



**Aradhana Shukla** is Professor and Head of Psychology at Kumaun University, SSJ Campus, Almora and Dean (Arts) Kumaun University, Nainital. She is serving in this university for the last 35 years. She has guided 52 Ph.D students completed 4 major research projects from UGC and ICSSR. She has written and edited 15 books and developed 15 psychological tests. More than 150 papers written by her have been published in the journal and books of national and International repute. She has co-edited a four volume series on Mental Health: Psycho-Social Perspectives. Her major areas of interest are cross-cultural psychology, health psychology and psychological intervention



**Anubhuti Dubey** is Professor of Psychology and has been teaching for the past 20 years at Department of Psychology, DDU Gorakhpur University, Gorakhpur (U.P.). Apart from publishing more than 40 articles in journals of national and international repute and 30 chapters in different edited volumes, she has written book entitled 'Psychological Perspectives on Chronic Illness' (2012) and also co-edited a four volume series on Mental Health: Psycho-Social Perspectives. Her research interest includes Health Psychology, Applied Social Psychology, Gender issues and Counselling. She has guided 11 Ph.D. scholars.



**Narendra Singh Thagunna** was awarded his Ph.D. in Cross Cultural Psychology from Kumaun University, India. He has been teaching Psychology for the last 5 years at Department of Psychology, Tri Chandra Campus, T.U, Nepal. Before this, he served as a Principal in Khatyadi HSS (+2 level), Doti, Nepal for 5 years. He was involved in emergency Mental health Psychosocial Support in refugee setting for four years. He also designed and facilitated more than fifteen modular trainings which are useful for emergency setting and community mental health.

### Other Books of Interest

ARADHANA SHUKLA and ANUBHUTI DUBEY  
**Mental Health Psycho-Social Perspectives** (In 4 Volumes)  
 Volume 1: Issues and Interventions  
 Volume 2: Multi Group Analysis  
 Volume 3: Strength of Human Resources  
 Volume 4: Therapeutic Applications

ARADHANA SHUKLA  
**Psyche of Indian Women**

JANAK PANDEY  
**Perspectives on Experimental Social Psychology in India**

GIRISHWAR MISRA and AJIT K. MOHANTY  
**Perspectives on Indigenous Psychology**

M. RAJAMANICKAM  
**Modern Psychophysical and Scaling Methods and Experimentation**

M. RAJAMANICKAM  
**Modern General Psychology: Thoroughly Revised and Expanded**

M. RAJAMANICKAM  
**Contemporary Fields of Psychology and Experiments**



#### CONCEPT PUBLISHING COMPANY (P) LTD.

A/15&16, Commercial Block, Mohan Garden, New Delhi-110 059

Ph. : 25351460, 25351794

Email: publishing@conceptpub.com Website : www.conceptpub.com

Showroom: Building No. 4788-90, Street No. 23, Ansari Road,  
 Darya Ganj, New Delhi-110 002 Ph. 23272187



Psyche of Asian Society

Edited by  
 Aradhana Shukla, Anubhuti Dubey  
 Narendra Singh Thagunna

# Psyche of Asian Society

Edited by  
**Aradhana Shukla**  
**Anubhuti Dubey**  
**Narendra Singh Thagunna**



Every culture has its own values and, of course, they are different in every walk of life with more or less magnitude. We can see a lot of variation in two cultures in regard to their way of thought, way of behaviour parameters and so many other things. Asia is a big continent and it covers forty eight countries in its roof. These countries are somehow similar in traditions and behaviour performance and vice versa in some other respects of life. But it is quite sure that there is a common thread that links them in one single garland.

The aim of this volume is to collect the gems from entire Asia and bring them on one platform. There are twenty four articles in this volume. They reveal various aspects of the particular country where the work is done. Chapters are in theoretical and /or in empirical mode and we hope that they will provide good insight to the readers to move on their interest and research.

# Psyche of Asian Society

---

### About the Editors

**Aradhana Shukla** is Professor and Head of Psychology at Kumaun University, SSJ Campus, Almora and Dean (Arts) Kumaun University, Nainital. She is serving in this university for the last 35 years and before joining this university she was UGC fellow at DDU Gorakhpur University, Gorakhpur and Assistant Research Officer at Department of paediatrics, IMS, BHU. She has guided 52 Ph.D students completed 4 major research projects from UGC and ICSSR. She has written and edited 15 books and developed 15 psychological tests. More than 150 papers written by her have been published in the journal and books of national and International repute. She has co-edited a four volume series on Mental Health: Psycho-Social Perspectives, Volume one 'Issues and Intervention' (2015), Volume two 'Multigroup Analysis' (2015), Volume three 'Strength of Human Resources' (2017) and Volume four 'Therapeutic Applications' (2017). Her major areas of interest are cross-cultural psychology, health psychology and psychological intervention

**Anubhuti Dubey** is Professor of Psychology and has been teaching for the past 20 years at Department of Psychology, DDU Gorakhpur University, Gorakhpur (U.P.). Apart from publishing more than 40 articles in journals of national and international repute and 30 chapters in different edited volumes, she has written book entitled 'Psychological Perspectives on Chronic Illness' (2012) and also co-edited a four volume series on Mental Health: Psycho-Social Perspectives, Volume one 'Issues and Intervention' (2015), Volume two 'Multigroup Analysis' (2015), Volume three 'Strength of Human Resources' (2017) and Volume four 'Therapeutic Applications' (2017). Her research interest includes Health Psychology, Applied Social Psychology, Gender issues and Counselling. She has also carried out ICSSR research project on 'Psychological Dynamics of Health and Illness in Women of Eastern Uttar Pradesh'. She has guided 11 Ph.D. scholars so far. She is also a Master Trainer and Supportive Supervisor for Training HIV/AIDS counsellors under GFATM-Round 7 programme.

**Narendra Singh Thagunna** was awarded his Ph.D. in Cross Cultural Psychology from Kumaun University, India. He has been teaching Psychology for the last 5 years at Department of Psychology, Tri Chandra Campus, T.U, Nepal. Before this, he served as a Principal in Khatyadi HSS (+2 level), Doti, Nepal for 5 years. He was involved in emergency Mental health Psychosocial Support in refugee setting for four years as psychosocial trainer. He also designed and facilitated more than fifteen modular trainings which are useful for emergency setting and community mental health.

PSYCHE  
OF  
ASIAN SOCIETY

*Edited by*  
Aradhana Shukla  
Anubhuti Dubey  
Narendra Singh Thagunna

CONCEPT PUBLISHING COMPANY PVT. LTD.  
NEW DELHI-110059

© Editors

All rights reserved. No part of this work may be reproduced, stored, adapted, or transmitted in any form or by any means, electronic, mechanical, photocopying, micro-filming recording or otherwise, or translated in any language, without the prior written permission of the copyright owner and the publisher. The book is sold subject to the condition that it shall not, by way of trade or otherwise, be lent, resold, hired out, or otherwise circulated without the prior publisher's written consent in any form of binding or cover other than that in which it is published.

The views and opinions expressed in this book are Editors (s) own and the facts reported by him/her have been verified to the extent possible, and the publishers are not in any way liable for the same.

**ISBN-13: 978-93-86682-82-6**

First Published 2019

*Published and Printed by:*



Since 1974

**Concept Publishing Company Pvt. Ltd.**

A/15-16, Commercial Block, Mohan Garden,

New Delhi-110059 (INDIA)

T : +91 11 25351460, +91 11 25351794

E : publishing@conceptpub.com, W : www.conceptpub.com

**Cataloging in Publication Data**--Courtesy: D.K. Agencies (P) Ltd. <docinfo@dkagencies.com>

**Psyche of Asian society** / edited by Aradhana Shukla, Anubhuti Dubey, Narendra Singh Thagunna.

pages cm

Contributed articles.

