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Research Article

Social Interaction Among the Elderly During the Covid-19 Pandemic in Central Jakarta

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Abstract

Background: The impact of Covid-19 is beyond the interpretation of various groups in Indonesia, Covid-19 has a worrying and detrimental impact on various aspects of society. The conditions that have an impact are seen in changes in interaction, where due to the government's policy to carry out *physical distancing*, and quarantine, social interaction between communities' decreases, as a result, there is a community structure that causes a shift in lifestyle to new habits that make social interaction erosion in the community, especially among the elderly. The purpose of this study is to find out about social interactions among the elderly during the Covid-19 pandemic in Cempaka Putih, Central Jakarta.

Method: The research design used is a quantitative descriptive method using univariate analysis. The questionnaire consists of 12 question items, where the questionnaire used has been declared valid and reliable. The sample used in this study was 108 respondents.

Results: The results of this study were that there were 100 elderly or 92.6% of the elderly who had sufficient social interaction.

Discussion: This study possesses that most of the elderly have sufficient social interaction, so it is expected for the local health service to run the elderly program with Group Activity Therapy during the pandemic by complying with health protocols.

Keywords: social interaction, elderly, pandemic, covid-19

Introduction

According to the World Health Organization (WHO), the elderly is someone who has entered the age of 60 years and above. The elderly are an age group in humans that have entered the final stage of their lifetime.[1] In the following year 2021, the world's elderly figure decreased to 600 million elderly people recorded in the world.[2] In 2021 Indonesia has an elderly population reaching 29.3 million elderly whereas Indonesia has increased to

2.48 million elderly.[3] In 2021 the number of elderly in DKI Jakarta experienced a fairly high increase to 1.02 million elderly.[4] At the research site in the Cempaka Putih area, the highest number of elderly people were found at the age over 60 as many as 5,151 people, the age above 65 as many as 2,942 people, and the age above 70 as many as 1,525 people. The highest number of elderly people in the Cempaka Putih area in Rawa Sari is at the age of 60 as many as 3,182 people, above 65 as many as 1,807 people, and at the age above 70, as many as 937.[5] The stages of aging begin with the descent of all limbs, including a decrease in the brain. Parts of the brain will decrease to (10.20%) every year.[5] Social problems usually occur in most of the elderly, namely the weak ability to interact socially. Social interaction has a main function in the standard of life of the elderly, for example increasing the self-esteem of the elderly as well as the quality of life in the elderly. Social interaction can occur due to there being social contact as well as social communication. Social contact occurs not only because it depends on the action, but it can also be due to the response to the actions that occur. The presence of social communication will take the action and what is perceived by the individual can be known by others.[1]

Covid-19 or what is usually called *corona* has become a public concern starting when it emerged in China initially in 2020 and dropped thousands of victims.[6] Due to the virus, the phenomenon has become a point of concern for foreign countries, including Indonesia. The Covid-19 pandemic seems to have made an impact on the economic and social fields in Indonesia since the end of 2019.[6] The government is making quarantine efforts as a method of limiting a person or group to prevent the possible spread of the Covid-19 disease.[7] The impact of Covid-19 is beyond the interpretation of various groups in Indonesia, Covid-19 has a worrying and detrimental impact on various aspects of society, especially the elderly.[8] Conditions that have an impact can be seen in changes in interaction, where due to the government's policy to carry out *physical distancing*, and quarantine, social interaction between communities has decreased.[9,10] The Covid-19 virus outbreak pandemic has become a social reality that inevitably has to be faced by the community whose spread of the Covid-19 virus has had an impact on people's attitudes that have become more overprotective of the environment. Concerns about Covid-19 influence the social attitudes of each individual, especially towards the process of social interaction carried out by each individual. Deciding to stay away from social life normally is better according to today's society. As a result, there is a structure of society that causes a shift in life patterns to new habits that make social interactions erosion in erode. Based on research conducted by De Jesus, Wiyono[11] that social interaction in the elderly is dominated by sufficient social interaction with a percentage of 72.5%, good social interaction with a percentage of 2.5%, and less social interaction with a percentage of 25%. In contrast to the research conducted by Budiarti[12] but conducted before the pandemic, social interaction in the elderly was dominated by good social interaction with a percentage of 44.2%, while the elderly who had sufficient social interaction had a percentage of 36.4%, and the elderly who had less social interaction with a percentage of 19.5%. Research conducted by Samper, Pinontoan before the pandemic period that the elderly were dominated by good social.[13] Social interaction in the elderly can affect their level of depression. The higher the level of social interaction the lower the level of depression. This is in line with research conducted by Rosnadia & Fitrian, (2021) that the elderly have good social interactions (71.8%) and experience moderate depression (42.7%). This means that social interactions are well established and able to reduce the level of depression in the elderly. In addition, in this study depression can occur if social roles in society do not go well such as socializing, interacting with people around, or participating in activities carried out by the elderly, it will have an impact on the level of depression that is not controlled, this is supported by research.[14] Based on interviews conducted with the person in charge of the elderly program at the Cempaka Putih sub-district health center, since the Covid-19 pandemic, elderly health services activities have minimized the number of elderly people present so that social

