Original Article

Determinant Factors of Healthy Aging In Central Java, Indonesia

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Abstract - This study aims to determine the determinant factors of the healthy aging process. This study uses a qualitative-phenomenological approach, where data collection methods are carried out through interviews and observations.

The research results obtained through interviews with 26 resource persons with the help of the Mind Maple program are as follows: Healthy Lifestyle consists of a). a healthy diet with 4 healthy 5 perfect foods, the majority of resource persons, have paid attention to the 4 healthy 5 perfect food menu, cook themselves even though they sometimes buy food at the stall. b) medical Check by routine health checks, the majority of informants have carried out health checks at the integrated service post for the elderly, if sick, go to the puskesmas or the doctor. Several resource persons had a history of heart disease, lung disease and diabetes mellitus but had routine treatment; it was caused by having smoked. Green Lifestyle includes a} environmental Attitude, and resource persons have carried out waste sorting and disposing of garbage in its place, not wasting water and electricity. b) environmental Behavior, resource persons can arrange the time between routine work, rest time and worship.

Factors that affect healthy aging Adalah healthy lifestyle dan green lifestyle which consist of physical health, activity factors, psychological factors, social factors, and religious factors. To realise a healthy old age, health development must be carried out as early as possible during the human life cycle to enter the elderly phase by taking into account the risk factors that must be avoided and the protective factors that can be done to improve the health of the elderly.

Keywords green Lifestyle, healthy aging, healthy Lifestyle.

I. INTRODUCTION

Humans in their life will experience sequential periods, starting from the parental period to the elderly. Elderly is the last development period in human life, accompanied by a decline in physical, psychological and social conditions that interact with one another [1]. The longer a person's life, in line with the increasing age of his

body, the more physical and psychological setbacks experience. Physically, an older adult got wrinkled on his skin, grey and thinning hair, reduced function of the five senses, and susceptible to disease because his immune system decrease. They psychologically, the elderly began to experience a memory decline; they limited to carrying out activities both inside and outside the home, experiencing boredom and even loneliness. Elderly is also called the golden age because not everyone can reach that age, so older adults need treatment, both promotive and preventive so that they can enjoy a golden age and become a useful and happy elderly [1]. Suardiman (2011) stated that all living things have a cycle of life towards old age which begins with the birth process, then grows into adulthood, and reproduces, then gets older and eventually dies [2].

Today's society considers that the elderly can only be at home, enjoying their days by just relaxing without doing any activities. In fact, on the other hand, we can find phenomena in which the elderly can remain productive and useful for others in their time. Old age is seen as a time of decline and a period in which the elderly feels the decline that occurs in him/ her physically and psychologically. Some older people still look at old age with an attitude that shows despair, passivity, weakness and dependence on relatives. Elderly is not trying to develop themselves so that the elderly more quickly experiences physical and mental deterioration. On the other hand, this view does not mean that an elderly group is a homogeneous group of people. The elderly undergo and interprets old age in different ways, and some older adults can see the importance of old age in the context of human existence; i.e. as a period of life that gives elderly opportunities to grow and have the desire to do something or mean for

Healthy ageing was therefore much more than increasing the number of healthy life-years without any activity limitation and disability or disease. It has been briefly defined as the process of optimising equal opportunities for health to enable older people to take an active part in society and to enjoy an independent and good quality of life [3]. Healthy ageing should ideally start in childhood and took a lifelong perspective. Yet it was never too late to start. Investing in prevention could have important benefits for the individuals involved; those who stop smoking between the ages of 60-75 years of age reduced their risk of dying prematurely by 50% while engaging in a moderate exercise like brisk walking can have immediate physical and cognitive benefits. Investing in prevention also had societal benefits since it was better to finance effective strategies to prevent diseases than to use the resources to cure them [4]. According to Darmojo (2006), the purpose of human life is to grow old but stay healthy (healthy aging). Healthy aging means growing old in a healthy state which will be influenced by factors: 1) Endogenic aging, which starts with cellular aging through tissue and anatomical aging towards the process of organ harvesting, 2) Exogenic factor (risk factor) which consists of the environment where a person lives and socio-cultural factors or what is called a lifestyle [5].