Includes bibliographical references and index.

ISBN 9789386682826

1. Asians—Psychology. 2. Ethnopsychology—Asia. 3. Mentally ill—Asia Psychology. I. Shukla, Aradhana, editor. II. Dubey, Anubhuti, editor. III. Thagunna, Narendra Singh, editor.

LCC GN270.P79 2019 | DDC 155.8095 23

## Acknowledgements

---

In our regular course of life we believe in our observations and dealing with different society we see that every culture has its own values and, of course, they are different in every walk of life with more or less magnitude. We can see a lot of variation in two cultures in regard to their way of thought, way of behaviour parameters and so many other things.

Keeping these views in consideration, this piece of work is planned and it deals with culture and psyche of Asian society. We have taken ample support and co-operation from many people. We are thankful to them and want to place our gratitude on records.

We are also grateful to the contributors who supported us by giving their articles and waited patiently to get it in shape. We are thankful to Mr. Abhishek for doing the tedious job of the systemization of the articles.

We place our thanks and regards on record to Mr. Ashok K. Mittal, Concept Publishing Company Pvt. Ltd., New Delhi to shape this book.

Sharad Poornima  
24-Oct-2018

**Aradhana Shukla**  
**Anubhuti Dubey**  
**Narendra Singh Thagunna**



# Contents

---

|                             |    |
|-----------------------------|----|
| <i>Acknowledgements</i>     | v  |
| <i>List of Contributors</i> | xi |

## **Section I**

### **Introducton of Asian Psychology**

1. Asian Psychology: Contribution can never be Counted 3  
*Aradhana Shukla, Anubhuti Dubey and Narendra Singh Thagunna*
2. Asian Psychology: What Does It Tell Us About Human Cognition? 8  
*R.C. Mishra*

## **Section II**

### **Grassroots of Religions and Religious Practices in Asia**

3. Sufism and Sufi Practices 31  
*Akbar Hussain*
4. Ayodhya: Ramajanmabhumi v/s Babri Masjid Dispute Towards Peaceful Solution 46  
*Ram Kalap Tiwari*

## **Section III**

### **Hindu Culture and Acculturation**

5. Triyoga and Triguna in Bhagavad Gita: An Empirical Validation 59  
*Anubhuti Dubey and Laxmi Vajpeyi*

6. Role of Astropsychology in Personality Making: An Empirical Validation 78  
*Bhagyashree Joshi and Aradhana Shukla*
7. Acculturative Strategies of Nepali Immigrants Living in India 102  
*Anubhuti Dubey and Radha Maddhesia*
8. Culture, Family and Cognitive Behaviour 116  
*Aradhana Shukla*
9. Asian Female Foreign Domestic Workers as Migrants in Hong Kong 134  
*Diane C. Zelman, Cecile Valantin and Michele Bland*
10. Social Identity and Acculturation Attitudes among Different Tribal Groups of Jharkhand, India 154  
*Dhananjay Kumar*

#### **Section IV**

#### **Psychological Facilitators of Mental Health in Asia**

11. Sources of Happiness: A Qualitative Analysis 169  
*Anubhuti Dubey and Garima Singh*
12. What Does Happiness Mean: An Indigenous Psychological Analysis on College Students' Sources of Happiness in Semarang, Central Java, Indonesia 181  
*Anggun Resdasari Prasetyo, Erin Ratna Kustanti and Dinie Ratri Desiningrum*
13. Influence of Self-compassion on Procrastination 191  
*Priyanka Pathak and Shobhna Joshi*
14. Letting Go Method as Self-Help Alternative Solution to Increase Resilience Ability on People with Lupus 213  
*Anggun Resdasari Prasetyo, Erin Ratna Kustanti, and Dinie Ratri Desiningrum*
15. Empowerment on Resilience and Coping Skills of Frontline Workers of Earthquake Affected Area of Nepal 228  
*Narendra Singh Thagunna*
16. Inner Self Integration: Theory and Therapy 240  
*Kamal Khurana and Aradhana Shukla*
17. Review on "The Dialectical Behavioural Therapy (DBT) with Mindfulness Technique for the Prevention of the Suicide and its Applicability in Nepali Context" 266  
*Yubaraj Adhikari*

**Section V**  
**Psychological Hazards of Mental Health in Asia**

18. Psychological Health of Informal Caregivers of Cancer Patients: The Population at Risk 291  
*Purnima Awasthi and Kuhu*
19. Evaluation of the Friends Intervention for Childhood Anxiety in Hong Kong 310  
*Parul Batra Sabey, Diane C. Zelman and Christopher D. Tori*
20. The Structural Equation Modeling Approach: Future Time Perspective, Un-integrated Personality and Depression of Elderly People in Nursing Home 329  
*Dinie Ratri Desiningrum, N. Fauziah, Erin Ratna Kustanti, and Anggun Resdasari Prasetyo*

**Section VI**  
**Parenting Behaviour**

21. Parenting Style of the Working and Non-working Mothers: Implications for Cognitive-Emotional Functioning in Offspring 349  
*Prativa Sanchary, Naima Nigar and A.K.M. Rezea Karem*
22. Exclusive Breastfeeding and Motor Development of Children Under Five: Comparative Studies in Toddlers in the Region of Central Java, Indonesia 367  
*Dinie Ratri Desiningrum, Narendra Singh Thagunna and Anggun Resdasari Prasetyo*

**Section VII**  
**Work Life Balance**

23. Some Representations from Work Life: A Narrative based Study of Indian Immigrants in Paris 383  
*Jyoti Verma*
24. Justice towards Women' Empowerment: Some Reality based Issues 408  
*Purnima Awasthi*



## List of Contributors

---

- A.K.M. Rezea Karem** is Professor, Department of Psychology, University of Dhaka, Bangladesh. He did his post doctoral in Neuroscience and neuro rehabilitation from Envision Research Institute USA; The Smith-Kettlewell Eye Research Institute USA; University of San Francisco, USA. **Email:** *rezaul76@yahoo.com*
- A.R. Prasetyo** is Faculty of Psychology, Diponegoro University, Tembalang, Semarang, Indonesia.
- Resdasari, A.R.** is Faculty of Psychology, Diponegoro University, Tembalang, Semarang, Indonesia.
- Akbar Hussain** is Professor and Coordinator, UGC, SAP (DRS-I) at the Department of Psychology, Faculty of Social Sciences, Aligarh Muslim University, Aligarh (U.P.), India. He was awarded the D.Litt. degree in Psychology in 2015 for his work on Explorations and Applications of Spirituality in Psychology. His current areas of research includes Islamic Psychology, Clinical Psychology, Health Psychology, Counselling Psychology, and Positive Psychology. **Email:** *profakbar6@gmail.com*
- Anubhuti Dubey** is Professor of Psychology and has been teaching for the past 20 years at Department of Psychology, DDU Gorakhpur University, Gorakhpur (U.P.), India. Her research interest includes Health Psychology, Applied Social Psychology, Gender issues and Counselling. She has also carried out ICSSR research project on 'Psychological Dynamics of Health and Illness in Women of Eastern Uttar Pradesh'.  
**Email:** *anubhutiddu@rediff.com*
- Aradhana Shukla** is Professor of Psychology and Dean Faculty of Arts, Almora Campus, SSJ Kumaun University, Almora (Uttarakhand). She received award of distinguished Psychologists by Harprasad Institute of Behavioural Science, Agra. Recently, she has again awarded as Prof. L B Tripathi Memorial Award for best Social Psychologist in India by Harprasad Institute of Behavioural Science, Agra. Her research interest

includes Developmental Psychology, Personality, Cultural Psychology and Mental Health Care. **Email:** *aradhana.shukla5@gmail.com*

**Bhagyashree Joshi** is research scholar in the Department of Psychology, Kumaun University, SSJ Campus, Almora and currently serving as counsellor at Army School Kashipur, Uttarakhand. Her major area of interest includes culture and cognition. **Email:** *joshisweety09@gmail.com*

**Christopher D. Tori** is Professor in the Psychology Department at Alliant International University, San Francisco, CA, USA. His research interest is in Psychotherapy process and outcome; Buddhist perspectives on cognitive psychology; psychometrics and statistics; international and multicultural research; psycho diagnostic assessment; institutional studies; psycholinguistics.

