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Overview of Depression Level in Elderly at The Welas Asih Nursing Home Tasikmalaya

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ABSTRACT

Introduction: Elderly is someone who has entered the age of 60 years and above and has entered the final stage of the life phase. This group categorised as elderly will occur a process called the aging process. Depression is one of the most common types of mental health disorders found in the elderly and the elderly have problems that are often faced by the elderly both physically and psychologically and affect about 7% of the world's elderly. Symptoms of depression show signs such as sadness, fatigue, sleep disturbances, decreased appetite and concentration, loss of interest and anhedonia, depression has become a major health problem with a significant global burden of disease. These problems increased especially during and after the covid-19 pandemic as a result of changing living conditions due to the need for isolation and social distancing. **Objective** To find out the description of the level of depression of the elderly at the Welas Asih Nursing Home in Tasikmalaya Regency. Method: This type of research uses descriptive with a quantitative approach with a quantitative descriptive research design. The population in this study were 35 elderly people. The sampling technique in this study was the Total Sampling technique, measuring the level of depression using the Geriatric Depression Scale (GDS) method by interviewing respondents using the GDS and measured using the GDS with 15 questions. Result: shows that the elderly with mild depression level were 14 respondents (46.7) while moderate/severe depression were 5 respondents (16.7). Conclusion: Showing that the elderly with the highest level of depression in the Welas Asih Tasikmalaya nursing home is a mild category of 14 people (4.7%), this age experiences many changes both physical, psychological, economic and spiritual which can affect the quality of life of an elderly person.

Keywords: depression, elderly, welas asih nursing home

Elderly according to Law Number 13 of 1998 is someone who has reached the age of 60 years and over, several factors that affect the quality of life of the elderly include physical health, psychological health and social relationships (M. Akbar, 2019). Elderly is someone who has entered the age of 60 years and above and has entered the final stage of his life phase. This group categorised as elderly will occur a process called the aging process (Virdianti, 2020).

In 2019, the elderly population in Indonesia increased by 10.3% and by 2045 it is expected to reach 57.0 million or 17.9 million elderly (BPS, 2018). Indonesia is the country with the 8th largest elderly population in the world. The results of the 2020 population census recorded that the number of elderly people in Indonesia reached 26.82 million people or around 9.92% of the total population. Furthermore, in 2021 the population increased to 29.3 million, which is equivalent to 10.82% of the total population of Indonesia (Yeni, 2021).

In Indonesia, there are 34 provinces and one of them is the province of West Java, which is one of the provinces in Indonesia with an elderly population in 2017 of 4.16 million elderly people. In 2021 the number of elderly people in West Java is estimated to be 5.07 million elderly people. As much as 10.04% of the total population of West Java, this condition shows that West Java has entered an ageing population (Elisabeth Purba et al., 2023).

The problems faced by the elderly are both physical and psychological. The elderly are at risk of hypertension, heart disease, visual impairment, hearing, cancer, osteoarthritis, diabetes and other degenerative diseases. The five most common chronic diseases among the elderly population are cardiovascular disease, dyslipidemia, diabetes, genitourinary disease and arthritis (Rosadi, 2022).

Common psychological issues that affect an older person may include, but are not limited to anxiety, depression, delirium, dementia, personality disorders and substance abuse. The elderly are also a vulnerable group with respect to developmental stages and anxiety conditions. One of the psychological problems often experienced by the elderly is depression (Santika, 2022).

Depression is one of the most common types of mental health disorders in old age, affecting around 7% of the world's elderly. In research (Feng et al., 2021) explained that depression has become a major health problem with a significant global burden of disease, it accounts for 12.1% of the total years lived with disability and 4.5% of the total years lived adjusted for inability to perform daily activities globally (Asmiati Arif, et all 2020).

The effects of depression on the elderly in wrendha homes show that the elderly are not comfortable living in wrendha homes because they cannot interact freely with the outside environment, making the elderly feel depressed. Maldative responses can be overcome by increasing self-belief in the form of self-efficacy responses such as depression for a long time can cause depressonalisation (Agil & Hartati, 2022).