A crucial element for healthy ageing is a healthy lifestyle. Individuals living healthy not only survive longer but live longer in better health with the occurrence of disability and age-related diseases postponed to the last years of life [6]. Healthy behaviours are also found to support the recovery process in case of illness [7.8]. Most importantly, these relations are found to be important even for the population above the age of 75, pointing to the need for promotion of a healthy lifestyle also among the oldest population [8]. Various studies point that lifestyle factors such as smoking, unhealthy dietary patterns and obesity, physical inactivity and sedentary Lifestyle as well as heavy drinking are associated with the onset of mobility limitations [6,8]. Lifestyle indicated by nutrition, physical activity, smoking and alcohol consumption [9,10], as well as specific psycho-social factors like social networks, social support and social participation [9,11]. Seniors with higher education tend to be in better health, more frequently report higher life satisfaction, interest with life and well-being, and are more socially engaged [9,12,13]. Social status, income and education influence lifestyle choices that are important for healthy ageing [13,14].

A healthy lifestyle is healthy with a healthy diet, mind, habits and environment. Healthy living is living physically, psychologically, environmentally and financially that is healthy, sufficient, and good. Elderly still works to maintain health and fitness according to ability. A person who has a healthy lifestyle will live his life by paying attention to factors that affect health such as food, thoughts, exercise habits, and a healthy environment. This will cause a person's health level to be good. Good health increases a person's quality of life [15]. Elderly still works to maintain health and fitness according to ability. Following the call of GERMAS (Gerakan Masyarakat Hidup Sehat or Healthy Living Community Movement) in the 2017 Presidential Instruction, it is a promotive and preventive activity to improve health and prevent disease that can be done with a family approach. GERMAS invites people to live healthy lives, cultivate healthy lives, and change healthy living behaviours. That includes exercising at least 30 minutes per day, eating fruits and vegetables, checking health, keeping the environment clean, using the toilet, avoiding cigarettes, and avoiding drinking alcohol [16]. According to research, only 2-3 out of 10 people do a lot of activities, 9 out of 10 people consume less fruit and vegetables, and 4 out of 10 houses open defecation. Meanwhile, the habit of drinking alcohol still exists in certain areas where people have the habit of drinking alcohol and smoking. Then, the empowerment of the elderly through the Integrated Service Post for Elderly is needed so that the elderly are healthier, independent and active

Green Lifestyle is a lifestyle that is based on awareness to protect the environment. The point is that humans must be aware and participate in protecting the environment in their lives. Each person can continue to live life the way they want. However, they still have to take into account the effect of their actions on the environment. Green Lifestyle has been conceptualised in several ways, including health-related and environment-related activities, values, and perceptions [17,18,19]. A green lifestyle can also be viewed as everyday green activities [17]. Green lifestyles have been related to product-specific attitudes and behavioural intentions [20,21]. Environmental awareness and knowledge are known to be the chief predictors of environmental buying behaviours [22].

II. LITERATURE REVIEW

This research theory refers to a combination of several opinions about healthy aging, healthy Lifestyle and green Lifestyle.

A. Elderly

Several factors influence the process of population aging; for instance, improvement of nutrition, sanitation, health services, to progress in the level of education and socioeconomic improvement. Elderly is the final period of the phase of human life. Most elderly face periods by spending their lives with their family. Some others live alone because their spouse has died or has no relatives at all. When passing through this period, the elderly have the opportunity to develop into better and more mature individuals, develop themselves and create according to their interests, and do something meaningful for themselves and others. The problems faced by aging people are very typical; they experience a decrease in the physical condition and psychological problems. In old age, a person must not only maintain physical health but also maintain his mental condition to deal with the changes they experience [23].

B. Healthy Aging

For the sake of not burdening others, an older person must regulate a healthy life from a young person by regulating eating patterns, ways of life, reducing stress, trying to be independent of an economic perspective, and conducting health checks. Healthy ageing is therefore much more than increasing the number of healthy life-years without any activity limitation and disability or disease. It has been succinctly defined as the process of optimising equal opportunities for health to enable older people to take an active part in society and to enjoy an independent and good quality of life [3].

C. Green Lifestyle

Green Lifestyle should contain three components or dimensions: environmental knowledge, environmental attitudes, and environmental Behavior [24,25]. Green Lifestyle has been conceptualised in several ways, including health-related and environment-related activities, values, and perceptions [17,18,19]. A green lifestyle can also be viewed as everyday green activities [17].