interaction in the community is fairly limited. Researchers have assumed that during the Covid-19 pandemic, social interaction among the elderly is lacking.

Method

The research design used is a quantitative descriptive method that describes social interactions in the elderly during the Covid-19 pandemic in the Cempaka Putih region. The sample in the study was 108 elderly, with sample calculations using a margin of error of 10%. The tool used is a questionnaire (list of questions). The questionnaire in this study was in the form of a checklist with closed questions. The checklist is a list of questions where respondents just need to give a checklist ($\sqrt{}$) in the appropriate column. This questionnaire was adopted and modified by Murdanita, (2018). The social interaction questionnaires consist of 12 questions, namely 1-6 social interaction questionnaires are associative in which numbers 1-3 are cooperation, 4-6 are accommodation. While numbers 7-12 are dissociative social interaction questionnaires, where 7-9 is competition and question number 10-12 a contravention. The way to assess social interaction is if the answer is given a score of 1 and the answer is not given a score of 0. The lowest possible score is 0 and the highest score is 12, with the interpretation of the total score: 9-12 = Good, 5-8 = Enough, 0-4 = Less. The questionnaire was tested for validity and reliability again by the researcher directly. In the validity results, the result for each question item is declared valid if the r count > r table = 0.269. Of the 12 question items stated 10 question items were declared valid and 2 question items were invalid. However, both questions are still used because they are considered important to measure the interaction of the elderly so that sentences are replaced with sentences that are easy for the elderly to understand. As a result of reliability, the questionnaire used was declared reliable with a Cronbach alpha value of 0.680. According to Mariadi (2017), the criteria for a research instrument are said to be reliable when the reliability coefficient (r11) > 0.6.[15] The collected data is then analyzed both univariate and bivariate data by using the help of SPSS version 26.

Result

Table 1. Characteristics Respondents (N=108)

Characteristics of Respondents	Frequency	Percentage (%)
Age		
(Elderly) 55-65	50	46,3
(Young-Old) 66-74	42	38,9
(Old) 75-90	16	1,8
Gender		
Man	36	33,3
Woman	72	66.7
Education		
No School	2	1,9
Primary School	18	16,7
Junior High School	41	38,0
Senior High School	47	43,5
Marital Status		

Married	95	88,0
Widow/Widower	13	12,0

Based on table 1 shows that most respondents aged 55-65 years were 50 respondents (46.3%). There are more female respondents with 72 respondents (66.7%). Respondents with a high school education dominate from other education with a total of 47 respondents (43.5%). Respondents who were married were 95 respondents (88.0%).

Table 2. Social Interaction Among the Elderly (N=108)

Category	Frequency	Percentage (%)
Less Social Interaction	5	4,6
Enough Social Interaction	100	92,6
Good Social Interaction	3	2,8
Total	108	100,0

Based on table 2 shows that the respondents are dominated by having sufficient social interaction as many as 100 respondents (92.6%).

Table 3. Social Interaction Among the Elderly by Age (N=108)

Age	Good Social Interaction		Social Interaction is Quite Enough		Less Social Interaction	
	N	%	N	%	N	%
(Early Elderly) 55-65	1	0,9	46	42,6	3	2,8
(Middle-Aged) 66-74	1	0,9	39	36,1	2	1,9
(Old Age) 75-90	1	0,9	15	13,9	0	0,0
Total	3	2,7	100	92,6	5	4,7

Based on table 3 shows the results that more elderly respondents aged 55-65 who interact socially enough as many as 46 respondents (42.6%).

Table 4. Social Interaction Among the Elderly by Gender (N=108)

Gender	Good Social Interaction		Social Interaction is Quite Enough		Less Social Interaction	
	N	%	N	%	N	%
Man	1	0,9	34	31,5	1	0,9
Woman	2	1,9	66	61,6	4	3,7
Total	3	2,8	100	92,6	5	4,6

Based on table 4 shows that most respondents of the female sex as many as 66 respondents (61.6%) have sufficient social interaction.