**Dhananjay Kumar** is Professor of Psychology and has been teaching for the past 20 years at Department of Psychology, DDU Gorakhpur University, Gorakhpur (U.P.), India. His research interest includes social cognition and intergroup relation, health and counselling psychology. **Email:** *dk\_ddugu@yahoo.co.in*

**Diane C. Zelman** is Professor, Hong Kong Clinical Psychology Program at California School of Professional Psychology (CSPP), Alliant International University, Hong Kong. Her research interest is in Clinical health psychology, Addiction psychology, and behavioural medicine. **Email:** *dzelman@alliant.edu*

**Dinie Ratri Desiningrum** is Faculty of Psychology, Diponegoro University, Tembalang, Semarang, Indonesia. Her research interest includes gerontology children with special need positive psychology. **Email:** *dn.psiundip@gmail.com*

**E.R. Kustanti** is Faculty of Psychology, Diponegoro University, Tembalang, Semarang, Indonesia.

**Garima Singh** is Research Scholar at Department of Psychology, DDU Gorakhpur University, Gorakhpur (U.P.), India and submitted her Ph.D. thesis entitled 'Mental health and well being of caregivers of chronically ill patients: Role of Psychological Resources'. **Email:** *garimakeepintouch@rediffmail.com*

**Kamal Khurana** is social psychologist and his basic aim is to prevail positivity and harmony in society. He is an International mentor. **Email:** *kamalkhurana76@gmail.com*

**Kuhu** is Research Scholar at Department of Psychology, Banaras Hindu University, Varanasi (U.P.), India **Email:** *kuhoo.sb@gmail.com*

**Laxmi Vajpeyi** is Assistant Professor at Department of Humanities, B.B.D.National Institute of Technology and Management, Faizabad Road, Lucknow (U.P.), India. Her area of interest is Clinical and Counselling Psychology. She had published two books on 'Manovigyan men Prayaog' and 'Industrial Psychology'. **Email:** *vajpeyi.laxmi@gmail.com*

**Narendra Singh Thagunna** is Lecturer, Tri Chandra Campus, Tribhuvan University, Kathmandu, Nepal; CEO, President Psychdesk Foundation, The School of Psychology, Nepal. He is extensively working in the field of Cross-cultural psychology, Suicide prevention, Parenting, Internet Addiction and growth of psychology in Nepal.

**Email:** *thagunnanarendra81@gmail.com*

**N. Fauziah** is Faculty of Psychology, Diponegoro University, Tembalang, Semarang, Indonesia.

**Naima Nigar** is Lecturer, Department of Psychology, University of Dhaka, Bangladesh. She is interested in Biological Psychology.

**Email:** *naima.nigar@du.ac.bd*

**Parul Batra** is Executive Director at Vision First, London, Greater London, United Kingdom. She completed her education from Alliant International University, Los Angeles, USA.

**Priyanka Pathak** is Research Scholar at Department of Psychology, Banaras Hindu University, Varanasi (U.P.), India.

**Email:** *priyankapathak456@gmail.com*

**Purnima Awasthi** is Associate Professor of Psychology at Banaras Hindu University, Varanasi, India. Her research interest includes Health Psychology, Clinical Psychology, Rehabilitation Psychology, and Adolescence Psychology. She had carried out Indian Council of Social Science Research project entitled 'Understanding and Management of Some Critical Health Problems in an Underdeveloped Kharwar Community'. Also published book on 'Leadership' (2009) from PHI, New Delhi. **Email:** *awasthip9@gmail.com*

**Radha Maddhesia** is Research Scholar at Department of Psychology, DDU Gorakhpur University, Gorakhpur (U.P.), India. She has submitted her Ph.D. thesis entitled 'Mental Health and Distress: A Cross-cultural Study'.

**Email:** *radha.maddesia@gmail.com*

**Ramesh C. Mishra** is Professor Emeritus of Psychology at Banaras Hindu University, Varanasi, India. He has been a post Doctoral Research Fellow and Shastri Research Fellow at Queen's University, Canada, and a visiting Professor at the Universities of Konstanz (Germany) and Geneva (Switzerland). He has also been a Fellow-in-Residence of the Netherlands Institute of Advanced Study, Wassenaar (The Netherlands) and a Fulbright Scholar-in-Residence at Wittenberg University, Springfield (USA). His research is focused on understanding ecological and cultural influences on human development. He is the co-author of *Ecology, Acculturation and Psychological Adaptation: A Study of Adivasis in Bihar* (Sage) and *Development of Geocentric Spatial Language and Cognition: An Ecocultural Perspective* and co-editor of *Psychology in Human and Social Development: Lessons from Diverse Cultures* (Sage).

**Email:** *rcmishra\_2000@yahoo.com*

**Ram Kalap Tiwari** is Associate Professor, Department of Psychology, K.S. Saket P.G. College Ayodhya, Faizabad (U.P.) India. He has published 30 Research articles and 4 books and completed 2 Minor research projects funded by UGC and 1 Major Research project funded by NCERT, New Delhi. He has supervised 25 Ph.D. research scholars.

**Email:** *tiwarirk111@gmail.com*

**Prativa Sanchary** is MS Student, Department of Psychology, University of Dhaka, Bangladesh.

**Shobhna Joshi** is Professor of Psychology at Banaras Hindu University, Varanasi, India. Her research interest is in areas of Developmental Psychology and Sports Psychology. She completed research project entitled 'A study of some psychological barriers to educational development of Kharwar children of the Naugarh region'.

**Email:** *getshobhna@yahoo.com*

**Jyoti Verma** is a retired Professor of Psychology, Patna University, Patna, Bihar, India. She got Post Doctoral Fulbright Fellowship USA. She visited Paris under the India French Social Scientist' Exchange Program on the fellowship of the French Ministry of Research and Higher Education. Her expertise includes cross-cultural psychology and teaching Organizational Behaviour in the MBA Program. She has completed two research projects with the support of Indian Council of Social Science Research entitled 'Bihari Migrants in Mumbai' (2011) and 'Bihari Identity: An Uncharted Question' (2015). She was associated with Emic Labs.c.Ul. Grochowska, Warszawa, Poland. She has been Consulting Editor of Asian Journal of Social Psychology, and member of the Editorial Board of the Journal of Culture and Psychology.

**Email:** *vermaj46@gmail.com*

**Yubraj Adhikari** is MSc, Mental Health Psychology, University of Liverpool, England. Presently, he is Ph.D. Researcher on "Psychological Distress and Professional Quality of Life of Medical Doctors" at University of Nicosia, International Committee of the Red Cross-ICRC.

**Email:** *yadhikari@gmail.com*

# 20

## The Structural Equation Modeling Approach

Future Time Perspective, Un-integrated Personality and Depression of Elderly People in Nursing Home

*Dinie Ratri Desiningrum, N. Fauziah, Erin Ratna Kustanti, and Anggun Resdasari Prasetyo*

---

### Introduction

Being elderly is not a disease, but it is an advanced stage of a process of life characterized by a decreased ability of the body to adapt to stressors. In general, signs of aging process begin to appear since the age of 45 years and will cause problems at the age of about 60 years (Santrock, 2006). The elderly people are part of a growing number of family members and community members in line with increasing life expectancy.

