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Health Status and Functional Capacity of Indonesian Elderly at the District Level

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Active Ageing (WHO 2002)

- the process of optimizing opportunities to enhance *health*, *participation*, and *security* in order to enhance quality of life as people age

Outline

- Aims
- Data
- Results:
 - SRHS
 - Functional Capacity (FC)
 - Overall
 - 4 ADLs
 - An IADL
 - Association between SRHS and FC
- Concluding Remarks



Aims

- to fill the gap on the knowledge of ageing and health in Indonesia by examining SRHS, and functional capacity (ADLs and IADLs) of older persons
- To tests the hypothesis that SRHS is associated with functional capacity

Data

- 2005 SUPAS (Intercensal Population Census), nationwide survey covered all provinces except Aceh province and District of Nias
- Selected sample: Population aged 60+
- The first nation-wide survey gathered information on elderly
- Published data (29 Volumes)
- Unit of Analysis: district level
(388 districts)



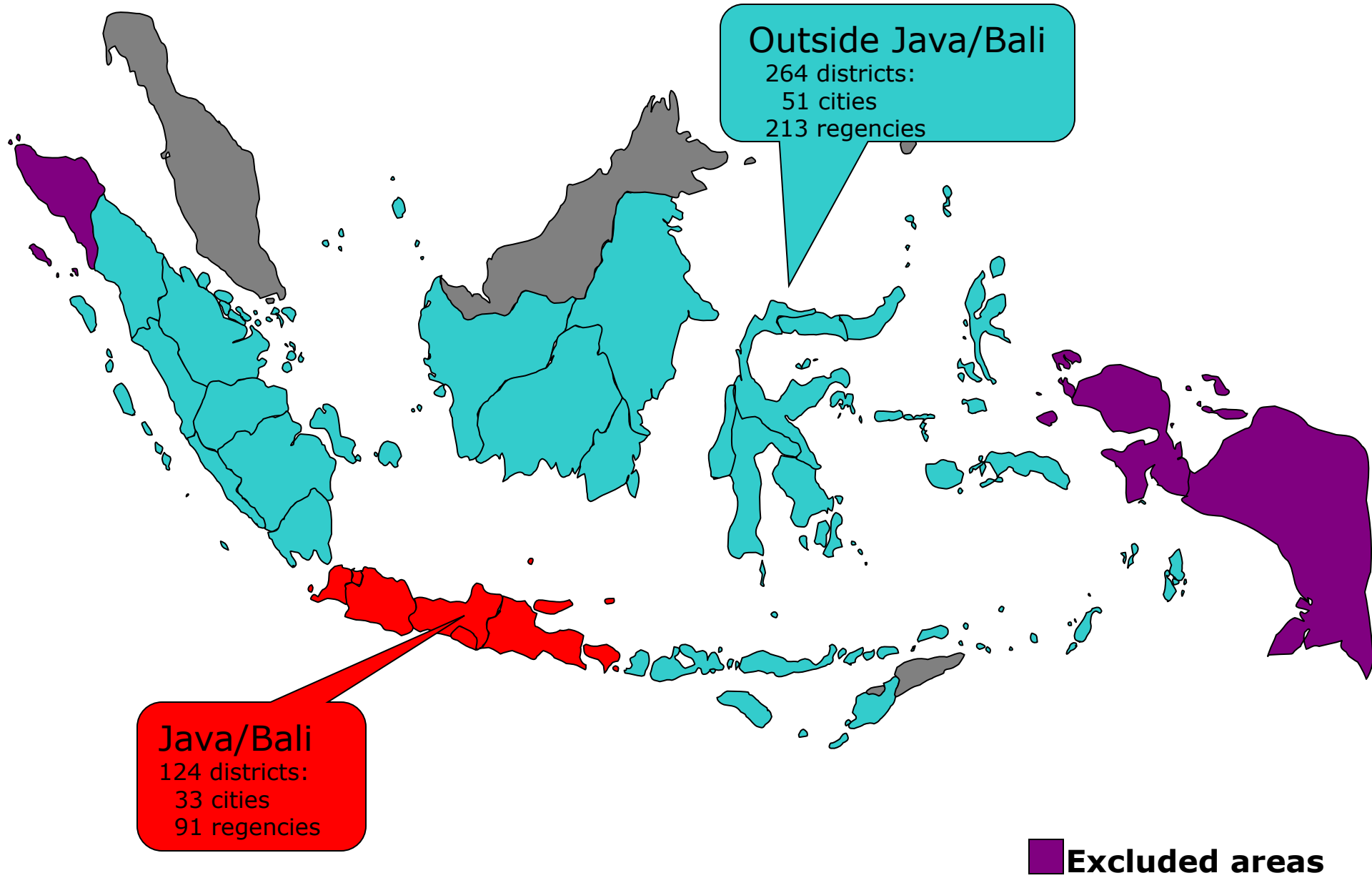
Method

- Descriptive analysis
 - Each of the selected variables presented in relative number to the total elderly population in each district
 - Presented in charts
- Pearson correlation
- Univariate and Multivariate regressions