Table 5. Social Interaction Among the Elderly by Education (N=108)

Education	Good Social Interaction		Social Interaction is Quite Enough		Less Social Interaction	
	N	%	N	%	N	%
No School	0	0,0	2	1,9	0	0,0
Primary School	0	0,0	17	15,7	2	1,9
Junior High School	1	0,9	39	36,1	0	0,0
Senior High School	2	1,9	42	38,9	3	2,8
Total	3	2,8	100	92,6	5	4,6

Based on table 5 shows the results that social interaction based on education in most high school education has sufficient social interaction among as many as 42 respondents (38.9%).

Table 6. Social Interaction Among the Elderly by Marital Status (N=108)

Marital Status	Good Social Interaction		Social Interaction is Quite Enough		Less Social Interaction	
	N	%	N	%	N	%
Married	2	1,9	89	82,4	4	3,7
Widow/Widower	1	0,9	11	10,2	1	0,9
Total	3	2,8	100	92,6	5	4,6

Based on table 6 shows the results that social interaction based on marital status who are married respondents have sufficient social interaction with as many as 89 respondents (82.4).

Discussion

Based on this study that most respondents had enough social interaction. According to Anwar (2008)[16] five factors influence the occurrence of social interactions, namely imitation factors, suggestion factors, identification factors, sympathy, and motivation. According to Anggraeny and Firdaus (2020)[17] the factor that affects social interaction is the cultural background, which is where social interaction will be formed from a person's mindset through his habits so that the more the same cultural background between a person and others, it will make the interaction stronger, the bond with the grub group, which is where the values embraced by a group greatly affect the way they interact. In contrast to the research conducted by Purbasari and Rinanto (2022)[18] that 79.5% of the elderly interacted socially well during the Covid-19 pandemic due to the elderly's mechanism in adjusting themselves to the environment to socialize is also good.[19] Research conducted by Samper. et al (2017)[13] before the pandemic period the elderly were dominated by good

social interaction a large part of the respondent had good social interactions, this was proven by the proportion of the elderly who could interact well in homes (92.3%) and communities (75%).[20] Based on the discussion above, it can be concluded that the cultural background of the elderly themselves in communicating so that it can be known whether the elderly have good, sufficient, or lacking social interaction can influence social interaction with the elderly.

The factor that causes the lack of social interaction is age, when the age increases, it begins to withdraw from society and lacks communication so it experiences a setback in interacting or socializing.[21] Based on the results of research that has been carried out, the elderly in the Cempaka Putih area who have sufficient social interaction in the early elderly aged 55-65 years as many as 2 people. In line with research conducted by Kaka (2022) that it is known that out of 75 elderly people, the most social interactions with sufficient categories were found, namely as many as 32 elderly (42.7%).[22] Research conducted by Sari L. A. (2021), showed that respondents aged 60-65 years experienced the most unfavorable social.[23] The social interaction data in this study used a social interaction questionnaire consisting of 12 question items where 1-6 questionnaires are associative where numbers 1-3 are cooperation, 4-6 are accommodations, 7-12 are dissociative social interaction questionnaires where 7-9 are competition and 10-12 are contraventions. Getting older causes a decrease in social interaction so you will feel difficulties in socializing.[24] The elderly with greater social involvement have a high spirit and breadth of life, as well as more positive mental health compared to the elderly who are less socially involved.[25] Based on this discussion, age increase greatly affects social interaction in the elderly where the older the level of interaction decreases.

Women are more likely to experience milder symptoms than men.[26] This means that women will have a greater level of interaction than men, it can be seen from the results in table 4.6 that based on this study, results were obtained that most elderly women have sufficient social interaction. This research is in line with research conducted by Oktaviana (2018) that more elderly people who are female (55.6%) have high social interactions compared to men (36.1%).[27] This study is different from the research conducted by Saing (2019) that the majority of respondents are male with good social interaction with as many as 17 elderly with a total percentage (68.0%), while respondents are female with good social interaction with as many as 20 elderly with a total percentage (62.5%).[28] This research is in line with researchers Ulfa and Nurjannah (2013).[29] Men are seen to have a decrease in interest in social interaction that is less than women, men are at risk of a decrease in social interaction due to the difficulty of expressing opinions to others and not everyone can accept their opinions.[30] Based on this discussion, it can be concluded that gender affects an interest in social interaction.

