Human Rights for The Elderly Group in Indonesia: Elderly in The Era of Covid 19

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Abstract. The 1945 Constitution essentially guarantees that every citizen in national development in all aspects of life "promotes general welfare and social justice". Among the achievements of general welfare is the realization of better public health. The implication is that the life expectancy of the Indonesian population is increasing and the number of elderly or elderly people is increasing. However, the bad news regarding the Coronavirus Disease-19 (Covid-19) pandemic is that the elderly are vulnerable to being exposed to Covid-19. The data from the World Health Organization (WHO) shows that more than 95% of deaths occur at the age of 60 years or older (WHO, 2020). How is the elderly social protection provided by the government and society's elderly social institutions during the Covid-19 pandemic, and what is the urgent need for these elderly social institutions in protecting the elderly during the Covid-19 pandemic? The methodology in this study uses a mixed method rapid study approach. Creswell interprets it as a research method characterized by the collection of quantitative data in the first stage, then followed by the collection and analysis of qualitative data in the second stage in order to support the results of the quantitative research conducted in the previous stage. The conclusion of this study states that the elderly have the right to obtain maximum protection. Ministry of Social Affairs R.I. as a government mandatory for the realization of the welfare of the elderly has an important and strategic role in this. For this reason, the Ministry of Social Affairs needs to continue to develop policies for the protection of the elderly according to contemporary dynamics. The study is an important instrument for developing policies, in this case the protection of the elderly. In this regard, the Center for Social Welfare Research and Development views the urgency of conducting a study on "Social Protection of the Elderly during the Covid-19 Pandemic in Government and Community Elderly Social Institutions" as an information and input for the development of the intended elderly protection policy.

Keywords: Human Rights, Elderly, Covid 19
Introduction

The essence of Indonesia's national development in all aspects of people's life is to "promote public welfare and social justice" (Preamble to the 1945 Constitution). Among the achievements of general welfare is the realization of better public health. The implication is that the life expectancy of the Indonesian population is increasing and the number of elderly people is increasing.

Indonesia is entering the aging population, marked by the increasing percentage of Indonesia's elderly population which reached 25.66 million people (9.60%); Elderly men 47, 65%, and women 52,35%; Young elderly, aged 60-69 years (63.82%), middle age, aged 70-79 years (27.68%), and elder elderly, aged 80 years and over (8.50%); Lives in urban areas 52.80%, and in rural areas 47.20% (BPS, Susenas March, 2019). According to BPS projections (2015-2045), the life expectancy of the Indonesian population increased from 69.8 years (2010) to 73.4 years (2020), and will increase again to 75.5 years in 2045.

Those data illustrate the positive achievements of the implementation of development, especially in the health sector, which has been carried out by the government so far with the availability of health infrastructures that continue to grow and get better, in terms of both quantity and quality, starting at the village/ward level to the central level. In addition, there is also the availability of necessities which are intended for the elderly population through various programs, such as: family support, emergency social services for the elderly, day care services, tough elderly services, posyandu/ posbindu for the elderly, and the development of elderly friendly areas, including the availability of nursing home-based services for the elderly.

However, the bad news, related to the Coronavirus Disease-19 (Covid-19) pandemic, is that the elderly are vulnerable to Covid-19. The data from the World Health Organization (WHO) shows that more than 95% of deaths occur at the age of more than 60 years or older (WHO, 2020). Cases exposed to Covid-19 in Indonesia continue to grow and experience a significant increase from time to time, and it is not yet known when it will end. As stated. The elderly population is the group most at risk of contracting COVID-19 because with increasing age, there will be an increasing tendency to be sick, and to have physical limitations (disables) as a result of a drastic decrease in physical abilities. In line with this
thought, according to Kusumastuti, the Covid-19 pandemic increases the risk of elderly vulnerability because limited mobility due to the stay at home policy that makes it difficult for the elderly to access basic services such as health services. In addition to the limited access of the elderly to other social protection, such as earning income, the elderly are more vulnerable to economic shocks. The position of the elderly who are very vulnerable certainly needs protection.