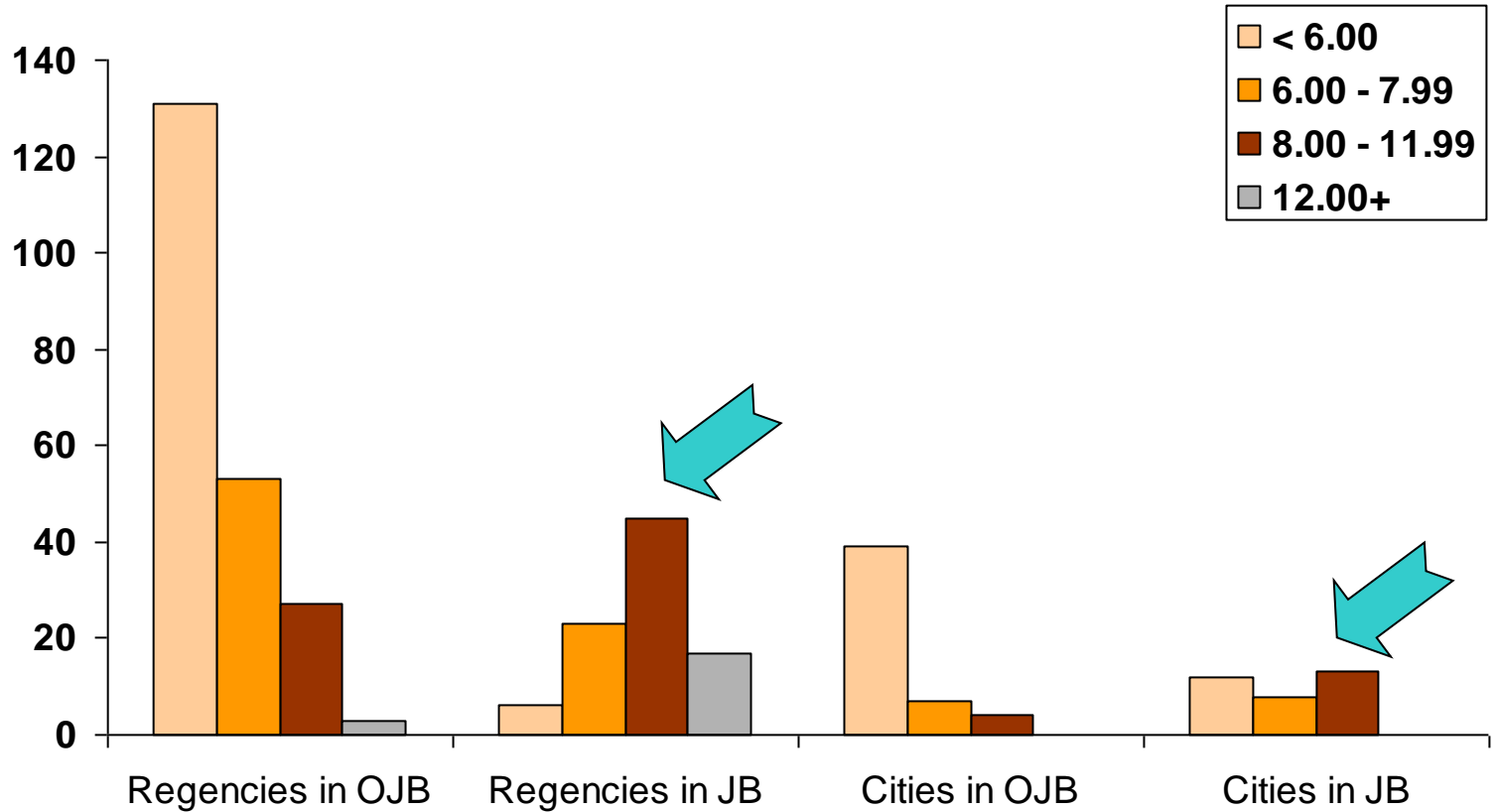
Variables

- Health Variables:
 - SRHS (3 responses: Baik (good/healthy), Cukup (not bad/somewhat healthy), Kurang (bad/somewhat unhealthy))
 - Functional Limitation (Yes/No)
 - 4 ADLs (getting dressed, using toilet, taking a bath, eating)
 - 1 IADL (preparing meals)
- Region: Java/Bali (JB)
and Outside Java/Bali (OJB)
- Type of districts: cities/regencies
- Sex