Based on the results of the study, the elderly whose last education was in high school had sufficient social interaction. Educational factors affect a person's ability to solve the problem at hand so the higher the level of social interaction possessed by the elderly.[31] This research is different from the research conducted by Ningsih (2020) in that most of them never went to school, namely 36 elderly people (72%) who had sufficient social interaction.[8] According to Setiarsih & Syariyanti (2020) a higher education a person will have more life experiences that he goes through so that he is better prepared to face the problems that occur.[32] Based on this discussion, it can be seen that the higher the education, the more experiences the elderly will share by interacting socially. Based on this study, it is dominated by the elderly who have sufficient social interaction with married marital status (82.4%). This is in line with research conducted by Masithoh, Kulsum, Parastuti, & Widiowati (2022) that most elderly people have moderate social interactions with married marital status.[33]

Conclusion

The elderly in Rawa Sari 01 Cempaka Putih sub-district mostly have sufficient social interaction, the elderly who are in the early elderly category (55-65) are dominated by having sufficient social interactions, and the elderly who are female as many as 66 respondents. The results of this study are expected to be a reference to conduct research related to social interaction in the elderly during the Covid-19 pandemic, for the health service local to run the elderly program with group activity therapy activities during the pandemic by complying with health protocols, and hopefully, this research will be a learning material for students related to the picture of social interaction in the elderly during a pandemic that can be the basis for theory in the practice of nursing care in the elderly/genetics.

Conflict of Interest Declaration

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References

1. Raudhoh S, Pramudiani D. LANSIA ASIK, LANSIA AKTIF, LANSIA PODUKTIF. Medical Dedication (medic): Jurnal Pengabdian kepada Masyarakat FKIK UNJA. 2021;4(1):126-30.
2. WHO. World Population Ageing 2021 Highlights. United Nation: WHO; 2021.
3. Avenzora. Statistik Penduduk Lansia. Jakarta: BPS; 2021.
4. BPS. Profil Lansia Provinsi DKI Jakarta: BPS; 2021.
5. Suparniati B. Gambaran interaksi sosial lansia dimasyarakat. Jurnal Online Mahasiswa,. 2020:44-51.
6. Winarni F. Pengaturan Pengendalian Covid-19 Dalam Perspektif Hak Atas Lingkungan Hidup Yang Baik Dan Sehat. Jurnal Hukum IUS QUIA IUSTUM. 2022;29(2):392-414.
7. Nugroho WD, Ruswidiono W. Pengaruh Komunikasi Internal, Dukungan Organisasi, Lingkungan Kerja Terhadap Kinerja Karyawan Perusahaan XYZ. E-Jurnal Manajemen Trisakti School of Management (TSM). 2021;1(3):25-32.
8. Putri AF, Rahmawati A, Putri SA, Lisviona CE, Ningsih TW. Dampak Pandemi Covid-19 terhadap Kultur Indonesia. Syntax Literate; Jurnal Ilmiah Indonesia. 2022;7(5):6149-54.
9. Sugiarto A. Dampak Covid-19 Terhadap Interaksi SosialL Keagamaan Dalam Keluarga. Jurnal Agama, Pendidikan, dan Sosial Budaya. 2021:10-20.
10. Indrawan MH, Amalina R, Sugiarto FA. LITERATURE REVIEW: CHARACTERISTIC ANALYSIS PHYSICAL CHEMISTRY PROPERTIES (ACIDITY, FLOW RATE, CONSISTENCY) SALIVA RADIOTHERAPY HEAD & NECK CANCER PATIENT. Medali Jurnal: Media Dental Intelektual. 2021;3(1):34-43.
11. De Jesus M, Wiyono J, Ardiyani VMJNNJIK. Hubungan Kecerdasan Emosional dengan Interaksi Sosial pada Lansia di Posyandu Tlogo Suryo Malang. 2018;3(1).
12. Budiarti AJJoHS. Hubungan Interaksi Sosial Terhadap Tingkat Kesepian dan kualitas Hidup Pada Lansia Di UPTD Griya Werdha Jambangan Surabaya. 2020;13(2):124-33.
13. Samper TP, Pinontoan OR, Katuuk M. Hubungan interaksi sosial dengan kualitas hidup lansia di BPLU Senja Cerah Provinsi Sulawesi Utara. Jurnal keperawatan. 2017;5(1).
14. Rosnadia A, Fitrniani DR. Hubungan Antara Interaksi Sosial Dengan Tingkat Depresi Pada Lansia: Literature Review. Borneo Student Research (BSR). 2021;3(1):428-34.
15. Mariadi A. 2017. Available from: http://repository.unpas.ac.id/32933/7/BAB%20III.pdf.
16. Anwar Y. Pengantar sosiologi hukum: Grasindo; 2008.

