advantages.

4. Income

According to Sukirno (2006) income is the amount of income received by the population for their work performance during a certain period, whether daily, weekly, monthly or annually. There are several classifications of income, namely:

a. Personal income is all types of income that are obtained without providing any activity that a resident of a country receives

b. Net income is personal income minus taxes that must be paid by income recipients, the remaining income that is ready to spend is called disposable income

c. National income is the value of all finished goods and services produced by a country in a year.

5. Marital Status

According to BPS, marital status is classified into 4 (four), namely: (i) unmarried, namely the status of residents who are single or unmarried, (ii) married, namely the status of residents who are married at the time of enumeration, both living together and separately, legally married residents (adat, religion, law and so on), and residents who live together and by the surrounding community are considered husband/wife, (iii) divorced life is the status of individuals who have separated as husband and wife due to divorce and have not married again, including a person who claims to be divorced but has not been legally divorced; and (iv) divorced death, which is the status of individuals who are left to die by their husband or wife and have not married again.

6. Health Access

Jones defines access to health services as a person's capacity to locate necessary medical care. The number of persons with insurance who can pay for the usage of resources and the availability of resources themselves can be used to gauge access to medical health services. Gullifoed et al., (2002) outlines the idea of measuring the accessibility of health services based on their utilization, which depends on affordability, physical accessibility, and services received, not just on the issue of adequacy.

Previous Research

Studies on regional financial capabilities have been conducted by a number of previous researchers. A summary of the research results is shown in Table 1.

Table 1. The application of Good Governance principles in public services, especially the principle of Participation, applicable provisions and rules, the principle of transparency, and the principle of responsiveness of the sub-district has given the best.

Author	Research Objectives	Methods Of Analysis	Research Results
Sandar Min Nanda (2020)	Min Hlaing, Clara Aye Han Aims to analyze the factors affecting health utilization in elderly Township, Yangon Region	Multiple logistic regression and chi-squared test	The average age of the respondents was 71.7 ° 8.17 years, and 68.4% of respondents used health services within a year. Although gender, health habits, and chronic disease diagnosis were associated with health service utilization in the bivariate analysis, multiple logistic

				<p>regression results reported that physical exercise [adjusted odd ratio (AOR) = 3.02, 95%CI: 1.07-8.53], financial support amounted to family [AOR = 2.77, 95%CI: 1.00-7.69], perception of transportation costs [AOR = 0.08, 95% CI: 0.01-0.54], accessibility to health care workers [AOR = 0.14, 95% CI: 0.04-0.50], and perceived health status [AOR = 0.03, 95%CI: 0.01-0.09] was a predictor health service utilization.</p>
Albert, Labs dan Trommsdorff (2010)	Aims to find out what factors influence subjective well-being in the elderly and adults in Germany	German socioeconomic Panel Study (SOEP)	Social relationships, health, retirement and other influential factors such as age, education and cognition. That more educated people reported higher well-being two years before death and a less sharp decline near death. It also shows that people with low education experience increased health burdens and fewer resources.	
Putu Yunny Lestari Kartini & I Nengah Kartika (2020)	Aims to analyze the factors that affect the welfare of the elderly in Mengwi District, Badung Regency	Multiple linear regression	Education level, employment Status, income, marital Status and Health Access have simultaneous and partial significant influence on the well-being of the elderly.	
I Wiriana & I Nengah Kartika (2020)	Aims to analyze the factors that affect the welfare of the community in the District / City of Bali province in 2012-2018	Methods of path analysis	(1) Education has no effect on income disparity in the Regency/City of Bali province in 2012-2018. (2) economic growth has a positive and significant effect on income	

disparities in the districts/cities of Bali Province 2012-2018. (3) education and economic growth have a positive and significant influence on the welfare of the community in the Regency/City of Bali Province 2012-2018. (4) income disparity has no influence on the welfare of the people in the District/City of Bali Province. (5) income disparity is not a mediating variable between education, economic growth, and community welfare in the Regency/City of Bali Province.