Depression in the elderly is a serious mental health problem. Depression can cause individuals to experience interference to carry out daily activities (Vieira et al., 2014). In severe cases, depression can lead to suicide (Bhar & Brown, 2012). About 80% of depressed elderly who undergo treatment can recover completely and can enjoy their lives, but 90% of those who are depressed ignore and refuse treatment for mental disorders (Luthfa et al., 2022).

Welas Asih Singaparna Nursing Home Tasikmalaya Regency conducts nursing care practices, either to prevent the occurrence of disorders or to care for sick hypertensive patients, Welas Asih Singaparna Nursing Home Tasikmalaya Regency also determines when disturbed family members need to seek professional help (Sugiharti et al., 2021).

Symptoms of depression show signs such as sadness, fatigue, sleep disturbances, decreased appetite and concentration, loss of interest and anhedonia. These problems can increase especially during the covid-19 pandemic as a result of changing living conditions due to the need for isolation and social distancing. The negative effects of quarantine in the form of decreased mental health were also observed during previous pandemics, although it was necessary to reduce the spread of the disease (M. A. Akbar & Budianto, 2022).

The causes of depression in the elderly in addition to age factors can be caused by physical disabilities due to physical illness, dementia, difficulty sleeping, poor economic status, loss of loved ones stressful life, and lack of psychosocial support (Ilannoor, 2020). Depression in the elderly can be caused by many things, for example, their economy is not guaranteed by the family so they still have to work while their bodies are no longer able to work, their fear of being alienated by their families, the fear of not being cared for by their children, the age of the elderly over 65 years of age is at risk of developing depression, this disease can be experienced by everyone regardless of gender, social status, race, and culture. The prevalence of depression in the elderly is 46.1%, with 23% in men and 76.3% in women (Ningsih, 2020).

Objective

Knowing the Depression Level at Welas Asih Nursing Home Tasikmalaya Regency 2023.

Method

This type of research uses descriptive with a quantitative approach with a research design. Quantitative descriptive is a technique used for testing, measuring, and hypotheses based on mathematical and statistical calculations. The study describes the level of depression in the elderly at the welas asih tasikmalaya nursing home.

Result

a. Univariate Analysis

Frequency distribution of Depression Level in the Elderly.

Table 1. Frequency Distribution of Depression Level in the Elderly at Welas Asih Nursing

Home Tasikmalaya		
Depression Level	Frequency	Percentage
Normal	11	36.7
Mild Depression	14	46.7
Moderate/Severe Depression	5	16.7
Total	30	100

Based on table 1, it shows that elderly people with mild depression levels are 14 respondents (46.7) while moderate/severe depression is 5 respondents (16.7).

Discussion

Based on the results of the study, it shows that respondents with depression categories at Welas Asih Tasikmalaya Nursing Home out of 30 respondents with normal categories as many as 11 people (36.7%), mild depression category 14 (46.7%) and moderate/severe depression there are 5 people (16.7%).

Based on research by Anissa et al., (2019), based on research conducted on 30 elderly 8 men and 22 women, the results obtained were that the most depression experienced by respondents was mild depression (23.3%). Elderly with severe depression (10%). Researchers have the assumption that this is due to several factors that cause depression, including age, gender, the elderly feel discarded by their families, loneliness, lack of socialisation and fear of death, and when researchers conducted interviews, it was found that not a few elderly people complained that they wanted to meet with their families, because they had not met their families for a long time, it was also found that many elderly people said that starting since the co-19 pandemic they had started.

According to research by Nafsiah Sisi & Ramdhany Ismahmudi, (2020), said that depression in the elderly is more common in women, this is because women more often carry out health checks so that depression is more often detected.

In addition, there is also the possibility that women tend to be exposed to stressful environments compared to men. One of the causes of depression is due to hormonal imbalances experienced by women, which adds to the high incidence of female depression (Nafsiah Sisi & Ramdhany Ismahmudi, 2020).