17. Anggraeny V, Firdaus NJJHJ. HUBUNGAN KESEPIAN LANSIA DENGAN INTERAKSI SOSIAL PADA LANSIA DI PANTI WREDA SANTO YOSEPH KEDIRI. 2020;6(1).

18. Purbasari D, Rinanto DJJKM. KOMUNIKASI DAN INTERAKSI SOSIAL PADA LANSIA SELAMA MASA PANDEMI COVID-19 DI KABUPATEN PEMALANG. 2022;9(1):1-6.

19. Purbasari D, Rinanto D. Komunikasi Dan Interaksi Sosial Lansia Selama Masa Pandemi Covid-19 Di Kabupaten Pemalang. Jurnal Kesehatan Mahardika. 2022;9(1):1-6.

20. Yusuf W, Lutfia H, Arlianti N, Ariscasari P. Studi Komparatif Tingkat Stress, Kualitas Tidur dan Interaksi Sosial pada Lansia yang Tinggal di Komunitas dan Lansia Penghuni UPTD Rumoh Seujahtera Geunaseh Sayang Banda Aceh. Afiasi: Jurnal Kesehatan Masyarakat. 2022;7(1):209-17.

21. Prasetia EN, Kartinah K, editors. Hubungan Interaksi Sosial Dengan Kualitas Hidup Lansia di Posyandu Lansia Delima I Di Desa Pitu Kecamatan Pitu Kabupaten Ngawi2021: Prosiding Seminar Nasional Keperawatan Universitas Muhammadiyah Surakarta ….

22. Kaka YW, Rosdiana Y, Trishinta S. Hubungan Antara Tingkat Depresi Dengan Interaksi Sosial Pada Lansia di Panti Al-Ishlah Blimbing Kota Malang: Fakultas Ilmu Keperawatan; 2022.

23. Sari LA. Interaksi Sosial pada Lansia yang Tinggal Bersama Keluarga. Jurnal Ilmiah Ners Indonesia. 2021;2(2):80-8.

24. Sari AP, Maria L. Hubungan Interaksi Sosial Dengan Tingkat Depresi Pada Lansia Di Panti Werdha PangestiLAwang. Jurnal Ilmiah Kesehatan Rustida. 2020:142–8.

25. Sari LA. Interaksi sosial pada lansia yang tinggal bersama keluarga. Jurnal ilmiah ners indonesia. 2021:80-8.

26. Nasution SA. 2021 [Available from: http://ecampus.poltekkes-medan.ac.id/jspui/bitstream/123456789/4595/1/KTI%20SHAKINAH%20D3%20-%20Shakinah%20Anjelina%20Nst.pdf.

27. Oktavianti A, Setyowati S. Interaksi Sosial Berhubungan dengan Kualitas Hidup Lansia. Jurnal Keperawatan Terpadu (Integrated Nursing Journal). 2020;2(2):120-9.

28. Saing AS. 2019 [Available from: http://repository.unjaya.ac.id/3390/.

29. Ulfa Z, Nurjannah AJSPSPDFKUSKDBA. Faktor-faktor yang mempengaruhi fungsi kognitif usia lanjut di UPTD Rumoh Seujahtera Geunaseh Sayang Ulee Kareng Kota Banda Aceh. 2013.

30. Ulfa Z, Nurjannah A. Faktor-faktor yang mempengaruhi fungsi kognitif usia lanjut di UPTD Rumoh Seujahtera Geunaseh Sayang Ulee Kareng Kota Banda Aceh. Skripsi: Program Studi Pendidikan Dokter Fakultas Kedokteran Universitas Syiah Kuala Darussalam Banda Aceh. 2013.

31. Pambudi WE, Dewi EI, Sulistyorini L. Pengaruh Terapi Aktivitas Kelompok Sosialisasi (TAKS) terhadap Kemampuan Interaksi Sosial pada Lansia dengan Kesepian di Pelayanan Sosial Lanjut Usia (PSLU) Jember (The Effects of Socialization Group Activity Therapy (SGAT) toward Ability of Social Intera. Pustaka Kesehatan. 2017;5(2):253-9.

32. Setiarsih D, Syariyanti I. Hubungan Harga Diri Dan Interaksi Sosial Dengan Fungsi Kognitif Pada Lansia. Indonesian Journal of Professional Nursing (IJPN). 2020;1(1):10-7.

33. Masithoh AR, Kulsum U, Parastuti F, Widiowati I. Hubungan Interaksi Sosial Dan Fungsi Keluarga Dengan Kualitas Hidup Pada Lansia Di Posyandu Seroja Desa Sambiyan Rembang. Jurnal Ilmu Keperawatan dan Kebidanan. 2022;13(1):176-84.