



## **Analysis of determinants of elderly welfare in Karangasem District, Karangasem Regency, Bali**

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### **ARTICLE HISTORY**

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### **ABSTRACT**

Increasing population mobility has resulted in many elderly individuals being left alone. This study aims to: 1) analyze the simultaneous and partial effects of income, health access, environmental conditions, and the perception of menama braya activities on the well-being of the elderly; 2) analyze the role of the perception of menama braya activities in moderating the influence of environmental conditions on the well-being of the elderly. This study uses a quantitative approach with an associative explanatory level. The population in this study consists of residents aged 60 and above in the Karangasem District, totaling 100 individuals. The sampling technique was conducted using accidental sampling combined with snowball sampling, with data collection methods including observation, structured interviews, and in-depth interviews. Data analysis was performed using moderated regression analysis. The results of the study show that: 1) income, health access, environmental conditions, and the perception of menama braya activities simultaneously have a significant effect on the well-being of the elderly; 2) income, health access, environmental conditions, and the perception of equalizing activities partially have a significant positive effect on the well-being of the elderly; 3) the perception of equalizing activities moderates (weakens) the influence of environmental conditions on the well-being of the elderly.

### **KEYWORDS**

Welfare of the Elderly; Income; Health Access; Environmental Conditions; Perceptions of Menyama Braya; Income; Health Access; Environmental conditions; Perception of Braya Matching Activities

## **1. INTRODUCTION**

Rapid growth in the number of elderly people is also expected to occur in Indonesia. Based on population projections from the 2015 Inter-Census Population Survey (SUPAS), the percentage of the elderly population in Indonesia will increase rapidly from 2015 to 2045 (BPS, 2018). If we follow the 2017 Indonesian Ministry of Health standards, Indonesia will have an elderly population before 2025. According to the projection results, it is also estimated that out of 100 residents in Indonesia in 2045, 14 of them will be residents aged 65 years or more (BPS, 2018).

Indonesia is predicted to face population aging in 2023 with a dependency ratio of the elderly population above 10% (United Nations, 2019). The final stage of the aging process as experienced by people aged 60 years and over will have an impact on

three aspects, namely biological, economic and social. The elderly are considered to have physical and psychological conditions that are more vulnerable than the productive population due to weakened immune function and the emergence of degenerative diseases so they generally need more free time (Pasha, 2020).

Efforts to increase national development, especially in the health sector, have an impact on increasing life expectancy which can also increase the elderly population (Rahman & Wongkaren, 2022). AHH is used to measure the success of population health development up to the district/city level in improving the welfare of the population in general, and improving health status in particular (BPS, 2020). Increasing AHH means improving the quality of life of the community, especially the elderly population. The following is an overview of the AHH level in Bali Province in 2020-2022.

**Table 1. 1 . Bali Province Life Expectancy Rates According to Regency/City (Year)**

Regency/ City	Bali Province Life Expectancy Rates According to Regency/City (Year)		
	2020	2021	2022
Jembrana	72.35	72.46	72.82
Tabanan	73.65	73.75	74.10
Badung	75.10	75.18	75.51
Gianyar	73.68	73.78	74.13
Klungkung	71.25	71.41	71.83
Bangli	70.52	70.62	70.97
Karangasem	70.47	70.56	70.89
Buleleng	71.83	71.95	72.32
Denpasar City	74.82	74.93	75.30
<b>Bali province</b>	<b>72.13</b>	<b>72.24</b>	<b>72.60</b>

Source: BPS Bali Province 2023

Based on Table 1, an increase in life expectancy occurred in all Regencies/Cities of Bali Province during 2020 to 2022, where Badung Regency is the Regency with the highest life expectancy in 2022, namely 75.51 years. Denpasar City is in the second highest position after Badung Regency. Karangasem Regency's life expectancy is relatively low but is increasing every year. The high level of life expectancy reflects a decreasing mortality rate or also means an increase in the number of elderly people.

