OVERVIEW OF DEPRESSION INCIDENT AMONG ELDERLY WHO AGED 60-74 YEARS OLD IN NGUMPUL VILLAGE, JOGOROTO SUB DISTRICT JOMBANG CITY

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ABSTRACT

Introduction: Generally, the physiological decline among elderly both physically and mentally will give an effect such as less sensitive to various stimuli both internal and external so elderly are vulnerable to mental disorders such as depression. The aim of this study to assess the over view of depression among elderly who aged 60-74 years old in Ngumpul Village, Jogoroto Sub District, Jombang City.

Methods: The research design in this study used description approach. The population was all elderly people who aged 60-74 years old with the number of population is 526 people. The sample size was 55 respondents by using simple random sampling method. The data were collected by using questionnaire Geriatric Depression Scale questionnaire to assess depression level of elderly.

Results: The results of this study found that almost all (87.3%) of respondents did not have depression experience. At the interview time found that the respondent who has depression was because of bed an event or unconditional environment (often left by their families), anxiety, negative thoughts (bored living in this world). A small percentage of family members who have experienced depression.

Conclusion: The conclusion in this research was not have depression experience incidence of depression among Elderly who aged 60-74 years old in Ngumpul Village Jogoroto Sub-district, Jombang city.

Key words : Depression Incidence, Elderly

A. INTRODUCTION

In essence to grow old is a natural process which means a person has gone through three stages of life, it are: childhood, adulthood and old age. The aging process is an inevitable biological process that everyone will experience.

A person who experienced stress can be seen from the changes of physical condition. Complaints are often felt among people who experienced stress are angry, moody, anxious, anxious, sad, depressed, pessimistic, crying, mood or mood often change, decreased self-esteem or feel insecure, irritable, and has hostility, nightmares, and concentration/memory problem (Hawari 2013).

In 2010, the number of elderly in Indonesia an estimated 23.9 million or 9.77% and in 2020 will increasing with estimate 28.8 million or 11.34% (https://www.kemsos.go.id). In East Java the incidence of depression reached 7.18%, depression became one of the problems of mental disorders that are often occur among elderly (Kaplan, 2010). Based on data from the Central Bureau of Statistics (BPS) in 2015 the number of Elderly in East Java reached 4,209,817 people or (11.14%) of the total population in East Java (37,794,003 people). Based on data from the Jombang District Health Office in 2014 it was found that the data of elderly number in Puskesmas Mayangan Jombang is 11,615 people (Jombang Health Service, 2015). The elderly data in Ngumpul village which is the work area of Puskesmas Mayangan and the village built by FIK Unipdu Jombang in December 2016 amounted to 526 people.

Based on preliminary study in Ngumpul Village Jogoroto Sub-district Jombang Regency in December 2016 from 10 elderly people who had measured by GDS scale (geriatric depression scale) and found 60% (6 people) experienced depression in severe level, 20% (2 person) experienced depression in moderate level and 20% (2 persons) experienced depression in small level. Unutzer (2007) mentioned that depression in elderly was common in women group, in clients with chronic medical disorders or persistent insomnia, and in clients who have experienced stressful life events (eg loss of partners), functional decline, and social isolation.

Family support is one form of family therapy for elderly who experienced depression. So with give family support at leats they have family emotional feelings and it will give support for elderly and the elderly also can go through a period of their life. Therefore, the support from various level are needed, ranging from government institution to the

family level to take care of the elderly life either through posyandu elderly, increasing the role of elderly in the organization, intergenerational relationship coaching, and skills training for the elderly. Because in the group, the elderly can discuss about health, brainstorming, and gymnastics together (Amareta, 2008).

Based on the data above, the researchers interested in conducting research on "Overview of the incidence of depression among elderly in the Ngumpul Village, Jogoroto District-Jombang".