Increasing the number of elderly people will have an impact on socio-economic status both in families, communities, and within the government. An important economic implication of increasing population is an increase in the old age ratio and their dependency. This dependence is due to the condition of many elderly people experiencing physical and psychological impediment, although these hindrance occur in the old age are natural thing (Kuntjoro, 2002). Some of the declines in the elderly can be cognitive problems (Harmand, *et al.* 2014), dementia disorders (Kooten, Smalbrugge, Wouden, Stek, & Hertogh, 2017), sleepiness disorder and depression (Chen, Huang, Cheng, Li, & Chang, 2015), as well as the risk of falling and resulting in broken bones difficult to be cured (Cox, *et al.*, 2016).

Cross-sectional studies of 400 elderly patients admitted to general hospitals or nursing homes were diagnosed with 20 per cent with delirium, 19.3 per cent had subsyndromal delirium (SSD), and 29.8 per cent had only dementia (Sepulveda, *et al.*, 2017). In another study, it was mentioned that physical health status is the most important factor affecting depression (Li, *et al.*, 2016).

Structured physical activity has a positive effect on decreasing anxiety, stress and depression, maintaining mental health and improving psychological vitality. It depends on the individual concerned, whether they choose to stay at home enjoying their days without any activity or busy themselves with exercising, doing activities, and dealing with others (Syamsuddin, 2008). A study of 80 elderly people (40 in experimental group and 40 in control group) looked at the impact of the “Physical Activity Programme” (10 minutes of warming up, 20 minutes of rhythmic exercise, 10 minute cold exercise and 30 minutes of leisurely stroll for four days a week) for the elderly in nursing homes can actually reduce the symptoms of depression and improve their quality of life (Lok, Lok, & Canbaz, 2017).

The family is an important source of support for the elderly, but the increasing number of elderly, the difficult economic life, the busy lives of family members to take care of the elderly and various other reasons causes the elderly to no longer live with their families, and they live in nursing homes. For the elderly living in the nursing home, they can still do activities and socialize with the nurses and other inhabitants of the nursing home.

The existence of elderly in the nursing home has a positive side, that is the nursing home environment can provide its own pleasure because of socialization in an environment with peer (Syamsuddin, 2008). But this condition is not fully working all the time. Many times the conditions of nursing homes are not conducive and can cause stress. Prolonged stress can trigger anxiety and result in depression. The physical and psychological effects of nursing home institutions can affect the condition of the elderly (Harmand, *et al.*, 2014). Another study with a cross-sectional design of eight nursing homes was performed on 102 elderly people. And the results obtained that the empowerment of care can affect the quality of life (QOL) of elderly in the nursing home, it means the social support of the nursing home to improve the quality of life of the elderly is needed (Tu, Wang, & Yeh, 2006).

Stress and anxiety that occur in the elderly can create a negative defense mechanism so that the depression appears; especially women

have more frequent incidents (Supriani, 2011). At an advanced age, different stressors often cause depression, while the elderly adaptability skills have been decreased, resulting the recovery of depression in elderly often not as good as younger age (Van der Carmmen quoted Austrian, 2002), while depression is risky and potentially crippling conditions for the elderly (Chen, *et al.*, 2015). In a study of 250 elderly people in a nursing home in rural China, it was found that 19.5 per cent of elderly have suicidal tendencies where impartiality and depression have a significant direct impact on suicide intention (Zhang, *et al.*, 2017).

Depression is not a condition caused by a single pathology but is a multi-factorial (Carstensen & Charles, 2002). The occurrence of depression in the elderly is the interaction of biological, psychological and social factors. One of the psychological factors is the elderly perception of life, evaluation of the life and perception of the elderly against the rest of their life. The chronological age of a person is related to one's perception of how much time is left in the future or known as the future time perspective, either expansive (open-ended or limited) or time-constrained, and generally getting older, getting more limited someone sees the future (Lockenhoff & Carstensen, 2004). In the late adult age most people are more likely to view the future as limited (Carstensen, Isaacowitz, & Charles, 2003).

Research on socio-emotional selectivity found that the majority of research subjects who were classified as active elderly and joined in a retired community with various activities turned out to have a limited future time perspective. The rest of the time perceived by the late adult tends to be narrow, this is due to some things such as the feeling of having entered the old age, already have no job responsibilities and taking care of the child, and prepare to face the death, so the elderly use more leisure time to worship (Desiningrum, 2011). Furthermore, in this study which specifically took the elderly subjects in the nursing home with symptoms of depression, the more obvious the relationship; that is the depressed elderly should have a limited perspective of the future, but from the results of preliminary interview on November 26, 2013, stated that 5 of 12 subjects just do not know and do not care about their future and 5 others stated that the future is still long so they choose to stay in the nursing home because no longer know where to live, so there is no definitive reflection about the future time perspective of elderly people in the nursing home

There are other psychological factors that play a role in the emergence of depression that is personality type (Indriana, 2003). In a research

finding, it was stated that self-esteem and loneliness can influence suicide intention through mediation of depression and despair. The frequency of child visits, the number of physical illnesses and social activities can also affect the SI through mediation of loneliness or self-esteem (Zhang, *et al.*, 2017). Self-esteem is one type of the individual's personality.

The elderly personality has a distinctive type, unlike other ages. Experts classify the basic personality traits of the elderly, among them Neugarten, Havighurst, and Tobin (1996) divide the elderly personality into four personality types, namely (1) integrated personality, (2) Armored/Defended Personality, (3) passive dependent personality, and (4) Un-integrated personality.

In the elderly, un-integrated personality type is the worst type of personality, characterized by the elderly having a lot of setbacks and even damage to his psychic function, weak emotional control and many setbacks in his cognitive function. They show disorganized patterns in the process of getting old. They can sustain life in society, but with low activity and low satisfaction (Austrian, 2013). Elderly with an un-integrated personality classified as elderly with low self-control level, difficult to adapt to change, easy to stress so tend to immature. Elderly with an un-integrated personality is considered an extremely unproductive and troubling elderly, its existence even considered the community as an individual who is the burden of the family (Hamilton, 2006). On the other hand, the family remains an important social component for the existence of the elderly. Individual depression and resilience is a mediator of the relationship between family function and quality of life in the elderly (Lu, *et al.*, 2017). Then the existence of elderly in the nursing home affects the condition of the elderly. The social needs of elderly people with dementia in nursing home are often ignored even though they are able to express their emotions and respond to social interactions. This is related to low quality of life, health, and functional decreasing in the elderly (Kang, 2012).

The purpose of this study is to determine the conditions of future time perspective, un-integrated personality and depression in the elderly, found a model of the relationship between future time perspective, un-integrated personality and depression in the elderly. Furthermore, the study aims to know the relationship of future time perspective and depression in the elderly, and whether un-integrated personality has a role or not mediating variable.

## Method

The subjects of this study were the elderly people living in the nursing home “X”, 60 to 85 years old (Santrock, 2006), not suffering from chronic and non-senile illness, with consideration to be able to communicate and be mentored in the psychological scale. Subject selection was done by using purposive sampling method. With the subject of study amounted to 155 people, who came from two nursing homes in Semarang, Indonesia. Here is an overview of the elderly demographic data—

| <i>Demographic Data</i>      | <i>Elderly Percentage</i> |
|------------------------------|---------------------------|
| 60-75/76 years or more       | 64/36                     |
| Female/Male                  | 52/48                     |
| Less-educated/ SD/SMP/SMA/PT | 39/39/12/8/2              |
| Semarang/Outside Semarang    | 42/58                     |

Inferential statistical method is used to test the research hypotheses in the form of statistical calculations called Structural Equation Modeling (SEM) using the help of Lisrel 8.80 programme in the process of calculation. In SEM two types of measurement models are known: Measurement model or factor model, and Structural Equation Model (SEM) model (Jöreskog, Karl & Sörbom, 1996). The measurement model test is done by Confirmatory Factor Analysis (CFA) Method. The psychological scale used is—

1. Future time perspective scale, as many as 10 items (Carstensen, & Lang, 2001).
2. Un-integrated personality scale, as many as 22 items (Austrian, 2002).
3. Depression scale, as many as 21 items (Beck, Steer, & Brown, 1996).