There are several patterns of residence for the elderly in Indonesia, with the majority being with three generations (40.64%), with their family (27.30%) and only living with their spouse, amounting to 20.03%, while those who live alone are 9.38% (Seftiani, 2020). Elderly people, whoever they live with, actually have a fairly high vulnerability to being exposed to Covid-19 because of their physical condition. The position of the elderly who are very vulnerable certainly needs protection. Elderly people living in elderly social institutions, such as: Elderly Social Rehabilitation Centers and Workshops (Balai-LokaRSLU) are organized by the Central Government.

The Elderly Rehabilitation Social Institution (PSRLU) which is managed by the Regional Government, and the Elderly Social Welfare Institution (LKS-LU) which is organized by the community, play an important role in protecting the elderly, especially during the Covid-19 pandemic. Through the social protection they provide, the elderly are expected to continue to enjoy their lives with dignity and prosperity.

The creation of conditions for the elderly who are dignified and prosperous is a shared responsibility of the government and the community. Law Number 13 of 1998 concerning the Welfare of the Elderly mandates that efforts to improve the social welfare of the elderly are basically the preservation of the nation's religious and cultural values. The government is tasked with directing, guiding, and creating a supportive atmosphere for the implementation of efforts to improve the social welfare of the elderly (Article 7). The community has the broadest rights and opportunities to play a role in efforts to improve the social welfare of the elderly (Article 22, paragraph 1).

Many studies on the protection of the elderly have been carried out by various parties. However, studies on the protection of the elderly during the Covid-19 pandemic have not been widely carried out. To that end, the Center for Research and Development of Social Welfare, Ministry of Social Affairs, R.I. considers it
important to carry out this study, both in elderly social institutions organized by the Government (Central, Regional) and those carried out by the community. Therefore, based on the background of the problem above, the problems of this study are formulated as follows: How is the protection for the elderly organized by the government and society's elderly social institutions during the Covid-19 pandemic? and what is the urgent need for these elderly social institutions in protecting the elderly during the Covid-19 pandemic?

This study approach was mixed method. Creswell (2009) interprets it as a method characterized by the collection of quantitative data in the first stage, then followed by the collection and analysis of qualitative data in the second stage in order to support the results of the quantitative research conducted in the previous stage. A quantitative approach was used to determine the protection of elderly social institutions, especially during the Covid-19 pandemic (a study was conducted from February to September 2020). Meanwhile, a qualitative approach was used to obtain in-depth information about the protection of the elderly that had been obtained quantitatively.

The target of the study was determined purposively, namely the elderly social institutions of the Government and the Community. Because in the situation and condition of the Covid-19 pandemic, where not all elderly social institutions accepted outsiders (guests), the chosen elderly social institutions were those which were in the green zone and were willing to accept guests, and also could be reached by road trip. Quantitative data were analyzed descriptively, and qualitative data were analyzed through the following processes: data reduction, data display, and conclusion drawing, as enrichment of previously obtained quantitative data.

Discussion

Social protection is an actual issue today. It is a broad concept and develops along with the dynamics of society. In the context of Indonesia, prior to the 1997 economic crisis period, social protection had not been part of the government's priorities. The 1997-1998 economic crisis, which created a multidimensional crisis and also caused many Indonesians to fall into poverty, provided awareness about the vulnerability of Indonesia's economic condition, as well as the
importance of social protection for the entire population. Since then, Indonesia has had a social protection system that began with the national Social Safety Net (JPS) policy. The social protection system, which consists of social security and social assistance programs, continues to develop.

The International Labor Organization (ILO) (1984) argues that social protection is a system provided through a series of public policies to minimize the impact of economic and social shocks that can be caused by loss or decrease in income as a result of illness, pregnancy, work accidents, unemployment, disability, old age, or death. The World Bank, in its Social Protection and Labor Strategy document, states that social protection includes social safety nets, investment in human resources, and efforts to overcome social segregation. Social protection must consider the real situation and focus more on prevention, not on symptoms and consequences.

Meanwhile, the Asian Development Bank (ADB) defines social protection as a set of policies designed to reduce poverty and vulnerability through efforts to improve the population's capacity to protect themselves from disasters and loss of income. Social protection includes at least five elements, namely social insurance, social assistance, community protection with micro schemes and area-based schemes, labor market, and child protection (Ortiz, 2001). According to Law Number 13 of 1998 concerning the Welfare of the Elderly, social protection is an effort by the government and/or the community to provide easy services for the elderly with no potential in order to realize and enjoy a reasonable standard of living.

