

# Relationship of Family Characteristics with Mental Health of Elderly in Slum Area of Bagan Deli Sub-District of Medan Belawan District

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**Abstract**—Families have a role to improve the quality of the elderly including their health in the slums. The diverse characteristics of elderly families will show the difference in giving the elderly a role. The purpose of this study is to familiarize the characteristic relationship of the family with the mental health condition of the elderly.

This research with cross-sectional approach is implemented in slums located in Bagan Deli Village, Medan Belawan Subdistrict. The population is a family that has elderly or elderly, although different from home and others. The sample was taken by purposively as many as 124 families. Dependent variable is state of mental health of elderly and independent is characteristic of family (age, education, occupation, residence status). The analysis is done by using chi square. Outcome: Age and family work related to mental health. Educational background, family residence status not related to mental health of elderly.

**Keywords**—mental health of elderly; family traits; slum area

## I. INTRODUCTION

The increasingly elderly population will be a development burden if the existing quality can not participate in development participation. Population Census 2010 data that the dependence of elderly people on productive age (15-59 years) 8.3% means that every 100 residents of productive age will bear the elderly as many as 8 people [1]. The elderly population in Medan city based on data from Central Bureau of Statistics shows improvement. In 2000 the number of elderly 4.95% and in 2010 to 5.58% is estimated in 2020 to 6.11% [2]. Based on research of Pearl in Medan City also get the characteristic of elderly in Town medan mostly is woman equal to 68,9% while elderly man is 31,1% [3].

Quality of elderly can be seen from various aspect that is health, economic, social. In terms of health WHO states in the health care of the elderly is Add life to years as well as years to life. The health concept of the elderly is different from other residents, there are three issues concerning elderly health: functional status, major health problems and illness. Functional status is an interaction of physical, psychological and socioeconomic disorders [4]. Mental health is one to describe the quality of health of the elderly. Mental caution needs to get

special attention because there are still many elderly who have mental / psychological disorder such as anxiety when aged old. Family has a big role to face elderly. In slums with family circumstances that have different characteristics have a different picture to face mental health problems elderly. Medan Belawan is the most districts in the slums of Belawan P. Sicanang, Bahari, Kelurahan Bahagia and Belawan I, Bagan Deli). [5]. The number of elderly with slum area certainly has the character of the more complicate the condition of the elderly. Based on research conducted on elderly women in elderly slum, the majority get assistance with family (96,4%) where education is higher at elementary level (elementary school) [6]. Based on the description of the background of the problems in this study are any factors related to mental health of the elderly in the slums of Medan Belawan district. The aim of this research is to know the relation of age of education, occupation and living place of elderly family with mental health of elderly.

## II. RESEARCH METHODS

The method used in this study is quantitative with cross-sectional approach. Population in this study is a family that has elderly members. different house but still in one village Bagan Deli and Belawan I. The technique of population taking with purposive that is with the inclusion criteria of the family are together with elderly in one house and different families home with elderly but still in one environment. From the result of the criteria, there were 124 families.

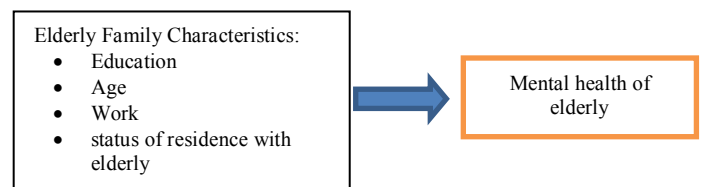


Fig. 1. The Conceptual Framework of The Study

Data collection is done with primary data needed in this research sourced from elderly family. The data collection instrument used in this study related to structured interview method, used instrument type: interview guide (questionnaire). The data of secondary data in this research is obtained from official publication in the form of annual report from BKKBN

of North Sumatera Province, Medan Belawan Sub-district, Medan Belawan Primary Health Center, Medan City Health Office, journal, magazine, thesis, disertation and books. To analyze quantitative approach using chisquare.

**III. RESULT AND DISCUSSION OF RESEARCH**

Medan Belawan District has an area of 2,182 Ha, the population of 128,967 represents the head of the household of 30,080 households, the status of land ownership is mostly governed by the government, the dominance of settlements as workers, fishermen and laborers. Form of clustering location, allotment in RTRW ditrict/city classification as residential, this area has also been handled by the activities of PNPM MANDIRI, MP which involves the community in handling the housing and slum dwellings. Potentials that can be developed in this district are the drying of salted fish as well as training and fostering skills for fishing communities, especially fisheries. Based on the recommendation of the sub-district heads located in the area of belawan island sicanang, happy village, kelurahan belawan bahari and Kelurahan Bagan Deli.