Indah Mulya Destriande, Intan Faridah, Kharisma Oktania, Syahnur Rahman	Aims to determine the factors that affect the quality of life of the elderly	Literature study methods	Factors found to affect the quality of life of the elderly include Family Support, Peer Support, marital status, economic level, education and spiritual
Goestyari Kurnia Amantha dan Putri Rahmaini	Aims to see the extent to which the effectiveness of government policies on the welfare of the elderly (elderly) Lampung Province in 2020 through the policy of cash Social Assistance (BST)	Quantitative descriptive	Shows that the government's policy of providing cash Social Assistance (BST) to the elderly category is very effective it is judged from: 1) the goals and objectives of appropriate and targeted policies, 2) the use of the budget has been in accordance with targets or public interest. This is the basis that the government's policy of providing cash Social Assistance (BST) for the elderly category in

<p>Made Dhea Viryamitha dan Putu Ayu Pramitha Purwanti</p>	<p>Aims to analyze the effect of education level, marital status, age, income and gender simultaneously and partially on the welfare of the elderly in Denpasar City</p>	<p>Multiple linear regression</p>	<p>Lampung province has been effective The results of this study are: 1) the level of education, marital status, age, income and sex simultaneous and significant effect on the welfare of the elderly in the city of Denpasar, 2) the level of education, income, and marital Status are partially significant positive effect on the welfare of the elderly in the city of Denpasar. Age does not have a positive effect on the welfare of the elderly in Denpasar, gender does not have .</p>
<p>AA Riani dan I Gusti Wayan Murjana Yasa</p>	<p>Aims to determine the influence of religiosity, economic conditions and health access simultaneously and partially on the welfare of the elderly in Dangin Puri Kauh Village</p>	<p>Multiple linear regression</p>	<p>Based on the results of the study, it was found that religiosity (X1), economy (X2) and health (X3) have a significant influence simultaneously and partially on the welfare of the elderly (Y) in Dangin Puri Kauh Village. This is the higher the religiosity (X1), economy (X2) and health (X3) of the elderly, then the welfare of the elderly (Y) in Dangin Puri Kauh Village, Denpasar City will increase</p>
<p>Ni Putu Ayu Putri Dharmayanti, Ketut Sudibia dan Ni Made Heny Urmila Dewi</p>	<p>Aims to analyze: 1) the effect of education income and employment status on health access for the elderly population, 2) the effect of education income, employment status and Health Access</p>	<p>Structural Equation Modeling (SEM)</p>	<p>Income variables, education level, employment status, and health access have a positive and significant effect on the welfare of the elderly population in Denpasar City. There is a positive and significant influence of income variables, level of</p>

on the welfare of the elderly population, 3) the effect of income, education level and employment status on the welfare of the elderly population in Denpasar city through health access for the elderly

education and employment status erhadap welfare of the elderly population in Denpasar city through access to health of the elderly population