## Result and Discussion

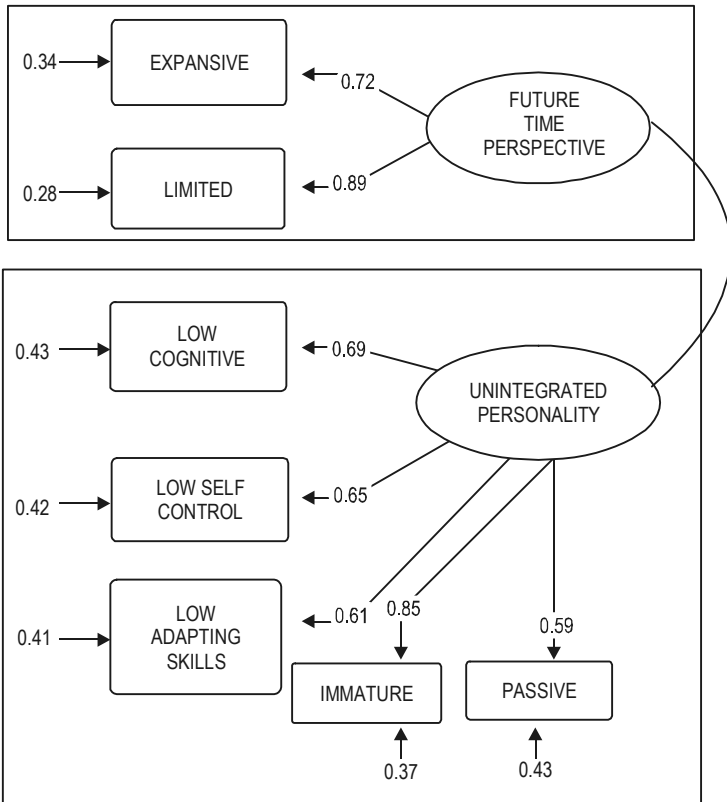
Majority of research subjects when viewed from the Future Time Perspective are in the Limited category (73%), while only 27 per cent have an expansive view on future time perspective. This is quite in tune with theoretical concepts through various studies in the USA and mainland Asia, which find that the final adult age will generally have a limited view. The rest of the time perceived by the elderly tends to be narrower,

this is due to some things like the elderly who feel old, have no job responsibilities and have the boredom of staying in the nursing home, even some feel lonely. So the absence of life responsibilities makes the elderly think that there is nothing more to be expected in life, and be prepared to face the death (Desiningrum, 2011).

Majority of research subjects when viewed from the type of un-integrated personality are in high degree (65%), the remaining 35 per cent have low degrees. The elderly living in the nursing home has an un-integrated personality which means that they have a lot of setbacks and even the damage to their psychic functions, the emotional control of the elderly in this institution is weak and there are many setbacks in its cognitive function. This is seen in daily life, the elderly do much daydreaming, crying regretting life, difficult in controlling emotions, and tend to want to get out of the nursing home even though the subject does not know where to live. This behaviour shows a disorganized pattern in the process of getting old. According to Austrian (2013) elderly with this type can maintain life in society, but with low activity and low satisfaction as well. It was found in the study that there was a decrease in cognitive function and quality of life of elderly people in nursing homes (Harmand, *et al.*, 2014; Tu, Wang, & Yeh, 2006).

Research subjects when viewed from depression, quite a lot of the majority which are in the positive category (58%), and 42 per cent in the negative category. This suggests that in general, the elderly living in the nursing home is depressed enough, saddened by their feelings of helplessness, decreased appetite and sleeping patterns (Chen, *et al.*, 2015). This is felt by the elderly because their existence in the nursing home usually starts from the rejection of the family or children who do not want to take care of the elderly, some elderly no longer have family or friends as residence (Desiningrum, 2010). The family functioned to increase individual resilience and affect the quality of life among the elderly, thus affecting the condition of depression in the elderly (Lu, *et al.*, 2017). In addition, the background of elderly past lives that contain failure and disappointment, can stimulate depression. It can be seen from demographic data which shows the low level of elderly education. This is as one indicator of the low economic conditions of the elderly in youth.

Here are the results of Confirmatory Factor Analysis of two variables (future time perspective and un-integrated personality).



chi-square = 0,00; df = 0; dan *p*-value = 1.00

**Fig. 20.1:** Results of Future Time Perspective and Un-integrated Personality Equation Models.

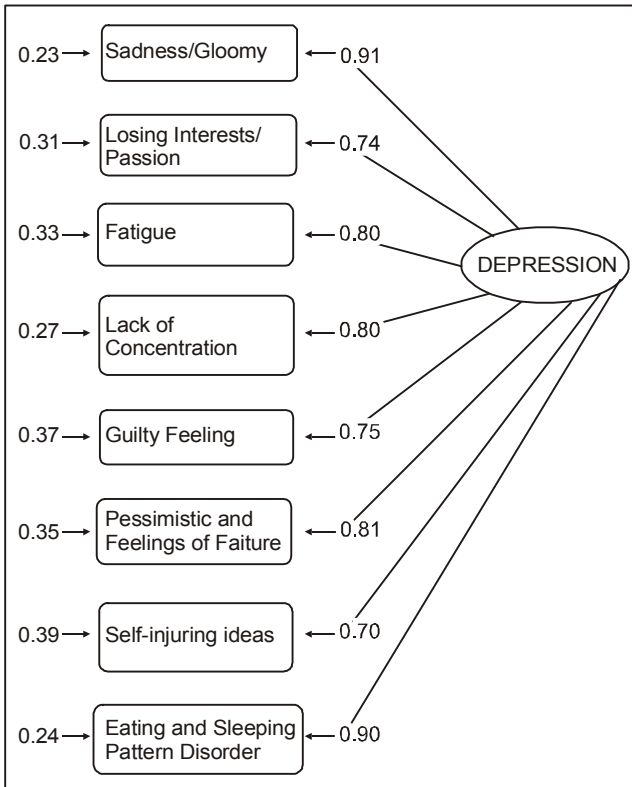
The model test results show that the model is fit perfect with empirical data with chi-square value = 0.00; df = 0; And *p*-value = 1.00. This acquired result suggests that the measurement model of Future Time Perspective and Un-integrated Personality Variables matches the research data.

Based on Table 20.1, the limited aspects are relatively dominant in measuring future time perspective than expansive and immature aspects which are relatively dominant in measuring un-integrated personality compared to other aspects.

**Table 20.1:** Factor Capacity and Significance Value of Variable Equation Model Testing

| <i>Variable</i>          | <i>Aspect</i>        | <i>Factor Capacity</i> | <i>t-value</i> | <i>p-value</i> | <i>Note</i> |
|--------------------------|----------------------|------------------------|----------------|----------------|-------------|
| Future Time Perspective  | Expansive            | 0.72                   | 9.07           | <.005          | Significant |
|                          | Limited              | 0.89                   | 9.44           | <.005          | Significant |
| Unintegrated Personality | Low cognitive        | 0.69                   | 7.88           | <.005          | Significant |
|                          | Low self-control     | 0.65                   | 7.70           | <.005          | Significant |
|                          | Low adaptation skill | 0.61                   | 7.66           | <.005          | Significant |
|                          | Immature             | 0.85                   | 8.22           | <.005          | Significant |
|                          | Passive              | 0.59                   | 7.89           | <.005          | Significant |

Here are the results of Confirmatory Factor Analysis of depression variables (Fig. 20.2).



chi-square = 0,00; df = 0; dan *p*-value = 0.99.