Kelurahan Bagan Deli is a research location. This village has an area of 230 Ha with a population of 19,409 inhabitants and has 15 environments with an area of 180.5 ha. There are 4 environments among which there are slum areas of the environment IV, VIII, X and XIV with the location of 7.43 ha. Boundary of the region is as follows North: Malacca Strait, South: Estuary of Delidan River, Belawan II, West: Belawan II and Belawan Bahari, East: Sei Tuan Sub-district. The total number of poor household heads is 379 families and the number of people living in this slum area is 1,516 people [7] State of mental health of elderly can be seen in table below:

TABLE 1. DISTRIBUTION OF MENTAL HEALTH OF ELDERLY IN SLUMS AREA OF BAGAN DELI VILLAGE 2017

Mental Health of elderly	N	%
Good	98	79
Not good	26	21

The result of the relationship of family characteristic of elderly with mental health of elderly is as follows:

**A. Age**

The relation of elderly family age with mental health of elderly can be seen in table below:

TABLE 2. DISTRIBUTION OF ELDERLY FAMILY AGE WITH MENTAL HEALTH OF ELDERLY IN SLUM AREA OF BAGAN DELI VILLAGE 2017

Age	Mental Health of elderly				Total		P
	Good		Not good		N	%	
	N	%	n	%			
< 45 years old	86	82,7	18	17,3	104	100	0,022
≥ 45 years old	12	60,0	8	40,0	20	100	

Because Asimp.Sig value 0,022 <0,05 hence can be concluded that there is a significant relationship between age and health mental of elderly.

**B. Education**

TABLE 3. DISTRIBUTION OF ELDERLY FAMILY EDUCATION WITH MENTAL HEALTH OF ELDERLY IN SLUMS AREA OF BAGAN DELI VILLAGE 2017

Education	Mental Health of Eldely				Total		P
	Good		Not good		N	%	
	n	%	n	%			
Low	66	84,6	12	15,4	78	100	0,047
Height	32	69,6	14	30,4	46	100	

Because Asimp.Sig value 0,047 <0,05 hence can be concluded that there is a significant relationship between education and health mental elderly.

**C. Work**

TABLE 4. DISTRIBUTION OF ELDERLY FAMILY WORK WITH MENTAL HEALTH OF ELDERLY IN SLUMS KELURAHAN BAGAN DELI 2017

Work	Mental Health of Eldely				Total		P
	Good		Not good		N	%	
	n	%	n	%			
Work	52	78,8	14	21,2	66	100	0,943
Doesn't Work	46	79,3	12	20,7	58	100	

Because Asimp.Sig value 0.943 > 0,05 it can be concluded that there is no significant relationship between work with mental health of elderly.

**D. Status of Residence with Elderly**

TABLE 5. DISTRIBUTION OF ELDERLY FAMILY DWELLINGS WITH MENTAL HEALTH OF ELDERLY IN SLUM AREA OF BAGAN VILLAGE DELI 2017

Status of residence with elderly	Mental Health of Eldely				Total		P
	Good		Not good		N	%	
	n	%	n	%			
Together	76	76,8	23	23,2	99	100	0,218
Separate	22	88,0	3	12,0	25	100	

Because Asimp.Sig value 0.218 > 0,05 it can be concluded that there is no significant relationship between residence status with elderly and mental health of elderly

Healthy Elderly Griya (Gasebu) Elderly in Surabaya is a facility for the Elderly; in order to fill the time in his old age with useful activities. The main purpose is the increase in ADL (Activity Daily Living) which tends to decrease much along with physical changes, mental changes, psychosocial changes, and spiritual changes. For that taken behavioral approach toward 4 characters elderly living with phobias, namely: elderly who experienced mental disorder, elderly who showed anger, depressed elderly, and elderly who experienced sensory impairment. Every morning, the elderly go to the therapy site according to their character and back in the afternoon so that daily activities routines are able to maintain their physical and emotional condition. The four therapeutic buildings are designed based on the character of the music for 4 characters of Living elderly with phobias, while to anticipate the physical stamina of the elderly, every therapeutic building provided a relaxing place for a lunch break. An acoustic depth is chosen to

support appropriate music quality for the Elderly, as the range of audible frequency narrows (80% decrease) with age.

#### ACKNOWLEDGMENTS

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