Researchers have the assumption that women experience depression more quickly because of hormones in women who are irritable and unstable, making women more quickly affected by depression than men and women in dealing with and solving problems use their feelings more than their thoughts, this is what causes if women are affected by depression it will be very slow in the healing process.

Based on table 4.1 above shows that of the 30 respondents based on age, in the age range 45-59 years as many as 4 people (16.7%), elderly in the age range 60-74 years as many as 21 people (70.0%), and elderly in the range 75-94 years as many as 6 people (13.3%).

The conditions at the nursing home show data such as the results of research that support including age> 70 years, female gender rarely socialise, most of the elderly have chronic diseases, this can be a factor that causes depression in the elderly at the welas asih tasikmalaya nursing home so that the number of elderly who experience depression both moderate and severe depression is higher than those who are not depressed.

feeling the lack of family presence due to the pandemic. So that makes not a few of the elderly feel homesick for their families. And that is what makes many elderly people, confine themselves and do not want to mingle with other elderly people.

This research is in line with Maryam et al., (2022) factors that cause depression, including: a) Lack of association or social life. b) Experiencing certain events. c) Body defects (amputation, cancer, surgery or heart disease). d) Family history of depression. e) Fear of death.

Moderate/severe depression is a simplified form of scale to measure the level of depression using the GDS method with 15 questions which results in 10-15 correct answers. Having a level of depression at the Welas Asih Tasikmalaya Nursing Home with the most depression category is mild depression with a total of 14 people (46.7%). This is reinforced by research conducted directly to the elderly at the Welas Asih Tasikmalaya Nursing Home by conducting interviews with respondents using the GDS questionnaire sheet.

Research by Widiani et al., (2022), shows that most elderly people experience mild loneliness. This occurs because of social restrictions so that they are not free to carry out activities. This study also found that the elderly who experienced loneliness was one of the causes because the elderly lived alone and could no longer do activities like when they were healthy due to their physical illness. The elderly only stay at home or even all activities are in

bed. This condition can trigger an increase in loneliness in the elderly. Loneliness is a risk factor for depression.

In the study of Perdhana et al. (2022), it was found that depression acts as a predictor of death within 1 year in haemodialysis patients (p=0.007; Hazard ratio: 3.587). This means that haemodialysis patients who experience depression have a 3.587 times higher risk of death than haemodialysis patients who do not experience depression. Several studies have shown that depression is associated with short-term and long-term mortality in haemodialysis patients. Fan et al's study showed that haemodialysis patients who experience depression had a 1.44 times higher risk of death.

There are several ways to measure the level of depression, but this study uses the Geriatric Depression Scale (GDS) method. That is by interviewing respondents using the GDS and measuring using the GDS with 15 questions and getting results 0-4 (Normal), 5-9 (Mild Depression), and 10-15 (Moderate / Severe Depression).

The Geriatric Depression Scale (GDS) is a questionnaire consisting of 3 questions that need to be answered. The GDS can be utilised to answer 15 questions. It is a simple "yes" or "no" and is a simplified form of the scale that uses five sets of categorical responses. The last number between 10 and 11 is usually used as a baseline to divide patients into depressed or non-depressed groups (Leni Arini Manafe, 2022).

Research conducted (Lyness et al., 2009) states that the elderly over the age of 65 years have a high risk of suffering from depression compared to the elderly under the age of 65 years. New York Country By proving that the elderly with the age of 65 years and over have a higher risk of suffering from depression compared to the elderly who are still under the age of 65 years.

Researchers have an assumption that elderly people aged between 60-74 years are more susceptible to depression due to the aging process that occurs. Age is one of the risk factors for depression. The higher the age, the higher the risk of depression. This is because at that age there are many changes both physically, psychologically, economically and spiritually that can affect the quality of life of an elderly person.

Conclusion

Based on the results of research that has been carried out and the discussion that has been described previously regarding "then a conclusion is obtained as follows":

It shows that the elderly with the highest level of depression in the Welas Asih Tasikmalaya nursing home is a mild category, namely 14 people (46.7%).

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