Analysis Framework

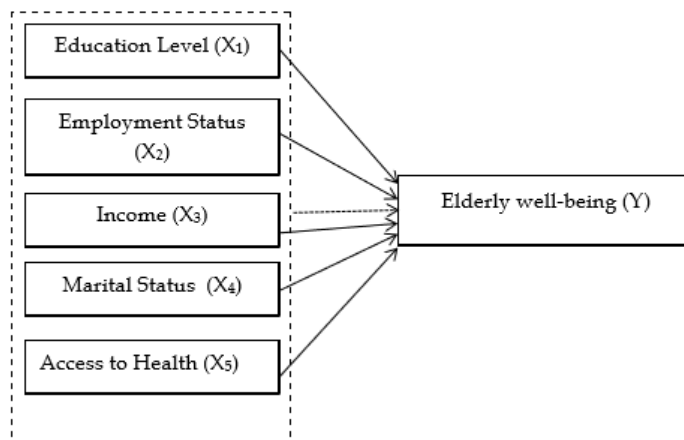


Figure 2: Research Framework

Description:
 The line \longrightarrow indicates the influence

METHODOLOGY

The research used is quantitative. In this study focused on the selected phenomenon and want to be understood in depth by analyzing the data from the questionnaire. This study was conducted in the city of Bengkulu. In this study the dependent variable is the welfare of the elderly (Y). in this study used four independent variables, namely: education level (X1), employment status (X2), income (X3), marital status (X4) and health access (X5). In this study quantitative data include education level, employment status, income, marital status, and health access.

In this study the source of data obtained from the respondents are the elderly (elderly) in the city of Bengkulu through structured interviews with respondents. Secondary Data obtained from the Central Bureau of Statistics, Bengkulu City Social Service and population data. Data collection methods used are observation, structured interviews, in-depth interviews. The population in this study is the entire population aged 60 years and over in the city of Bengkulu as many as 31,857 elderly people in the city of Bengkulu, so that the samples used were taken using the Slovin formula, namely:

$$n = \frac{N}{Ne^2}$$

Where: n = number of samples
 N = Number of Population
 E = error tolerance limit) is 10%

Then:

$$n = \frac{N}{Ne^2}$$

$$n = \frac{31.857}{1 + 31.857 (0,1)^2}$$

$$n = \frac{31.857}{1 + 318,57}$$

$$n = \frac{31.857}{319,57}$$

n = 99.68 (rounded to 100)

From the above calculation, get the results of 99.68 people. Thus, the sample that will be used in this study as many as 100 people of Bengkulu City aged over 60 years.

RESULT

Validity Test

Validity test is used to determine the valid or Invalid of a questionnaire. A questionnaire is said to be valid if the correlation coefficient is less than 0.05 or 5% or see the comparison of R count with R table. If R count < R table, then the items that are not significantly correlated are declared to be lost or Invalid, not used again in the next analysis. The results of the calculation on the validity test obtained r table 100 = 0.195. Test results can be seen in Table 2:

Table 2. elderly welfare validity test results

Variable	No item	R count	R table	significant	Description
Elderly Welfare	1	0,766	0,195	0,05	Valid
	2	0,544	0,195	0,05	Valid
	3	0,544	0,195	0,05	Valid
	4	0,544	0,195	0,05	Valid
	5	0,544	0,195	0,05	Valid

Source: Primary Data Processed, 2024

In the table above shows the results of the validity test that all the indicator items are correlated with the total score both from the value of GIS < 0.05 as well as from the value of rHitung > rtable (0.195). The significant correlation between the score of the item with the score of the table shows that the item used can measure the variables to be studied so that all indicator items are declared valid.

Reliability Test

In testing, reliability tests were performed using Cronbach's Alpha. The greater the resulting alpha value means that the items of questions in the questionnaire the more reliable is 0.60. A variable is said to be reliable if the Cronbach's Alpha value > 0.60. Reliability test in this study can be seen in the table below:

Table 3. Reliability Test Results

Variable	Cronbach Alpha	testing	Description
Elderly Welfare	0,776	0,60	Reliable

Source: primary data processed, 2023

From the results of table testing, it is known that the value of the cronbach alpha coefficient of the elderly welfare variable is 0.776, which means that the value is greater than 0.6, it can be concluded that the variable is reliable.

Coefficient Of Determination

Table 4: Coefficient Of Determination

Test	Elderly welfare
Hosmer and Lemeshow Test	0,949
Nagelkerke R square	0,551
Classification Matrix	88
Omnibus Test Of Model Coefficien	0,000

Source: primary data processed, 2024

Based on the table above, it is known that Sig Hosmer and Lemeshow's Goodness of Fit Tests is greater than 0.05 which is 0.949, this indicates that the results of logistic regression are feasible to use. Based on the table above, it can be seen that the value of Nagelkerke R square is 0.551, thus the elderly welfare variable is only explained by 0.551 by independent variables in this study, while 0.449 is explained by other variables that are not used in this study. In the table above it can be seen that the value of the overall percentage shows 88 it can be explained that in this study the independent variable is able to explain the dependent variable by 88%.