Covered region



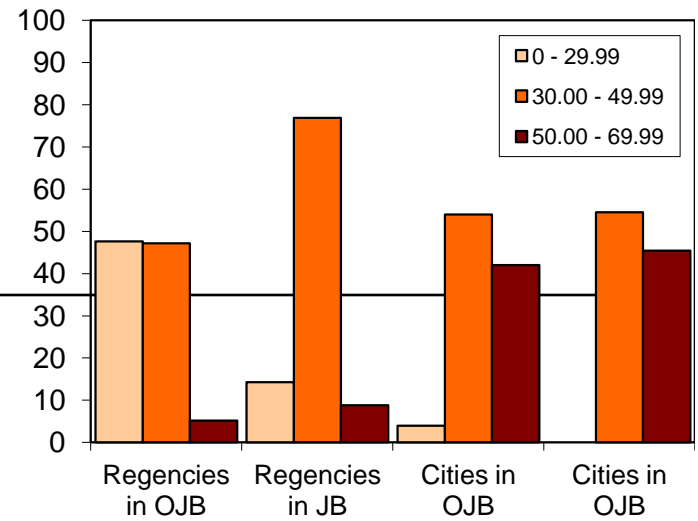
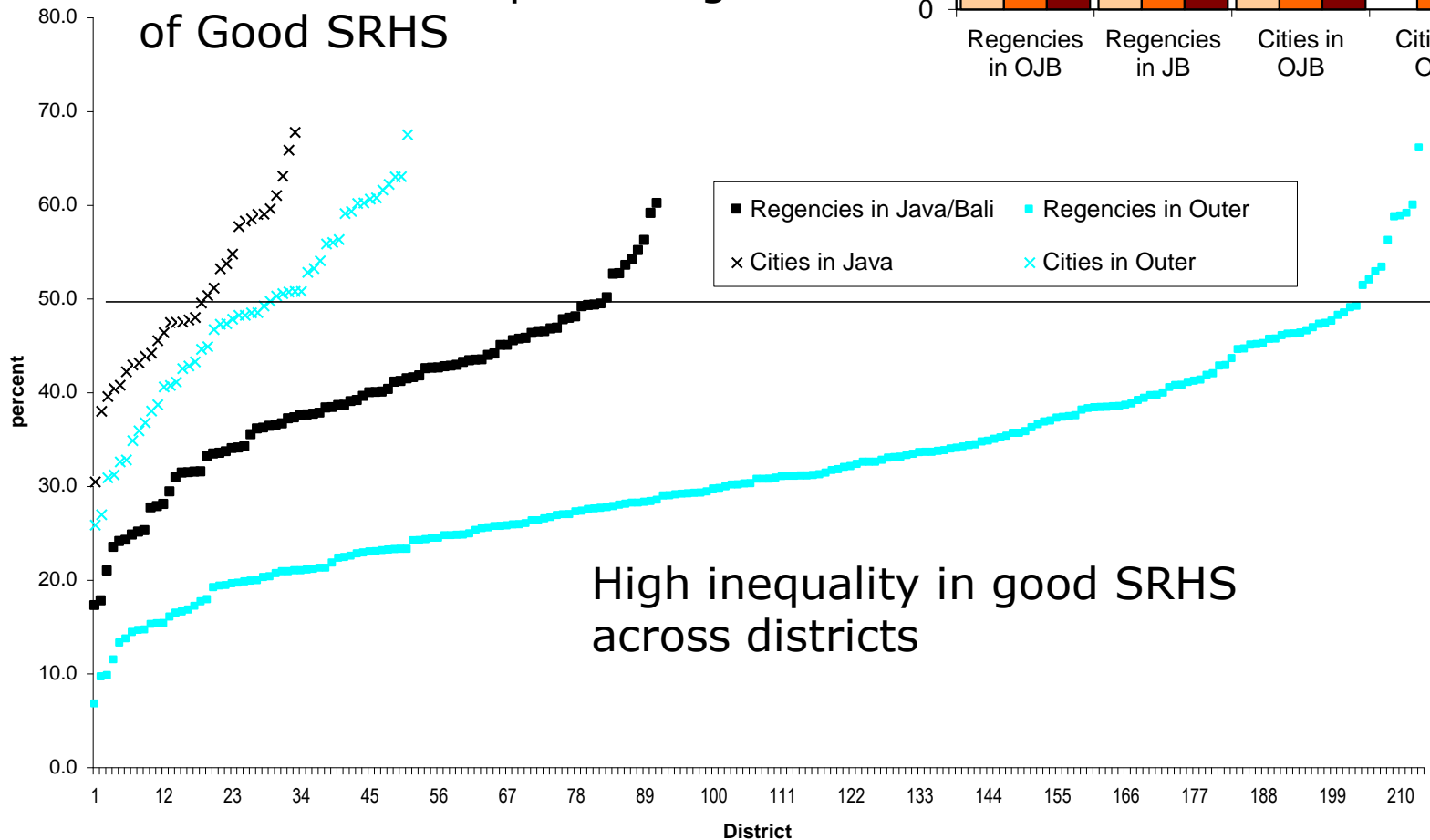
Districts in JB are mostly older populations than those in OJB