D. Healthy Lifestyle

People must develop a healthy lifestyle to have a longer and healthier life. Healthy living will make them be fit, energetic and reduce risk from getting chronic diseases. There are several tips for healthy living such as consume a well-balanced and healthy food, do exercise daily and have adequate sleep. Furthermore, people should manage their stress in positive ways such as by listening to music, exercise and eat nutritious food [26], instead of by smoking or drinking alcohol as it can affect the major organ systems in their body [27].

A healthy lifestyle is a lifestyle that takes into account certain factors that affect health, including food and exercise. Besides, a person's Lifestyle also affects their level of health, for example, if you like smoking and drinking alcohol, of course, it is not a healthy lifestyle [15] GERMAS (Gerakan Masyarakat Hidup Sehat or Healthy Living Community Movement) includes exercising for at least 30 minutes per day, eating fruits and vegetables, checking health, keeping the environment clean, using the toilet, avoiding cigarettes, and avoiding drinking alcohol. Some indicators or variables of healthy practices that can affect elderly mental health include: developing hobbies/interests, doing periodic recreation, confident practices, trying to appear attractive, being able to retain memories, being able to overcome problems [28]

III. RESEARCH METHOD

A. Elderly Classification

According to the Department of Health of the Republic of Indonesia [29], the elderly is classified in the following categories:

- 1. The early elderly age of 46-55 years
- 2. The late elderly age of 56-65 years
- 3. The elderly age of 66 years and above

The informants of this study use the age of the late elderly 56 to 65 years and the elderly 66 years to above.

B. Research Design

The research design used in this study is a qualitative study with a phenomenological approach. Qualitative research methods enable researchers to understand the phenomena experienced by research subjects; for instance, Behavior, perception, motivation, actions, etc. by means of descriptions in the form of words and language in a special natural context by utilising various natural methods [30]. Researchers chose qualitative research methods with a phenomenological approach. The phenomenological approach is oriented to understanding, exploring, and interpreting meaning, events, and relationships with people in certain situations. Research using this phenomenological approach is commonly referred to as research that uses observations of natural social phenomena or phenomena based on field reality (empirical) [30].

Resource person number is 26 persons, which aged 56 - 65 years are 13 persons, then aged 66 years and above are 13 persons. Resource person from Pekalongan (6 persons), Magelang (6 Persons), Solo (9 persons) and Semarang (5 persons). Taking subjects in this study using purposive sampling techniques; i.e. subject taking techniques with certain characteristics [31]. Characteristics of the subjects of this study are the man or woman who at the time of the study was in a healthy condition aged around 56-65 years and aged around 66 years and above. Data collection methods used in this study were interviews, observation, and documentation. Technical analysis of data uses three steps consisting of data reduction, data presentation, and concluding/ verification with the help of Mind Maple Program (a tool with a qualitative approach). Test the validity and reliability are carried out by using triangulation with research sources as a test of the validity of the data. Triangulation with research sources is to compare and check the degree of trust in information obtained through different time and tools in qualitative methods.

IV. RESULTS AND DISCUSSION

A. Results

The results of the analysis with the help of Mind Maple based on Reduction Data and Display Data can be summarised and presented, as shown in the following Mind Map:

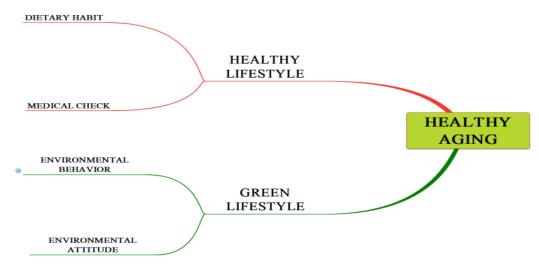


Fig. 1 Substance and Category for Determinant Factors of Healthy Aging

This study consists of several theory including green Lifestyle, healthy Lifestyle and healthy aging, however healthy aging based on a green lifestyle and a healthy lifestyle. To facilitate this research, that theory can be grouped based on substance and category as follows:

- 1. Healthy Lifestyle:
 - a. Dietary Habit (healthy food/diet)
 - Medical Check (history of illness, smoking, medication)

2. Green Lifestyle

- a. Environmental Attitude (garbage, plastic, electricity, water)
- b. Environmental Behavior (routine, rest, worship)

B. Discussion

The steps to create healthy, active and productive older people are: 1) Regular health check at the Integrated Development Post, 2) Go to the Community Health Center if there are health complaints, 3) Conduct activities that sharpen the brain, 4) Develop hobbies accordingly ability, 5) Consume balanced nutritious food, 6) Reduce foods that are too tasty, sweet and oily, 7) Avoid smoking, 8) Increase relationships and harmonious relationships, 9) Manage stress well and engage in light physical activity 30 minutes a day, and 10) Doing regular aging exercises [32].