The majority of elderly people in Indonesia still live in extended families (BPS, 2018), as population mobility continues, the extended family system is shifting to nuclear families, causing many elderly people to be left alone. Seeing the phenomenon that some elderly people are old and therefore have many health problems, elderly people who live alone tend to have worse health than elderly people who have families who care for them (Bag et al., 2014).

**Table 2. Number of Elderly Population by District in Karangasem Regency in 2023**

Subdistrict	Age group				Total
	60-64	65-69	70-74	>75	
Rendang	2,362	1,709	1,311	2,007	7,389
Sidemen	1,864	1,443	1,052	1,686	6,045
Mangosteen	2,366	2,117	1,707	2,464	8,654
Karangasem	4,600	3,553	2,580	3,637	14,370
Brother	3,619	2,694	2,052	3,165	11,530
Burdendem	2,780	2,103	1,532	2,524	8,939
Strait	2,270	1,774	1,428	2,296	7,768
Fort	2,931	2,267	2,003	2,861	10,062

Source: Karangasem Regency Dukcapil 2024

Based on Table 2, Karangasem Regency consists of eight sub-districts including Rendang, Sidemen, Manggis, Karangasem, Abang, Banyakdem, Selat and Kubu sub-districts. Of the eight sub-districts, the highest number of elderly people is in Karangasem District with 14,370 people, followed by Abang District with 11,530 people, and Sidemen District with the lowest number of elderly people with 6,054 people. Based on data on the number of elderly people, researchers are interested in researching elderly people in Karangasem District with the highest number of elderly people in Karangasem Regency, apart from that, considering that Karangasem District is the center of all population activities in Karangasem Regency and all population service centers are located.

The economic condition of the elderly population can be seen in terms of the income received by the elderly to meet their living needs. Income can come from various sources. Elderly people who are of working age will receive income from pension funds. Elderly people who do not work and do not have pension funds may receive financial support from other parties such as the government or private sector, from children/grandchildren/in-laws, friends and other family. Research conducted by Viryamitha and Purwanti (2020) shows that high income improves the welfare of the elderly. This is because the greater the income earned by the elderly, the greater the elderly's needs can be met, thus improving the welfare of the elderly themselves.

The Ministry of Health's policy in elderly health services aims to improve the quality of elderly health by providing elderly-friendly health service facilities to achieve elderly people who are useful for their families and communities. Research conducted by Pratiwi and Indrajaya (2022) shows that there is a positive influence of health factors on the well-being of the elderly. Poor environmental conditions can cause difficulties in obtaining support, especially for elderly people who live alone because they spend most of their lives in that environment ( ; Jane M Cramm and Anna P Nieboer 2015) (Djamhari, Ramdlaningrum, Layyindah, Chrisnahutama, & Prasetya, 2021). Spiritual and social relationships are things that greatly influence the happiness of an elderly person, quality of life greatly influences the well-being of the elderly. Meanwhile, the quality of life and well-being of the elderly is influenced by social support (Mulyati, Rasha, & Martiatuti, 2018). In line with this, research conducted by Bahari and Sudibia (2021) analyzed that family support is one of the factors of prosperity itself. The objectives of this research are as follows. 1) To analyze the simultaneous influence of income, access to health, environmental conditions, and perceptions of braya activities on the welfare of the elderly in Karangasem District. 2) To partially analyze the influence of income, access to health, environmental conditions, and perceptions of equalizing activities on the welfare of the elderly in Karangasem District. 3) To analyze the role of perceptions of equalizing activities in moderating the influence of environmental conditions on the welfare of the elderly in Karangasem District.

## **2. RESEARCH METHODS**

This research uses a quantitative approach with associative explanation techniques because it takes the form of a causal relationship (cause and effect). The research location is Karangasem District. This location was chosen based on data from the Central Statistics Agency which shows that Karangasem Regency's Life Expectancy Rate (AHH) is the lowest among other districts and based on the highest poverty level in Karangasem Regency. Karangasem District was chosen as the location for

the research, because the highest number of elderly people is in Karangasem District. The object of this research is the influence of income, access to health, environmental conditions, and perceptions of equalizing activities on the welfare of the elderly in Karangasem District.