Districts in OJB are generally young populations

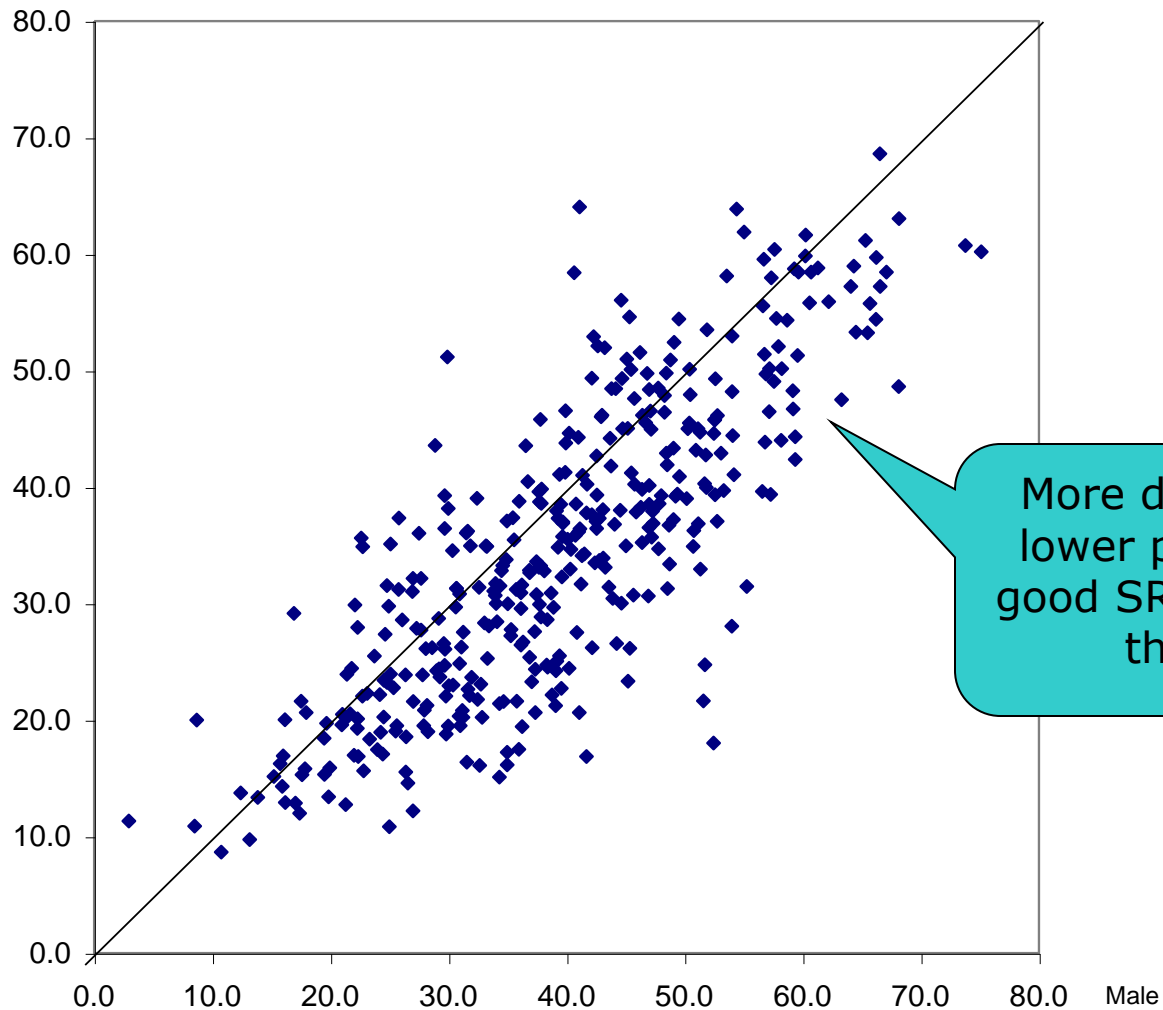
Good SRHS

Region and Type of Districts differentiate