A person who is active in his/ her youth should continue to maintain his/ her activity after aging. The sense of integrity that is built-in youth must be maintained until old age. This theory states that the elderly who get successful aging are those who are active and involved in social activities [33].

GERMAS is a movement that aims to promote a culture of healthy living and leave the habits and Behavior that are less healthy. The GERMAS action is also followed by promoting healthy hygiene behaviour and support for infrastructure programs on a community basis. The program has several focuses, such as the availability of access to meet drinking water needs,

community health installations, and the construction of habitable settlements. All three are the basic infrastructure that forms the foundation of GERMAS [32].

Determinant Factors of Healthy Aging

1. Healthy Lifestyle

a. Dietary Habit

The optimum size (Lifestyle) depends on the way of life of an older person. Maintaining the relationship between the social system and individuals is intended to remain stable from middle age to the elderly [33].

Summary of Answers from Data Sources (Resource Persons) with Determinants of Lifestyle and category (healthy food/diet):

- Resource Persons from Magelang (6 persons consisted of 5 females and 1 male).
- The majority of them maintain a diet concerning on the "4 healthy 5 perfect", prefer home cooking rather than snacks outside, drink lots of water, eat vegetables, fruit, reduce chicken and beef, goat, and consume more fish. Some consume vitamins and supplements.
- Resource Persons from Pekalongan (6 persons consist of 5 females and 1 male).
- The majority of them maintain a diet concerning the "4 healthy 5 perfect", prefer home cooking rather than snacks outside, eat vegetables, fruit. They also drink lots of water. Some reduce the consumption of chicken and beef and consume more fish. Some of them used to take supplements, but now they do not.
- Resource Persons from Semarang (5 persons consist of 4 females and 1 male).
- The majority of them maintain a diet concerning the "4 healthy 5 perfect", prefer home cooking rather than snacks outside, eat vegetables, fruit, drink lots of water. Some reduce the consumption of chicken and beef and consume more fish.
- Resource Persons from Solo (9 persons consisted of 6 females and 3 males).

 The majority of them maintain a diet concerning the "4 healthy 5 perfect", prefer home cooking rather than snacks outside, drink lots of water, and eat more vegetables and fruit. Some reduce the consumption of chicken, beef, and goat meat, and increase consumption of fish as well as vitamins and supplements.

b. Medical Check

GERMAS (Gerakan Masyarakat Hidup Sehat or Healthy Living Community Movement) is a systematic and planned action carried out jointly by all components of the nation with awareness, willingness, and ability to behave healthily to improve the quality of life. The implementation of the GERMAS must start with the family because the family is the smallest part of the community that forms the personality. GERMAS can be carried out by doing physical activities, consuming vegetables and fruit, avoiding cigarettes, avoiding alcohol consumption, checking health regularly, cleaning the environment, and using the toilet. In the initial stages, GERMAS nationally begins with a focus on three activities: 1) carrying out 30 minutes of physical activity per day, 2) consuming fruits and vegetables; and 3) health checks routinely.

Summary of Answers from Data Sources (Resource Persons) with Determinants of Health Check with category (history of illness, smoking, medication):

- (1). Resource Persons from Magelang (6 persons consisted of 5 females and 1 male).
- (a). The majority of mothers rarely get sick if they are sick, go to the doctor or Puskesmas. Every first week of every month, check their health at the Elderly Post (Check blood sugar, blood pressure, cholesterol). There is a mother who has had a thyroid gland, and a mother has myoma, and a mother has a history of diabetes mellitus (DM).
- (b). A father rarely gets sick. If you are sick, go to the doctor or Puskesmas.
- (2). Resource Persons from Pekalongan (6 persons consist of 5 females and 1 male).
- (a). The majority of mothers rarely get sick if they are sick, go to the doctor or Puskesmas. Every first week of every month, check their health at the Elderly Post (Check blood sugar, blood pressure, cholesterol). A mother has a history of diabetes mellitus (DM).
- (b). A father used to be a smoker, now has quit. He had a heart attack and was hospitalised in 1997 and 2000. He was hospitalised for vertigo in 2017. Previously, he often stayed up late; now, he doesn't. Check with the doctor regularly, if sick, see a doctor
- (3). Resource Persons from Semarang (5 persons consist of are 4 female and 1 male).
- (a). The majority of mothers rarely get sick. If they go to the doctor, a mother has been hospitalised for kidney stone surgery