Regression Coefficient

The following is an explanation of the effect of independent variables, namely the level of education, employment status, income, marital status, and health access to the dependent variable, namely the welfare of the elderly. Criteria that must be met is the significant value of each independent variable is <10%. The following regression coefficient test results.

Table 5. Hail Regression Coefficient Test

Variable	B	S.E	Wald	df	Sig.	Odd Ratio
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Education Level	-,012	,060	,043	1	,835	,988
Employment Status	-,568	,577	,971	1	,325	,567
Income	,000	,000	21,574	1	,000	1,000
Marital Status	,559	1,387	,163	1	,687	1,749
Health Access	19,151	28420,737	,000	1	,999	207509275,7
Constant	-	28420,737	,000	1	,999	,000
	21.762					

Source: Primary Data Processed, 2024

Based on Table 5 can be seen the influence of each independent variable to the dependent variable in this study. It is known that the level of education, employment status, marital status, Health Access does not significantly affect the welfare of the elderly, while income has a positive and significant effect on the welfare of the elderly.

DISCUSSION

The Influence Of The Level Of Education On The Well-Being Of The Elderly

Based on the results of research that shows that the level of Education does not significantly affect the welfare of the elderly. So it can be seen that the level of education is not a major consideration in the welfare of the elderly. The results of this test showed that the level of Education does not significantly affect the welfare of the elderly, this means that respondents are not determined by the level of education they have.

The results of this study are different from previous studies, namely research conducted by Putu Yunny Lestari Kartini and I Nengah Kartika in 2020 conducted in Mengwi District, Badung Regency, Bali with the title "analysis of factors affecting the welfare of the elderly in Mengwi District, Badung Regency". In the previous study, the variable level of Education has a positive and significant effect on the welfare of the elderly. This gives an idea that the elderly who have a history of Higher Education have more knowledge so that they have the opportunity to get a better and decent job compared to the elderly who are not highly educated. So that with a better and decent job this makes the elderly can have enough income to meet their needs and can save to meet their needs in retirement.

While in this study the level of education of the elderly has no significant effect on their well-being. Because there are still other factors that are the main consideration. Seniors who are not highly educated still have the opportunity to get a better job and decent, that is, a job that is in accordance with the skills or skills they have.

Influence Of Employment Status On The Welfare Of The Elderly

Based on the results of research that shows that employment status does not significantly affect the welfare of the elderly. So that it can be known that employment status is not a major consideration in the welfare of the elderly. The results of this test show that employment status does not significantly affect the

welfare of the elderly, this means that respondents are not determined by the welfare of their employment status.

In this study, whether or not another person works is not the main influence on their well-being. Because an elderly person who does not work can still meet his daily needs. With the help of the government or the elderly who live with their families can still be assured of life. So, whether the elderly are working or not working does not significantly affect their well-being.

The Effect Of Income On The Well-Being Of The Elderly

The results of this study illustrate that the elderly who have high incomes improve the welfare of the elderly. This study is supported by the results of research from Dominko & Verbic (2020) which states that income has a positive and significant effect on the welfare of the elderly. Income has an influence on the welfare of the elderly population, because income in the form of money is a tool to meet one's life needs. One of the factors of well-being is the adequate standard of living. The results of this study are also reinforced by the results of interviews conducted with one of the respondents.

Based on the results of the interview, income is an important factor in influencing the well-being of the elderly. Having an income makes the elderly able to meet their needs. The higher income owned by the elderly makes the welfare of the elderly increase because they feel no need to bother to meet their needs. Wang et al., (2019) "states that a person with a high income has better well-being. Individuals who have a high income have a greater chance of getting whatever they want such as goods and services". The fulfillment of the needs desired by a person makes himself closer to achieving well-being. Based on the description, This is in accordance with the hypothesis testing that income variables have a positive and significant effect on the welfare of the elderly in Bengkulu.