the percentage of Good SRHS



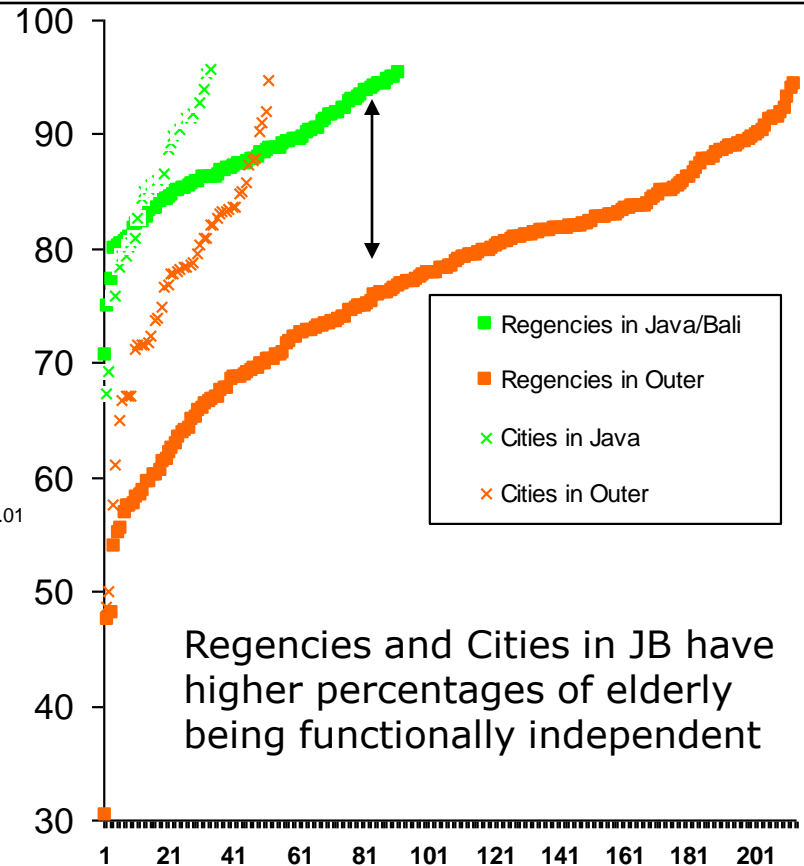
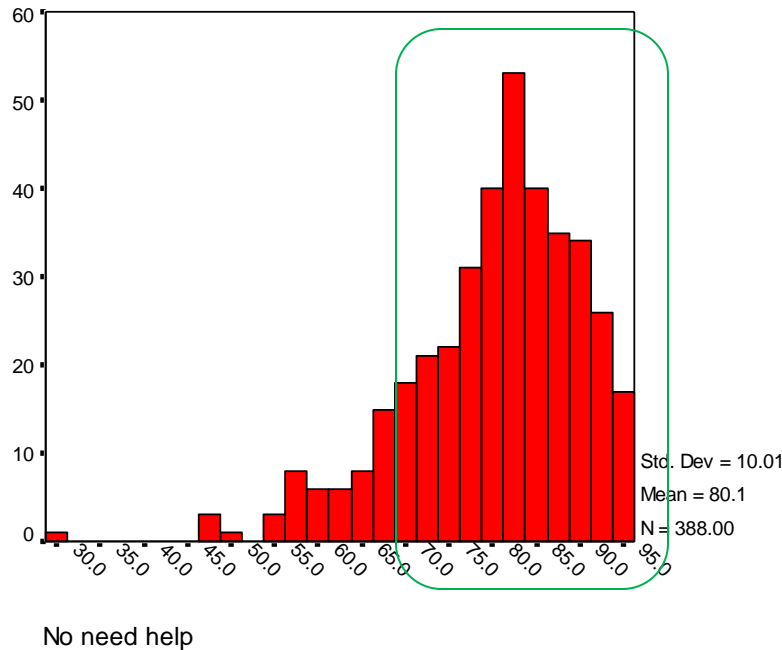
Sex differential in Good SRHS