The dependent variable in this research is Elderly Welfare (Y). There are four independent variables in this research, namely income (X1), access to health (X2), environmental conditions (X3), and perception of equalizing activities (M) as moderating variables. The types of data used in this research are quantitative and qualitative data. The data sources in this research are primary and secondary data. The population in this study is all residents aged 60 years and over who live in Karangasem District as many as 14,370 people in 2023 (Dukcapil Karangasem Regency). Based on calculations, the number of samples obtained was 100 samples in Karangasem District. The sampling method is non-probability sampling using the accidental sampling method combined with snowball sampling. Accidental sampling is a technique for determining samples based on chance and snowball sampling is a technique for collecting data sources by asking selected sample members to recommend other members who meet the research criteria (Marhaeni & Yuliarmi, 2019). Data collection methods in this research were carried out by means of observation, structured interviews and in-depth interviews. The data analysis technique in this research uses Moderated Regression analysis.

$$Y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_3 M + \beta_{X_3 M} + e$$

.....(1)

Information :

- Y : Elderly Welfare
- $\alpha$  : Constanta
- $\beta_1, \beta_2, \beta_3$  : Coefficient of each variable
- X1 : Income
- X2 : Health Access
- X3 : Environmental Conditions
- M : Perception of *Braya Matching Activities*
- X3M : Interaction between environmental conditions and perceptions of *equal braya activities*
- e : error

### 3. RESULTS AND DISCUSSION

The majority of elderly respondents in this study were in the 60-69 year age range, amounting to 68 percent. The minimum age group is 80 years and over. The proportion of elderly female respondents reached 56 percent while male respondents reached 44 percent, this shows that the majority of respondents in this study were elderly women. 52 percent of elderly people work and 48 percent of elderly people do not work. This means that many elderly people are still able to work and meet their living needs.

#### 3.1. Validity Test and Reliability Test of Research Instruments

The validity test aims to check whether the questionnaire as a research instrument is appropriate for measuring indicators in research. Reliability testing shows the extent to which a measurement tool can be trusted or reliable.

Source: Primary Data, 2024

**Table 3.** Recapitulation of Research Instrument Validity Test Results

Variable	Indicator	Correlation coefficient	Sig.( 2-tailed )	Information
Elderly Welfare (Y)	Y1	0.716	0,000	Valid
	Y2	0.619	0,000	Valid
	Y3	0.732	0,000	Valid
	Y4	0.640	0,000	Valid
	Y5	0.783	0,000	Valid
Health Access (X2)	X2.1	0.823	0,000	Valid
	X2.2	0.776	0,000	Valid
	X2.3	0.826	0,000	Valid
Environmental Conditions (X3)	X3.1	0.869	0,000	Valid
	X3.2	0.869	0,000	Valid
	X3.3	0.838	0,000	Valid
Braya Matching Activities (M)	M1	0.807	0,000	Valid
	M2	0.768	0,000	Valid
	M3	0.725	0,000	Valid
	M4	0.790	0,000	Valid

shows that all research instruments have a coefficient value with a total score of all statement items greater than 0.30 with a significance of less than 0.05. This shows that the statement items in the research instrument are valid and suitable for use as research instruments.

**Table 4.** Recapitulation of Research Instrument Reliability Test Results

Variable	Cronbach's Alpha	N of Items
Elderly Welfare (Y)	0.736	5
Health Access (X2)	0.736	3
Environmental Conditions (X3)	0.822	3
Braya Matching Activities (M)	0.775	4

Source: Primary Data, 2024

The reliability test results in Table 4 show that all research instruments have a Cronbach's Alpha coefficient > of 0.60. So it can be concluded that all variables have met the reliability or reliability requirements so that they can be used to conduct research.