**Fig. 20.2:** The Result of Equation Modeling of Depression Variables

The model test results show that the fit perfect model with empirical data with chi-square value = 0.00; df = 0; and *p*-value = 0.99.

The results of this suggest that the Structural Equation Model of Depression with 8 aspects match the research data.

**Table 20.2:** Factor Capacity and Significance Value of Equation Model Testing of Depression Variable

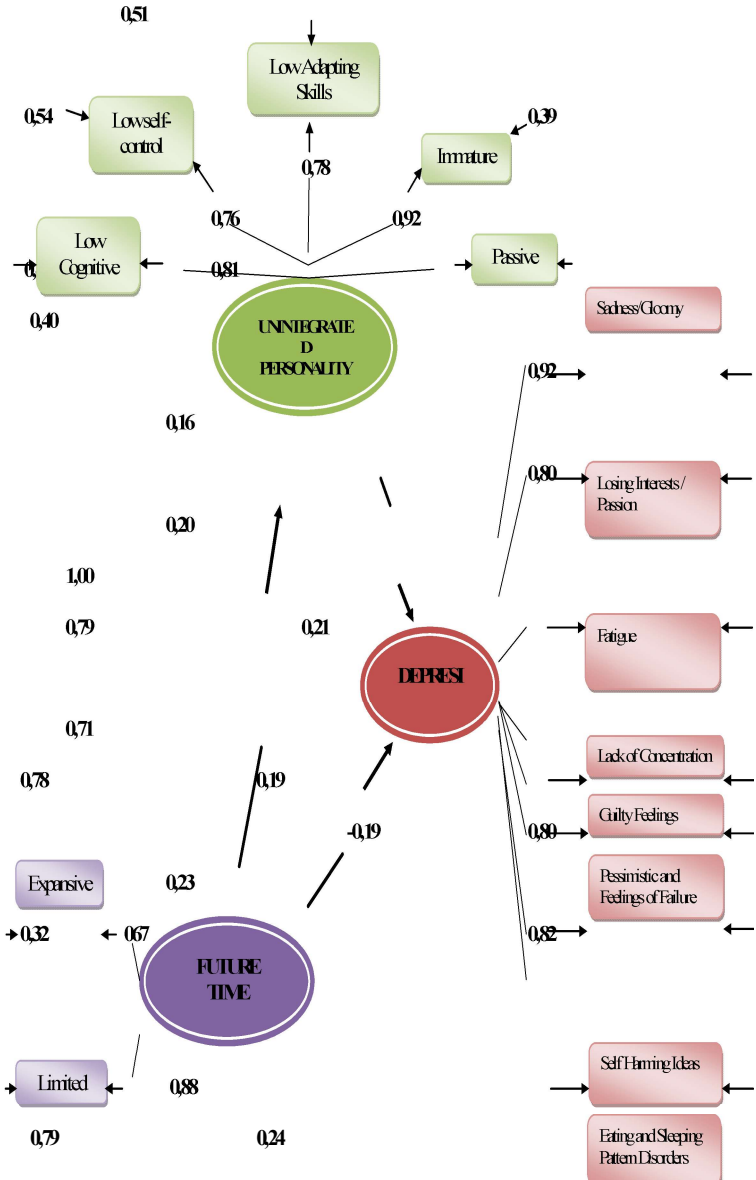
| <i>Variable</i>               | <i>Aspect</i>         | <i>Factor Capacity</i> | <i>t-value</i> | <i>p-value</i> | <i>Note</i> |
|-------------------------------|-----------------------|------------------------|----------------|----------------|-------------|
| Depression                    | Sadness/Sorrow        | 0.91                   | 13.03          | <.005          | Significant |
|                               | Lost passion          | 0.74                   | 12.71          | <.005          | Significant |
|                               | Fatigue               | 0.80                   | 12.36          | <.005          | Significant |
|                               | Lack of Concentration | 0.80                   | 12.99          | <.005          | Significant |
|                               | Guilty feeling        | 0.75                   | 12.06          | <.005          | Significant |
|                               | Pessimistic and       |                        |                |                |             |
|                               | Feelings of Failure   | 0.81                   | 12.22          | <.005          | Significant |
|                               | Self-harming ideas    | 0.70                   | 12.01          | <.005          | Significant |
| Sleeping and Eating Disorders | 0.90                  | 13.01                  | <.005          | Significant    |             |

Based on Table 20.2, the aspect of Sadness/Sorrow Attitude and Sleeping and Appetite Disorders is relatively more dominant in measuring depression level than other aspects.

The following explanation is the result of Model of Future Time Perspective and Un-integrated Personality Effect on Depression to test the formulated hypothesis:

- H<sub>0</sub> : The result of Model of Future Time Perspective and Un-integrated Personality Effect on Depression matches the empirical data
- H<sub>1</sub> : The result of Model of Future Time Perspective and Un-integrated Personality Effect on Depression does not match the empirical data

The test conducted on model provides the evidence that the model matches the empirical data showing the value of chi-square=10,21; df=6; and *p*-value=0,12; RMSEA=0,09; CFI=1,00; RMR=0,02; GFI=0,97; dan AGFI=0,91. The result provides an affirmation that the Model of Future Time Perspective and Un-integrated Personality Effect on Depression agrees with the data of the study (good fit) (*see* Fig. 20.3).



chi-square = 10.21; df = 6; dan p-value = 0.12; RMSEA = 0.09; CFI = 1.00; RMR = 0.02; GFI = 0.97; dan AGFI = 0.91

**Fig. 20.3:** The result of Model of Future Time Perspective and Un-integrated Personality Effect on Depression

**Table 20.3:** Load Factor and Significance Level Testing of Model of Future Time Perspective and Un-integrated Personality Effect on Depression

| <i>Variable</i>               | <i>Aspect</i>                       | <i>Load Factor</i> | <i>t-value</i> | <i>p-value</i> | <i>Remark</i> |
|-------------------------------|-------------------------------------|--------------------|----------------|----------------|---------------|
| Future Time Perspective       | Expansive                           | 0.67               | 8.89           | <.005          | Significant   |
|                               | Limited                             | 0.88               | 10.02          | <.005          | Significant   |
| Unintegrated Personality      | Low Cognitive                       | 0.81               | 7.88           | <.005          | Significant   |
|                               | Low Self-control                    | 0.76               | 7.70           | <.005          | Significant   |
|                               | Lack of Adapting Skills             | 0.78               | 7.66           | <.005          | Significant   |
|                               | Immature                            | 0.92               | 8.22           | <.005          | Significant   |
|                               | Passive                             | 0.82               | 7.89           | <.005          | Significant   |
| Depression                    | Sadness                             | 0.92               | 13.03          | <.005          | Significant   |
|                               | Lost of Appetite                    | 0.80               | 12.71          | <.005          | Significant   |
|                               | Fatigue                             | 0.79               | 12.36          | <.005          | Significant   |
|                               | Lack of Concentration               | 0.78               | 12.99          | <.005          | Significant   |
|                               | Guilty Feelings                     | 0.80               | 12.06          | <.005          | Significant   |
|                               | Pessimistic and Feelings of Failure | 0.82               | 12.22          | <.005          | Significant   |
|                               | Self-harming ideas                  | 0.79               | 12.01          | <.005          | Significant   |
| Sleeping and Eating Disorders | 0.91                                | 13.01              | <.005          | Significant    |               |

Based on the table, limited aspect is more dominant than expansive aspect for future time perspective variables, immature is more dominant than the other aspects for un-integrated personality variables, and sadness is more dominant than the other aspects for depression variables.