- (b). There is a man who is rarely sick if sick go to the doctor. Although Ever smoked at the age of 35 years, a year later quit smoking
- (4). Resource Persons from Solo (9 persons consist of are 6 female and 3 male).
- (a). The majority of mothers rarely get sick if they are sick, go to the doctor or Puskesmas. Every first week of every month, check their health at the Elderly Post (Check blood sugar, blood pressure, cholesterol). Two mothers have a history of stomach ulcers, one mother has a history of high blood pressure.
- (b). There were 3 fathers, a man with heart disease and a smoker, a man with lung disease and a smoker, a man with diabetes mellitus (DM) and a smoker.

2. Green Lifestyle

a. Environmental Attitude

Green Lifestyle is a lifestyle that is based on awareness to protect the environment. The point is that humans must be aware and participate in protecting the environment in their lives. Each person can continue to live life the way they want. However, they still have to take into account the effect of these actions on the environment. Summary of Answers from Data Sources (Resource Persons) with Determinant of Environmental Care and category (garbage, plastic, electricity, water):

(1). Resource Persons from Magelang (6 persons consist of 5 females and 1 male).

The waste is sorted. Organic waste can be recycled for fertiliser and spoiled. Garbage has many benefits. Plastic can be recycled too. Organic waste can be processed into compost, and it depends on each person.

The use of electricity (for lighting, iron, cooking) and water for public bathing, washing, and toilet facilities (Indonesian: *Mandi, Cuci, Kakus*/MCK) is not wasteful and as needed.

- (2). Resource Persons from Pekalongan (6 persons consisted of 5 females and 1 male).
 - The type of garbage has been sorted. There was a person who took it 3 times a week, a sanitation worker. Bottle, glass and plastic waste were weighed in a garbage bank whose activities were carried out in conjunction with the Elderly Integrated Service Post. The use of electricity (for lighting, iron, cooking) and water for MCK is not wasteful and as needed.
- (3). Resource Persons from Semarang (5 persons consisted of 4 females and 1 male).
 - The type of garbage has been sorted. There is a person who takes it every day, a sanitation worker. Bottle, glass and plastic waste is weighed in a garbage bank
 - The use of electricity (for lighting, iron, cooking) and water for MCK is not wasteful and as needed.
- (4). Resource Persons from Solo (9 persons consist of 6 females and 3 males).
 - The type of garbage has been sorted. There is a person who takes it every morning, a sanitation

worker. Bottle, glass and plastic waste is weighed in a garbage bank

The use of electricity (for lighting, iron, cooking) and water for MCK is not wasteful and as needed.

b. Environmental Behavior

Summary of Answers from Data Sources (Resource Persons) with Determinants of Lifestyle and category (routine, rest, worship).

- (1). Resource Persons from Magelang (6 persons consist of 5 females and 1 male).
 - The majority of mothers, daily routine activities are doing household chores, shopping, cooking. Sweeping, mopping n washing clothes n ironing because they don't have a maid. While her husband helps deliver shopping and does the wife's work—a father whose hobby is caring for flowers. The majority of them never work overtime, rest enough and regular worship.
- (2). Resource Persons from Pekalongan (6 persons are consisting of 5 females and 1 male).
 - The majority of mothers, daily routine activities are doing household chores, shopping, cooking. Sweeping, mopping n washing clothes n ironing because they don't have a maid. While her husband helps deliver shopping and does the wife's work. The majority of them maintain never work overtime, rest enough, regular worship and several maintain do light exercise such as morning walks.
- (3). Resource Persons from Semarang (5 persons are consisting of 4 females and 1 male). The majority of mothers, daily routine activities are doing household chores, shopping, cooking. Sweeping, mopping n washing clothes n ironing because they don't have a maid. While her husband helps deliver shopping and does the wife's work. The majority of them maintain never work overtime, rest enough, regular worship and several maintain do light exercise such as morning walks.
- (4). Resource Persons from Solo (9 persons are consisting of 6 females and 3 males).

The majority of mothers, daily routine activities are doing household chores, shopping, cooking. Sweeping, mopping n washing clothes n ironing because they don't have a maid. While her husband helps deliver shopping and does the wife's work. Two resource persons were helping his wife to market the cakes made by her. The majority of them maintain never work overtime, rest enough and regular worship.