### 3.2. KMO and Bartlett's Test

These two tests are used to see the intercorrelation between variables, whether the model used is feasible or not in factor analysis (Utama, 2016:197) .

**Table 5.** KMO and Bartlett's Test Results

No	Variable	KMO	Sig Chi-square
1	Health Access (X2)	0.770	0,000
2	Environmental Conditions (X3)	0.679	0,000
3	Perception of Braya Matching Activities (M)	0.717	0,000
4	Wellbeing of the Elderly (Y)	0.765	0,000

Source: Primary Data, 2024

shows that the Kaiser-Meyer-Olkin Measure of Sampling Adequacy (KMO MSA) value is > 0.50, so factor analysis can be continued. The Measure of Sampling Adequacy (MSA) test that has been carried out shows that the Anti-Image Correlation value for each indicator is  $\geq 0.5$ , so the MSA has been fulfilled and is suitable for use as factor analysis. The communalities test shows that the value of all variable indicators used has an Extraction value of > 0.50, so it can be interpreted that all the indicators used have a strong relationship with the factors formed.

### 3.3. Classic assumption test

The classical assumption test aims to determine the feasibility of the regression model used in this research, which includes the normality test, multicollinearity test and heteroscedasticity test.

**Table 6.** Normality Test Results

	Unstandardized Residuals
Statistical Tests	0.111
Asymp. Sig. (2-tailed)	,004 <sup>c</sup>
Exact Sig. (2-tailed)	0.155

Source: Primary Data, 2024

shows that the Exact sig value is  $0.155 > 0.05$ , so it can be concluded that the data is normally distributed. In testing normality, Exact P values are used. Exact P values are data normality calculations recommended in the SPSS guidebook. In cases where the amount of data is relatively small, it will be more accurate to use Exact P values (CR. Mehta; 25).

The multicollinearity test that has been carried out shows that the independent variable has a Tolerance value greater than 10% (0.1) and a VIF value of less than 10, which means the regression equation model is free from multicollinearity. The results of the heteroscedasticity test show that the sig value is greater than 0.05, which means there is no influence between the independent variables on the absolute residual. Thus, the model created does not contain symptoms of heteroscedasticity.

### 3.4. Simultaneous Influences

F Test analysis was used to help answer the simultaneous influence of income, access to health, environmental conditions, and perceptions of equalizing activities on the welfare of the elderly in Karangasem District.

**Table 7.** Test Results

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	262,832	5	52,566	237,473	,000 <sup>b</sup>
	Residual	20,808	94	0.221		
	Total	283,640	99			

Source: Primary Data, 2024

Based on the analysis assisted by the SPSS program, it can be concluded that the *calculated F value* is greater than  $F_{table} = 237.473 > F_{table} = F(0.05; 3.96) = 2.70$  or with a significance value of  $0.000 < 0.05$  then  $H_0$  rejected and  $H_1$  accepted, which means that the variables income, access to health, environmental conditions, and perceptions of braya activities simultaneously have a significant effect on the welfare of the elderly in Karangasem District. The R Square value is 0.927 or 92.7 percent, so it can be concluded that the variables of income, access to health, environmental conditions, and perceptions of socializing activities have an influence of 92.7 percent on the welfare of the elderly and 7.3 percent are influenced by other variables.

**3.5. Partial Influence of Income, Access to Health, Environmental Conditions, and Perceptions of Menyama Braya Activities on the Welfare of the Elderly in Karangasem District.**

The t test analysis was used to help answer the partial influence of income, access to health, environmental conditions, and perceptions of socializing activities on the welfare of the elderly in Karangasem District.