**Table 20.4:** Path Coefficient and Significance of Model of Future Time Perspective and Un-integrated Personality Effect on Depression

| <i>Path</i>   | <i>Correlation Coefficient</i> | <i>t-value</i> | <i>p-value</i> | <i>Remark</i>   |
|---|--------------------------------|----------------|----------------|-----------------|
| Future Time Perspective-<br>Un-integrated Personality | 0.71                           | 6.72           | <.005          | Significant     |
| Future Time Perspective-<br>Depression                | -0.19                          | -0.98          | 0.34           | Not Significant |
| Un-integrated Personality-<br>Depression              | 1.00                           | 5.87           | <.005          | Significant     |

Table 20.4 presents the results of path coefficient test or correlation between latent or structural variables. The test was intended to test the following sub-hypothesis:

**Sub-Hypothesis 1**

Sub-hypothesis 1 was aimed to test the level of significance of the correlation between future time perspectives with un-integrated personality using the following hypothesis:

$H_0$ : Future Time Perspective has no correlation with Un-integrated Personality.

$H_1$ : Future Time Perspective correlates with Un-integrated Personality.

Based on the table, future time perspective significantly correlates with un-integrated personality based on measured coefficient 0.71.

**Sub-Hypothesis 2**

Sub-hypothesis 2 tests the level of significance of the correlation between future time perspectives with depression using the following hypothesis:

$H_0$ : Future Time Perspective has no correlation with Depression.

$H_1$ : Future Time Perspective correlates with Depression.

Based on the table, future time perspective insignificantly correlates to depression.

**Sub-Hypothesis 3**

Sub-hypothesis 3 was aimed to test the correlation between un-integrated personality with depression using the following hypothesis:

$H_0$ : Un-integrated Personality has no correlation with Depression.

$H_1$ : Un-integrated Personality correlates with Depression.

Based on the table, un-integrated personality significantly correlates with depression measured by correlation coefficient 1.00. The correlation coefficient shows that un-integrated personality strongly correlates with depression.

The test on sub-hypothesis 2 observed that future time perspective does not directly correlate with depression, yet related to un-integrated personality.

Based on the data of subjects through model analysis, the model in Fig. 20.1 fits perfectly and possesses empirical data with  $\chi^2=0.00$ ;  $df=0$ ; and  $p\text{-value}=1.00$ . It means that structural equation modelling approach of future time perspective matches the data obtained from elderly people as the participants of the study, in which the scale measures the perspectives of elderly people of their life expectation, namely expansive perspective and limited perspective. The figure also presents structural modelling of un-integrated personality which matches the data of the study, meaning that the structure is reliable in measuring un-integrated personality of elderly people in nursing home as the participants in the research.

Based on Table 20.1, limited aspect is relatively dominant in assessing future time perspective compared to expansive aspect. It means that, as described in the profile of the subjects, the subjects tend to have limited perspective on for their future, yet based on similar load, they also have expansive perspective towards their future, and based on the interview during filling out the scales, they believe that they are old enough and has no more activities to do in the future. Expansive perspective, although less dominant, also contributed to future time perspective, and from the interview, individuals consider their future as expansive since they have the opinion that future is in God's hand so that their purpose is entering the heaven. In the same table, un-integrated personality is relatively dominant, measured from immature aspect. It means that the immature load dominantly illustrates the un-integrated personality of elderly people in nursing home. Aldert (in Hamilton, 2006) stated that immature personality during the elderly is measured from three indicators namely, imbalance mind, anxiety, and lack of confidence. The study found that anxiety disorder and depression in elderly people can be characterized by chronic headache. Elderly patients suffer from chronic headache have high prevalence of mental disorder (Peluso, Quintana, & Ganança, 2016).

Based on Fig. 20.2, the result of model test shows that model fits perfectly with empiric data with  $\chi^2=0.00$ ;  $df=0$ ; and  $p\text{-value}=0.99$ , and Table 20.2 shows that sadness and sleeping and eating pattern disorder are relatively more dominant in measuring depression compared to other aspects. Depression in elderly people living in nursing home is characterized by sadness and sleeping and eating disorder. During a research, it was found that elderly people are prone to sleeping disorder, nightmare, depression, anxiety reactions, as the neuropsychiatric effect of their medication (Ahmed, Mierlo, & Jansen, 2010).

Based on Fig. 20.2, the result of model test shows that model fits the empiric data with chi-square=10.21; df=6; and  $p$ -value=0.12; RMSEA=0.09; CFI=1.00; RMR=0.02; GFI=0.97; and AGFI=0.91. The results that Model of Future Time Perspective and Un-integrated Personality Effect on Depression fits (good fit) the study data through the group of elderly people living in nursing home as the subjects of the study. The match shows that the model perfectly measures the correlation between future time perspective and un-integrated personality with depression, from the way variables of future time perspective influence depression on elderly people. It describes the elderly people as participants perceiving future time perspective, and then describes un-integrated personality of elderly people when they live in nursing home, in this case, elderly people having future time perspectives and certain personality types are closely related to psychological conditions of elderly people with their depression level.

Table 20.3 provides the load factor of each indicator to measure the variable and it can be seen that future time perspective is dominantly influenced by limited perspective. It goes in line with the theory that generally, elderly people have limited future time perspective (Carstensen, 2003).

From the same table, it can be seen that un-integrated personality was dominantly constructed from immature, in which fits the result of profile analysis and structural model of un-integrated personality. Dominant immature is characterized by disappointment, anxiety, and lack of interest to interact with other people. It was observed from the elderly people who constantly stating their sadness and disappointment towards themselves and surroundings because of past failure, then the emergence of anxiety when they showed the unwillingness when offered the options to move to different nursing home or return home with their family, then their unwillingness to gather in the hall for exercise or join the lecture. The anxiety in elderly people can be categorized in general anxiety. Generalized Anxiety Disorder (GAD) is commonly observed on elderly people. GAD is one of the characters of severe depression (Zhang, *et al.*, 2015).

Table 20.4 presents the test result of path coefficient or the correlation of variables. It answers the sub-hypothesis. The test on sub-hypothesis 1 shows that future time perspective significantly correlates with un-integrated personality with the coefficient 0.71 which means that future time perspective of the elderly people affects their un-integrated personality when living in nursing home. Those elderly people, when

socializing with their peers, see future as limited and their perspective affects them in socializing and participating in many activities in the nursing home which in turn forms the un-integrated personality. On the contrary, the test on sub-hypothesis 2 shows that future time perspective insignificantly correlates with depression which means that depression experienced by the subjects are not influenced by their future time perspective. While the test on sub-hypothesis 3 shows that depression experienced by the subjects are influenced by un-integrated personality with the perfect coefficient 1.00 which means that depression on elderly people are defined by un-integrated personality which means that elderly people with un-integrated personality tend to be depressed in the nursing home if they have limited future time perspective.

The result of test on sub-hypothesis 2 shows that future time perspective does not significantly correlate with depression. It provides the evidence that future time perspective has no direct correlation with depression in elderly people, but it deals with un-integrated personality as the mediating variable.

Based on the description above, un-integrated personality was determined an intervening or mediating variable. It can be concluded that un-integrated personality as an intervening variable has the role to provide the explanation for the elderly people as the participants who have limited future time perspective with un-integrated personality such as immature, passive and low cognitive and adaptive skills, which results in depression which can be seen from the sadness, lack of appetite and sleeping pattern disorder, lack of interest, concentration and energy as well as guilty feelings, and self-harm tendency.

The limitation of the study is the limited number of elderly people which live in two nursing homes that represents a small scale of elderly people in Central Java. The elderly people involved in the research experienced difficulties in filling out the questionnaire and the check-list which represents the psychological conditions of elderly people. The solution was assisting those elderly people in filling out the questionnaire by reading the questions one by one and translating those questions into Javanese to be more easily understood.