◆ Female



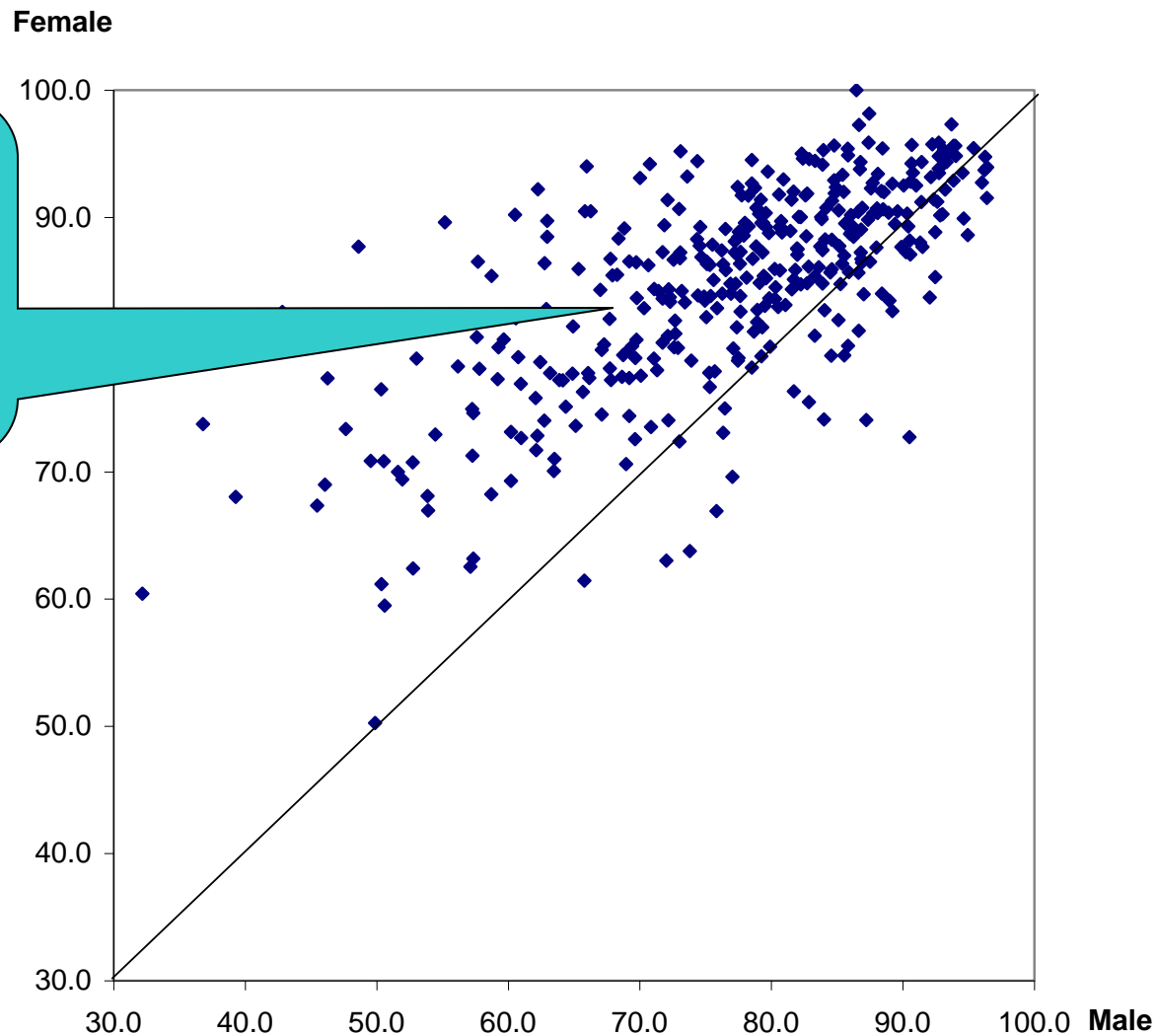
More districts having lower percentages of good SRHS for females than males

Many districts have higher percentages of Elderly being functionally independent

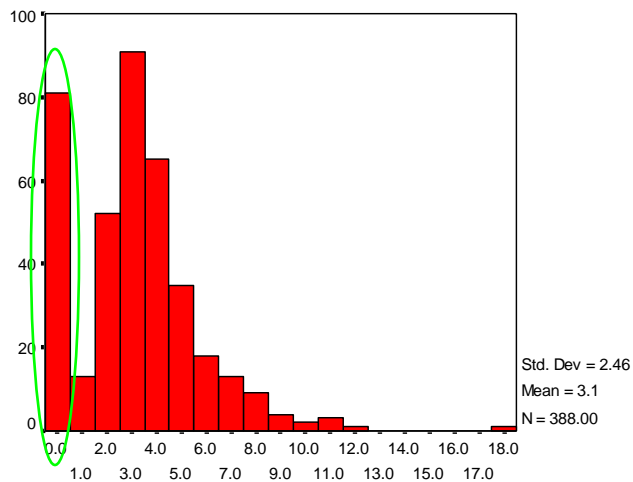


Sex differential in Physical independency

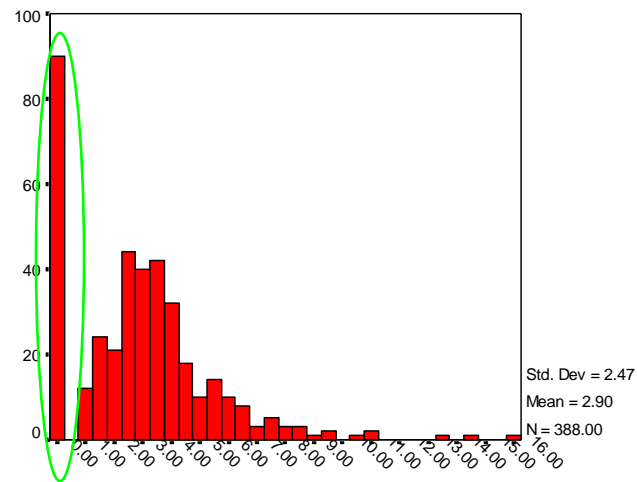
Higher percentage
of female elderly
with physical
independency than
the male