**Table 8.** Moderated Regression Analysis (MRA)

Model	Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.
	B	Std. Error			
(Constant)	-8,295	3,703		-2,240	0,027
1					
Income	4,814E-07	0,000	0,094	3,218	0,002
Health Access	0,977	0,062	0,681	15,667	0,000
Environmental conditions	1,359	0,270	0,968	5,032	0,000
Perception of Equaling Braya	0,540	0,202	0,426	2,675	0,009
Environmental Conditions*Perceptions Same as Braya	-0,045	0,014	-0,963	-3,162	0,002

Based on the results of moderated linear regression, the following regression equation can be created.

$$Y = -8.295 + 4.814EX_1 + 0.977 X_2 + 1.359 X_3 + 0.540 M - 0.045 X_3 M$$

Information :

- Y : Elderly Welfare
- X<sub>1</sub> : Income
- X<sub>2</sub> : Health Access
- X<sub>3</sub> : Environmental conditions
- M : Perception of Braya Matching Activities
- X<sub>3</sub>M: Interaction between environmental conditions and the perception of Braya Menyakan activities

Based on the tests carried out, it can be concluded that the question model used in this research is valid. The first variable is income. Research obtained in Karangasem District states that income has a positive and significant effect on the welfare of the elderly in Karangasem District, as seen from the coefficient which is positive 4.814e and significant 0.002. This is supported by research by Dharmayanti, Sudibia, and Dewi (2017) which states that the income variable has a positive and significant effect on the welfare of the elderly population in Denpasar City. The higher the monthly income received by the elderly population, the higher the purchasing power of the elderly population. This is also in line with research by Dominko and Verbič (2020) which states that income has a positive and significant effect on the well-being 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 a person’s living needs. The majority of elderly residents in Karangasem District work as small traders, farmers, livestock breeders, daily laborers and agricultural land workers, where the income they earn can only be used to meet their daily needs.

The second variable is health access. In this study, health access has a positive and significant effect on the welfare of the elderly in Karangasem District, which can be seen from the coefficient value which is 0.977 with a significant value of 0.000. These results

are in line with research by Putra & Sudibia (2023) which states that access to health has a positive and significant effect on the welfare of the elderly in Denpasar City. Research by Arissuhandana, Yasa, and Iw (2021) stated that access to health has a positive and significant effect on the well-being of the elderly. By living healthily, elderly people can live comfortably without having to suffer from their physical conditions. This is also in line with research by Kartini and Kartika (2020) which states that elderly people who have access to health have higher welfare compared to elderly people who do not have access to health. Karangasem District has health access that is easily accessible to elderly residents, such as Karangasem District Hospital, Bali Med Hospital, Karangasem II Community Health Center, and Tulus Ayu Clinic. Lack of understanding of health information by the elderly, requiring assistance from the village head or village officials to collect data and assist the elderly in making health insurance cards, for example KIS which can help the elderly get free health services, apart from that, community health centers also have a role in providing regular health checks through provision of posyandu for the elderly.

The third variable is environmental conditions. In this study, environmental conditions have a positive and significant effect on the welfare of the elderly in Karangasem District, which can be seen from the coefficient value which is 1.359 with a significant value of 0.000. This is supported by research by Asri & Husna (2020) which states that environmental conditions have a positive influence on the independence of the elderly because the family has cared for the elderly in accordance with the conditions of aging and all their limitations, which also has a positive influence on the welfare of the elderly. This is also in line with research by Putthinoi et al, 2016; Lawlor et al, 2002 in Candra, Rachmawati, and Rekawati (2024) which states that environmental factors such as the availability of community facilities, social support, and opportunities to interact with other people have an impact on the activities of the elderly. Seniors who live in supportive environments and have access to facilities such as parks, fitness centers, and social gatherings tend to have better physical abilities.

The fourth variable is the perception of braying activities. In this study, the perception of braying activities has a positive and significant effect on the welfare of the elderly in Karangasem District, which can be seen from the coefficient which is 0.540 with a significant value of 0.009. These results are also strengthened by the results of an in-depth interview with an elderly person named I Gusti Made Kaler, 70 years old, an elderly person whose address is Subagan Village on February 9 2024, who said that:

"As long as I live here, I am very happy and even regularly participate in events held in my neighborhood, gathering and chatting makes me happy and safe. Moreover, when I need help, my family and local community will be happy to help me selflessly."