## **Conclusion**

Most of the elderly people in nursing home participating in the study have a limited future perspective, un-integrated personality and suffer from depression. The study tested the structural equation modelling

approach of future time perspective (which was dominantly measured from limited aspects) and un-integrated personality (which was dominantly measured from immature aspect), model equation approach of depression (which was dominantly measured from sadness and sleeping and eating disorder aspects) and model of future time perspective and un-integrated personality correlation with depression in which the three models fit the subjects of the study. The analysis conducted on model of future time perspective and un-integrated personality correlation with depression shows that future time perspective slightly corresponds to depression, while un-integrated personality exclusively correlates with depression. Another finding affirms that un-integrated personality was an intervening/mediating variable which means that elderly people in nursing home with limited future time perspective tend to be depressed if they have un-integrated personality.

## References

- Ahmed, A.I.A., Mierlo, P.V., and Jansen, P., 2010. Sleep disorders, nightmares, depression and anxiety in an elderly patient treated with low-dose metoprolol. *General Hospital Psychiatry*. 32 (6): 646.e5-646.e7.
- Austrian, S.G., (2002). *Developmental Theories Through the Life Cycle*. New York: Columbia University Press.
- Beck, A.T., Steer, R.A., and Brown, G.K. (1996). *Manual for the Beck Depression Inventory-II*. San Antonio, TX: Psychological Corporation.
- Carstensen, L.L., and Lang, F. (2001). Future orientation scale. *Unpublished Manuscript*, Stanford University.
- Carstensen, L.L., and Charles, S.T. (2002). The salience of emotion across the adult life span. *Journal of Psychology and Aging*, 9, 259-264.
- Carstensen, L.L. (2003). *Growing Old or Longevity*. Stanford University.
- Chen, K.M., Huang, H.T., Cheng, Y.Y., Li, C.H., and Chang, Y.H. (2015). Sleep quality and depression of nursing home older adults in wheelchairs after exercises. *Nursing Outlook*. 63(3): 357-365.
- Cox, C.A., Jaarsveld, H.J.V., Houterman, S., Stegen, J.C.G.H., Wasylewicz, A.T.M., and Grouls, R.J.E. (2016). Psychotropic drug prescription and the risk of falls in nursing home residents. *Journal of the American Medical Directors Association*. 17(12): 1089-1093.
- Desiningrum, D.R. (2010). Family's social support and psychological well-being of the elderly in Tembalang. *ANIMA Indonesian Psychological Journal*. 26 (1), 61-68.
- Desiningrum, D.R. (2011). The Padjadjaran International Conference on Psychology: Future time perspective, goal orientation and subjective well-being in elderly. *Proceeding*. ISBN: 978-602-19851-1-3, Jilid 1.

- Hamilton, I.S. (2006). *The Psychology of Ageing: An Introduction 4th edition*. London and Philadelphia: Jessica Kingsley Publishers.
- Harmand, M.G.C., Meillon, C., Rullier, L., Funes, J.A.A., Bergua, V., and Dartigues, J.F. (2014). Cognitive decline after entering a nursing home: A 22-year follow-up study of institutionalized and non-institutionalized elderly people. *Journal of the American Medical Directors Association*. 15(7): 504-508.
- Indriana, Y. (2011). *Gerontologi dan progeria*. Semarang: Universitas Diponegoro Press.
- Jöreskog, K. and Sörbom, D. (1996). *Lisrel 8: User's Reference Guide*, Scientific Software International.
- Kang, H., 2012. Correlates of social engagement in nursing home residents with dementia. *Asian Nursing Research*. 6(2): 75-81.
- Kooten, J.V., Smalbrugge, M., Wouden, J.C., Stek, M.L., and Hertogh, C.M.P.M. (2017). Prevalence of pain in nursing home residents: The role of dementia stage and dementia subtypes. *Journal of the American Medical Directors Association*. Available online 22 February 2017.
- Kuntjoro, Z.S. (2002). *Dukungan sosial pada lansia*. (Online). ([http://www.epsikologi.com\\_160802.htm](http://www.epsikologi.com_160802.htm), accessed at November 2013).
- Li, N., Chen, G., Zeng, P., Pang, J., Gong, H., Han, Y., Zhang, Y., Zhang, E., Zhang, T., and Zheng, X. (2016). Prevalence of depression and its associated factors among Chinese elderly people: A comparison study between community-based population and hospitalized population. *Psychiatry Research*. 243: 87-91.
- Lockenhoff, Corinna E., and Carstensen, L.L. (2004). Socio-emotional selectivity theory, aging, and health: The increasingly delicate balance between regulating emotions and making tough choices. *Journal of Personality*. 72 (6), 1395-1424.
- Lok, N., Lok, S., and Canbaz, M. (2017). The effect of physical activity on depressive symptoms and quality of life among elderly nursing home residents: Randomized controlled trial. *Archives of Gerontology and Geriatrics*. 70: 92-98.
- Lu, C., Yuan, L., Lin, W., Zhou, Y., and Pan, S. (2017). Depression and resilience mediates the effect of family function on quality of life of the elderly. *Archives of Gerontology and Geriatrics*. 71: 34-42.
- Neugarten, B.L., Havighurst, R.J., and Tobin, S.S. (1996). Personality and patterns of aging. *The Meanings of Age*. Chicago [ua]: University of Chicago Press, pp. 264-269.
- Peluso, E.T.P., Quintana, M.I., and Ganança, F.F. (2016). Anxiety and depressive disorders in elderly with chronic dizziness of vestibular origin. *Brazilian Journal of Otorhinolaryngology*. 82 (2): 209-214.
- Santrock, J.W. (2006). *Life Span Development*. Tenth Edition. McGraw-Hill Companies.
- Sepulveda, E., Leonard, M., Franco, J.G., Adamis, D., McCarthy, G., Dunne, C., Trzepacz, P.T., Gaviria, A.M., Pablo, J.D., and Vilella, E. (2017).

- Subsyndromal delirium compared with delirium, dementia, and subjects without delirium or dementia in elderly general hospital admissions and nursing home residents. *Alzheimer and Dementia: Diagnosis, Assessment and Disease Monitoring*. 7, 1-10.
- Supriani, A. (2011). Tingkat depresi pada lansia ditinjau dari tipe kepribadian dan dukungan sosial. *Tesis*. Program Pascasarjana Universitas Sebelas Maret Surakarta. Unpublished.
- Syamsuddin (2008). *Penguatan eksistensi panti werdha di tengah pergeseran budaya dan keluarga*. (Online). (<http://www.depsos.go.id/modules.php?name=News&file=article&sid=704>, diakses January 2014)
- Tu, Y.C., Wang, R.H., and Yeh, S.H., 2006. Relationship between perceived empowerment care and quality of life among elderly residents within nursing homes in Taiwan: A questionnaire survey. *International Journal of Nursing Studies*. 43(6): 673-680. <http://doi.org/10.1016/j.ijnurstu.2005.10.003>
- Zhang, D., Yang, Y., Sun, Y., Wu, M., Xie, H., Wang, K., Zhang, J., and Jia, J., 2017. Characteristics of the Chinese rural elderly living in nursing homes who have suicidal ideation: A multiple regression model. *Geriatric Nursing*. Available online 25 March 2017. <http://doi.org/10.1016/j.gerinurse.2017.02.005>
- Zhang, X., Norton, J., Carrière, I., Ritchie, K., Chaudieu, I., and Ancelin, M.L., 2015. Generalized anxiety in community-dwelling elderly: Prevalence and clinical characteristics. *Journal of Affective Disorders*. 172: 24-29. <http://doi.org/10.1016/j.jad.2014.09.036>