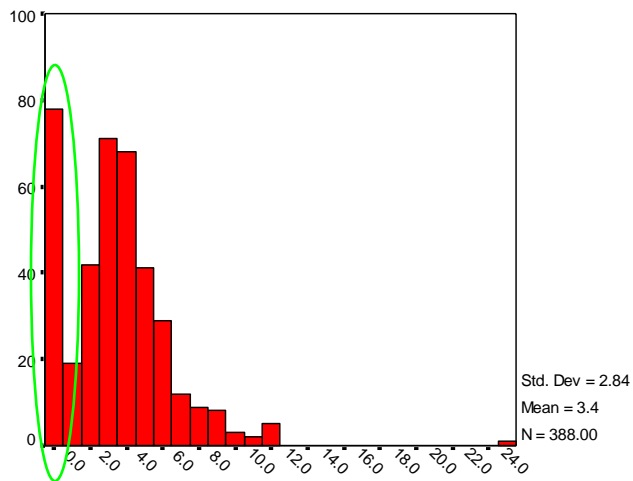
Many districts with no difficulty in each of ADLs



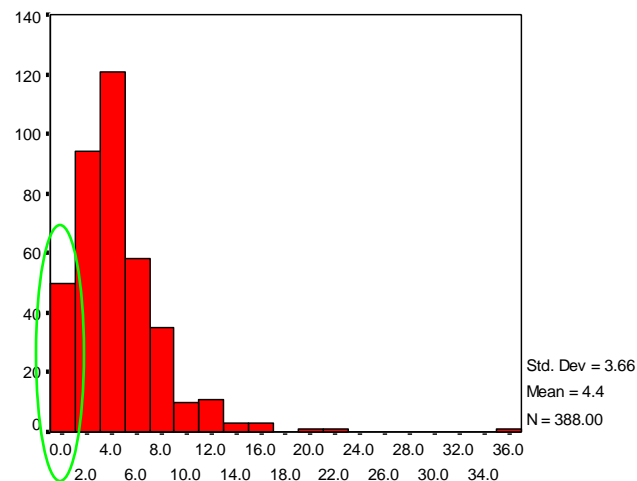
DRESS



TOILET



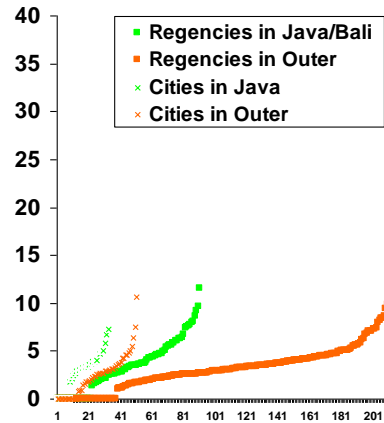
BATH



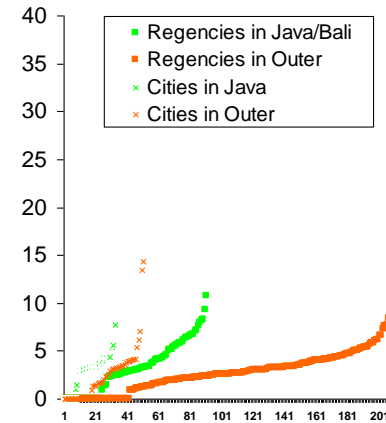
EATING

ADLs by Region and Type of Districts: Indonesia, 2005

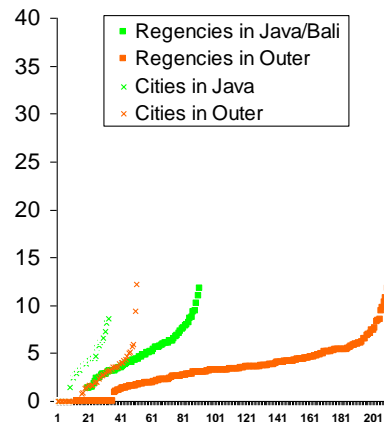
Getting Dressed



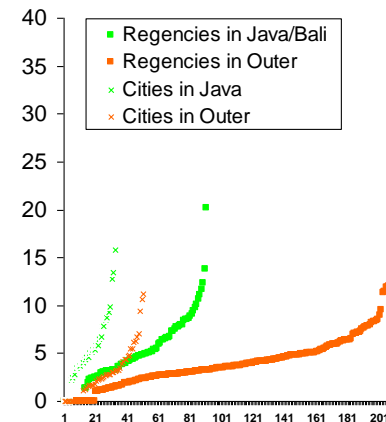
Using Toilet



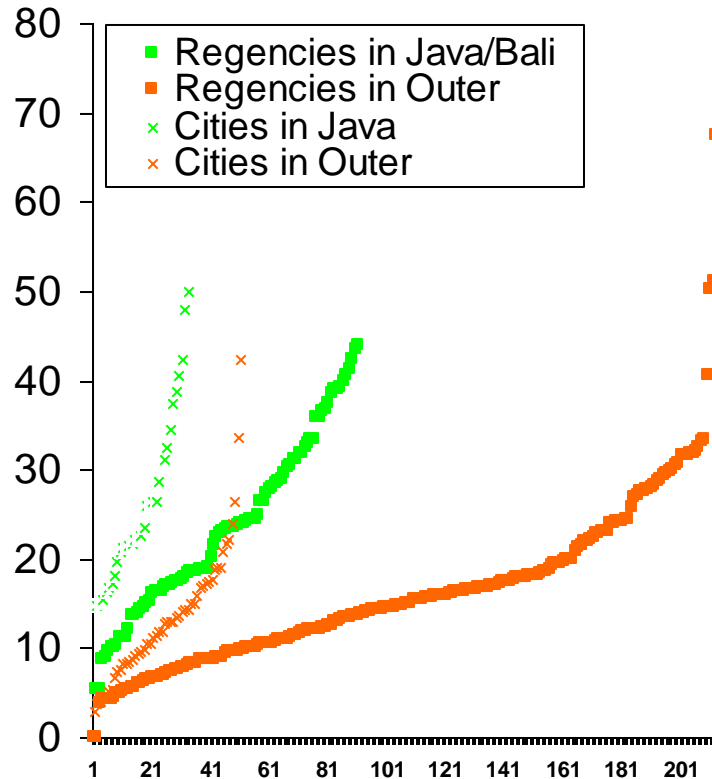
Taking a Bath



Eating



Needing help in Meal Preparation



Cities in JB have the highest percentage of elderly needing help in meal preparation than those in others

Good SRHS and Physical Independence : Regression Analysis

Good SRHS is more likely to increase/improve physical independency

Variables	Model						
	1	2	3	4	5	6	7
Good SRHS	+	+	+	+	+	+	+
Region		+	+			+	+
Type of Districs			-			.	-
Sex					+	+	+
R square	0.083	0.253	0.263	0.036	0.193	0.313	0.232

Note: Reference group (RG) for each dichotomous variables is as follows Outside Java/Bali (OJB), Regency, and Male

Region and sex play important role in physical independence

Good SRHS is statistically significant on affecting difficulty in eating and taking a bath

<i>Eating</i>	Model						
Variables	1	2	3	4	5	6	7
Good SRHS	-	0	-	-	-	0	-
Region		-	-			-	-
Type of Districs			+				+
Sex					0	0	0
R square	0.021	0.079	0.103	0.017	0.018	0.075	0.96