Based on the results of the interview, the perception of braya activities is an important factor in influencing the well-being of the elderly. This is in line with research by Ludji et al (2020) which states that *menyama braya*, as one of the values of local wisdom, which is a common reference as social capital, so that it can sustainably become the main basis/foundation in maintaining harmony, which is supported by research by Ratih Pratiwi (2022) which states that family social support apparently has a positive role in the survival of the elderly, for example, it can reduce the level of depression felt by the elderly. Mastuti's research (2016) in Erfiyanti et al. (2023) stated that there is a significant positive influence between family support and happiness, so that elderly people need closeness to their family in order to achieve happiness.



### **3.6. Discussion**

Interaction Test Analysis was used to help answer the influence of perceptions of equalizing activities in moderating environmental conditions on the welfare of the elderly in Karangasem District. The interaction of environmental condition variables and perceptions of equalizing activities in this study has a negative and significant effect on the welfare of the elderly in Karangasem District, which can be seen from the coefficient which is -0.045 and has a significance of 0.002. Perceptions of equalizing activities act as a moderating variable that weakens the influence of environmental conditions on the welfare of the elderly in Karangasem District. These results are strengthened by an in-depth interview with an elderly person named Ni Nengah Wati, 78 years old, an elderly person whose address is Tegalinggah Village on February 9 2024, who said that:

"Considering that I am 78 years old, I cannot be too active in taking part in community activities, my body condition, which gets tired quickly, makes it difficult for me to carry out activities. Apart from that, because I live alone and the village is quite far from home, I am not able to participate in community events regularly."

Based on the results of the interview, it is clear that the interaction of environmental conditions with the perception of braying activities, namely the perception of braying activities, acts as a pseudo-moderating variable which weakens the influence of environmental conditions on the welfare of the elderly in Karangasem District. This is in line with research by Bahari and Sudibia (2021) analyzing that family support is one of the factors of welfare itself. Support from the family, even from the surrounding environment, is something that is very desirable which can help and encourage elderly people to do the activities they want to do. Tarigan's research (2018) in Astriewardhany and Purnamasari (2021) stated that a person will be happy with the support they receive from family and friends because they feel more confident and more meaningful. Research by Nguyen, Chatters, Taylor, & Mouzon (2015) in Astriewardhany and Purnamasari (2021) shows that closeness to family and friends in old age is associated with high life satisfaction and happiness in an elderly person.

## **4. CONCLUSIONS AND SUGGESTIONS**

Based on the results of the discussion and description that has been presented previously, it can be concluded that income, access to health, environmental conditions, and perceptions of socializing activities simultaneously influence the welfare of the elderly in Karangasem District. Income, access to health, environmental conditions, and perceptions of socializing activities have a positive and significant influence on the welfare of the elderly in Karangasem District. The perception of equalizing activities acts as a false moderation which weakens the influence of environmental conditions on the welfare of the elderly in Karangasem District.

Based on the description above, the following are several suggestions that can be put forward, namely that the government's role is needed in helping the welfare of the elderly, one of which is by having an assistance fund program that is provided to the elderly to help support their living needs, especially the elderly who live alone and cannot afford it. carrying out daily activities, apart from that, remembering that many elderly people are no longer able to work due to age and poor health conditions. The declining health condition of the elderly due to age causes the need for supportive and adequate health services, easy access and availability of health facilities which

make it easier for the elderly to undergo physical and psychological health checks, especially elderly people who live in remote areas with limited access to health facilities so assistance is needed. medical personnel in providing health services to the elderly evenly. The establishment of good environmental conditions will have an impact on improving the quality of life and the ability of the elderly to adapt to aging, support and family harmony will have an influence on the welfare of the elderly, so that the elderly do not feel lonely and left behind.

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