The Effect Of Marital Status On The Welfare Of The Elderly

Based on the results of studies that show that marital status does not significantly affect the well-being of the elderly. So it can be known that marital status is not a major consideration in the welfare of the elderly. The results of this test showed that marital status does not significantly affect the welfare of the elderly, this means that respondents are not determined by their marital status. In this study, whether or not an elderly person is married is not a major influence on their well-being. Elderly who are not married or who are widowed, widowers can still live in prosperity with other influential factors. If an elderly person lives alone and he has an income, then his income he can use to meet his daily needs and also to ensure his life.

Elderly who are married are also guaranteed welfare, for the elderly who still live with their husband/wife and children, grandchildren or other family members should still maintain communication in the family. The elderly are faced with a variety of life events and events that make changes that can cause stress. Life events that occur in the elderly, among others, the event of losing a life partner or loved one has an impact on psychological functions that make the elderly who reject the current conditions, become quiet, angry, moody, anxious

to depressive conditions. This affects the quality of life so that the welfare of the elderly decreases.

Influence Of Health Access On The Well-Being Of The Elderly

Based on the results of research that shows that Health Access does not have a significant effect on the well-being of the elderly. So it can be known that health access is not a major consideration in the welfare of the elderly. The results of this test show that access to health does not significantly affect the welfare of the elderly, this means that respondents are not determined by the welfare of their health access.

In general, almost all elderly people have access to health, but this access to health has no effect on the welfare of the elderly. Seniors who do not have a health insurance card or whose residence is far from a health care center can still get decent health services. By way of general treatment or also by traveling long distances. But it is possible that ownership of Health Access is one of the important things for the elderly to maintain their health. Because the elderly are susceptible to various diseases. Elderly who are rent with health problems will be able to meet their health needs with access to health.

CONCLUSION AND RECOMMENDATION

The level of education, employment status, marital status and access to health did not significantly affect the welfare of the elderly in Bengkulu City. While income has a significant and positive effect on the welfare of the elderly in Bengkulu.

The level of Education does not affect the welfare of the elderly in Bengkulu. Lanisa who took higher formal education did not affect her welfare when compared to the elderly who did not take higher formal education. Elderly who work or not also has no effect on well-being. Because even though there are elderly people who are not working, their lives are borne by their families or receive elderly assistance from the government. Income has a significant and positive effect on the welfare of the elderly in Bengkulu City, the higher the income of the elderly, the more prosperous they will be, because they are able to meet their needs with their income. Marital Status has no effect on the well-being of the elderly. And access to health has no effect on the well-being of the elderly.

The elderly population is expected to be able to take advantage of the provision of education, income and access to health to live their best lives. For the elderly who are still working to work according to ability and still pay attention to health. For the elderly who still live with their husband/wife and children, grandchildren, or other family members, you should still maintain communication in the family.

For the government and Related Agencies to improve the quality of data on the elderly population in each region, making it easy for the data in the interests of research or government policy, the government is also expected to improve social welfare services for the elderly are evenly distributed in each region, and the government is expected to improve activities for the elderly active and independent elderly.

ADVANCED RESEARCH

The limitations of this study were arranged in such a way as to obtain the best possible results. But in the process, to get the perfect result is very difficult. Because in the implementation of this study there are limitations, namely the factors that affect the welfare of the elderly consists of only 5 (five) variables, among others, the level of education, employment status, income, marital status and access to health. While there are still many other factors affecting the well-being of the elderly. Based on the limitations of this study, the authors recommend for further research to add other variables that affect the well-being of the elderly. So, it is able to show a broader picture of what factors affect the well-being of the elderly.

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