Note: Reference group (RG) for each dichotomous variables is as follows Outside Java/Bali (OJB), Regency, and Male

<i>Taking a Bath</i>	Model						
Variables	1	2	3	4	5	6	7
Good SRHS	-	-	0	-	-	-	-
Region		-	-			-	-
Type of Districs			0				0
Sex					+	+	+
R square	0.025	0.052	0.053	0.025	0.033	0.064	0.064

Districts in Java/Bali have lower percentages of elderly needing help in either eating or taking a bath than those in OJB

Good SRHS is statistically significant on Needing help in Meal Preparation

Variables	Model						
	1	2	3	4	5	6	7
Good SRHS	-	-	-	-	-	-	-
Region		+	+			+	+
Type of Districs			+				+
Sex					-	-	-
R square	0.084	0.119	0.364	0.035	0.106	0.143	0.365

Districts in Java/Bali or cities have higher percentages of elderly needing help in meal preparation than those in OJB



Concluding Remarks

- Health inequality with more districts have high percentage of unhealthy older persons. Yet, most districts have high physical independence.
- Good SRHS and functional capacity varies greatly by district, implying that policy making process at district level should pay attention to their local needs.
- Region, type of districts and sex also play important role in SRHS and physical independence.
- The two variables have strong positive correlation.



THANK YOU

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Or

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