3. Healthy Aging

The occurrence of healthy aging is several interrelated factors, including physical and health factors, activity, psychological, social and religious. Some indicators or variables of healthy practices that can affect elderly mental health, some of these variables include: developing hobbies/ interests, doing periodic recreation, confident practices, trying to appear attractive, able to maintain memory, and able to overcome problems [29].

Summary of Answers from Data Sources (Resource Persons) with Determinants of Activities/ Hobbies with the category are physical (sports) and non-physical (recitation, reunion, travelling, social activity);

- (1). Resource Persons from Magelang (6 persons are consisting of 5 females and 1 male).
 - (a). Physical activities are carried out by exercising. Mothers (5 females) usually follow the elderly exercise, swimming, jogging; there used to be volleyball, jogging and tennis. Furthermore, a father (1 male) usually joins swimming.
 - (b). Menthal health (non-physical) activities for mothers include joining the Qur'an recital forum (recitation) and social gathering. There is a mother who has hobbies of cooking and crochet. A father has a hobby of farming since there is no land with the use of hydroponics. He also joins the recitation as well as social activities.
- (2). Resource Persons from Pekalongan (6 persons are consisting of 5 females and 1 male).
 - (a). Physical activities are carried out by exercising. Mothers usually follow the elderly exercise, volleyball, jogging; there used to be cycling, aerobics and gymnastics. A father exercises by cycling, joining elderly exercise, jogging; there used to be soccer, volleyball, and badminton.
 - (b). Menthal health (non-physical) activities for mothers include cooking, joining recitation and social gathering activities. Some of them are gardening and travelling. A father has activities such as travelling, biking, and jogging; there used to be soccer, volleyball, and badminton.
- (3). Resource Persons from Semarang (5 persons consisted of 4 females and 1 male).
 - (a). Physical activities are carried out by exercising. Mothers usually follow the elderly exercise, elderly yoga, swimming, jogging; there used to be aerobics and gymnastics. A father works out by jogging.
 - (b). Menthal health (non-physical) activities for mothers include joining recitation, social gathering, elderly exercise, reunion, and travelling. A father has a hobby of writing books.
- (4). Resource Persons from Solo (9 persons are consisting of 6 females and 3 males).
 - (a). Physical activities are carried out by exercising. Mothers usually follow the elderly exercise, walking, joining car-free day, and cycling. When they are young, some exercise by playing badminton, *ping pong* (table tennis), biking, volleyball, and *kasti*. In addition, fathers usually exercise by walking, and jogging; there used to be *karate*, volleyball, chess, and *ping pong* (table tennis).
 - (b). Menthal health (non-physical) activities for mothers included cooking, joining recitation, social gathering, and travelling. The fathers join recitation and social gathering activities.

V. CONCLUSION AND SUGGESTION

A. Conclusion

Based on interviews with informants, it was concluded that Healthy Aging was realised through the Green Lifestyle and Healthy Lifestyle. An essential element for healthy aging is a healthy lifestyle. Healthy individuals not only survive longer but live longer in better health with the occurrence of disabilities and agerelated illnesses postponed to the last years of life.

Healthy Lifestyle consists of a). a healthy diet with 4 healthy 5 perfect foods, the majority of resource persons, have paid attention to the 4 healthy 5 perfect food menu, cook themselves even though they sometimes buy food at the stall. b) medical Check by routine health checks, the majority of informants have carried out health checks at the integrated service post for the elderly, if sick, go to the puskesmas or the doctor. Several resource persons had a history of heart disease, lung disease and diabetes mellitus but had routine treatment; it was caused by having smoked.

Green Lifestyle includes a} environmental Attitude, and resource persons have carried out waste sorting and disposing of garbage in its place, not wasting water and electricity. b) environmental Behavior, resource persons can arrange the time between routine work, rest time and worship

Factors that affect healthy aging Adalah healthy lifestyle dan green lifestyle which consist of physical health, activity factors, psychological factors, social factors, and religious factors. To realise a healthy old age, health development must be carried out as early as possible during the human life cycle to enter the elderly phase by taking into account the risk factors that must be avoided and the protective factors that can be done to improve the health of the elderly.

B. Suggestion/Recommendation

It was suggested to examine the resource persons of early elderly (aged 46-55 years) and adolescent age (aged 36 - 45 years) as a genealogy of late elderly (aged 56-65 years) and elderly (aged 66 and above) with the same variable.

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