B. METHODOLOGY RESEARCH

The research design in this study used overview with description approach. Population in this study were all elderly who aged 60-74 years old in Ngumpul Village Jogoroto District, Jombang city with number 526 people. Sample in this research was part of elderly population who aged 60-74 years old with number of 55 people by using simple random sampling. The study was conducted in May 2018. Variable in this study was variable incidence of depression. The instrument used questionnaire.

C. RESULTS OF THE STUDY

Table 1. Distribution of general data of respondent

Number	General data	Frequensies	Percentage
1	Education		
	Not attend the school	27	49.1
	Elementary/ Primary School (SD-SMP)	20	36.4
	Senior High School (SMA)	6	10.9
	University	2	3.60
2	Gender		
	Male	8	14.54
	Female	47	85.46
3	Information		
	Ever	44	80.0
	Never	11	20.0
4	Information source		
	Health care provider	44	100.0
	Magazine	0	0
	Radio/TV	0	0
	Internet	0	0
	Total	55	100

Tabel 2. Distribution of depression incident data among elderly who aged 60-74 years old

Number	Specific data	N	%
1.	**Depression incident**		
	Depression	7	12.7
	Not depression	48	87.3
	Total	55	100.0

D. Discussion

Depresson incident among elderly who aged 60-74 years old

Table 2 showed that almost all (87.3%) of respondents were not have depression experience by 48 people.

Depression is a natural disorder of mood that is characterized by depth and sadness and continued until feels lose of life, not has problem about reality testing abilities / RTA is still good, personality remains intact (no splitting of personality), the behavior can be disrupted but within normal limits (Hawari, 2013). Depression is a disturbing mood of feelings, with the main symptom of sadness. This symptom was easy to find with the prevalence rate of 4-5% of the population, ranging from less, moderate, or severe degrees of disturbance. Judging from the clinical aspect, depression can stand on its own, is a symptom of another disease, has various physical symptoms, or occurs along with other diseases (comorbidities), so it can complicate management (Sudiyanto, 2010).

Depression that occurs in the elderly in a category where the level of depression is not disruptive or obstructing in their life, so they can still carry out daily activities on a regular and timely basis and the elderly also happy to do their daily activities. According to researchers at the interview time found that the respondent who has depression was because of bed an event or unconditional environment (often left by their families), anxiety, negative thoughts (bored living in this world) and a small percentage of family members who have experienced depression.

Based on table 1 showed that almost half (46%) of the respondents were hold primary and secondary education (elementary, junior high, high school).

Education means that the guidance for someone to the development of others person to get their ambition and in the end they get achievement and happiness. Education is needed to get information such as things that support health so as to improve the quality of life. Education can affect a person as well as a person's behavior of lifestyle especially in motivating to participate in the attitude of development. In general, the higher of education will more easily receive information (Wawan, 2010).

According to the researcher someone who educated has a good way of thinking, especially in dealing with a problem for elderly. With a good way of thinking so the respondents when faced with a problem can solve and prevent depression.

Based on Table 1 showed that almost all respondents (80%) received information sources from health workers.

The ease of obtaining information can help accelerate a person to increase new knowledge (Mubarok, 2010).

According to researchers of the elderly who get the source of information from health workers will get the right information about the importance of doing emotional calm in the aging process so that they do not experience depression.

E. Conclusion and recommendation

Conclusion:

The incident of depression among elderly who aged 60-74 years in Ngumpul Village, Jogoroto District, Jombang District, almost entirely is not depressed.

Suggestion:

Can provide adequate education and information for the elderly and families such as lifestyle, ways of daily adaptation, personality strength and interest.

F. Ethical clearance

The ethical clearance of this study was approved etic commission by health research of Nursing Faculty of Airlangga University, East Java. The number letter 663-KEPK on February 26, 2018.

G. Conflict of interest statement

Life expectacy of elderly people was special attantion in goverment, because life expectacy is one of indicator for successful national development. So, the prevention of depression among elderly was very importance and really need attantion and family support is one of best idea to reducing depression among elderly.

H. Source of funding

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