Cuddy etc. (2006: 11) state: “... social protection could be described as all public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks, and enhance the social status and rights of marginalised groups within any given country.

Meanwhile, Sinaga in the Introduction to the Book "Reformulating Social Security Back to Basic Principles" by Vladimir Rys, 2011, states that social protection is usually understood as an integrated intervention by various parties to protect individuals, families, and communities from various life risks of daily activities that may occur or to cope with various impacts of economic shocks, or to provide support for vulnerable groups in society.
Suharto defines social protection as all initiatives, whether carried out by the government, private sector, or the community, to realize the transfer of income or consumption to the poor, to protect vulnerable groups against livelihood risks, and to improve the social status of marginalized groups.

Based on some of the definitions above, the operational definition of protection for the elderly during the Covid-19 pandemic referred to in this study is all efforts/forms of prevention, both carried out by the government and the community, in order to protect the elderly from various risks, especially health, social aspects, and the economy, which may happen as the result of the Covid-19 pandemic.

Various efforts to protect the elderly are carried out by various parties, both the government and the community, in an effort to meet the needs of the elderly, so that they can enjoy their lives with dignity and prosperity. According to Netting (1993), the needs of the elderly include survival needs, namely: food, clothing, housing, health care; safety and security needs, namely protection from things that are dangerous and violent; social needs, namely the opportunity to interact in a positive environment; esteem needs, namely: opportunities to build self-esteem (feeling respected) and achieve dignity, and self-actualization needs, namely opportunities for continuous education and self-development.

Based on these limitations, the needs of the elderly referred to in this study are the basic needs of the elderly, especially those related to the needs of health, social and economic protection.

The elderly referred to in this study is someone who has reached the age of sixty and above (Permensos. Number 5 of 2018). On the basis of that understanding, the elderly referred to in this study is someone who is aged sixty years and over, and socially and economically needs the intervention of other parties.

Coronavirus Disease 2019 (Covid-19) is a disease caused by a new type of coronavirus, namely Sars-CoV-2, which was first reported in Wuhan China on December 31, 2019. This Covid-19 can cause symptoms of acute respiratory disorders such as fever above 38°C, coughing and shortness of breath for humans. In addition, it can be accompanied by limp, muscle aches, and diarrhea. In severe cases of Covid-19, it can cause pneumonia, acute respiratory syndrome, kidney failure and even death. Covid-19 can be transmitted from human to
human through close contact and splashes of liquid when sneezing and coughing (droplets), not through the air. The shape of Covid-19 when viewed through an electron microscope (respiratory fluid/throat swab) and depicted again the shape of Covid-19 is like a virus that has a crown.

**Vulnerable Groups in Handling Covid 19**

According to HelpAge International, the issue of violence against elderly women is often ignored, so it is necessary to raise awareness to prevent and overcome acts of gender-based violence. Violence against women, including the elderly, during the coronavirus disease pandemic tends to increase. Therefore, special prevention and treatment efforts are needed for elderly women, because generally they are more vulnerable than elderly men.

Elderly women have the potential to experience violence, neglect, and double discrimination because of their status as women, and with the limitations they have as they age. In an effort to pay attention to elderly women in particular, and the elderly in general, the Ministry of Women's Empowerment and Child Protection (Kemen PPPA) of the Republic of Indonesia compiled a "Guideline for the Protection of the Elderly with a Gender Perspective during the COVID-19 Period". Under the coordination of the PPPA Ministry, the handling is directed at protecting elderly women in particular, and the elderly in general, from acts of violence, neglect, and discrimination due to the disease pandemic.

Disability has several types; physical disability, mental disability and multiple disabilities. According to BPS data in 2018, people with disabilities aged 2 years and over are quite high at 37,137,518 people of which more than half are women. With a variety of disabilities, some people with disabilities cannot apply social distancing and psychological distancing rules because their health requires assistance or assistance from other people, which means they must always interact with other parties to carry out their activities. Persons with disabilities also have difficulty in getting access to information on Covid 19 because the currently available socialization has not taken into account the special needs of disabilities, etc.

**Third Vulnerable Group of Elderly**

In this study, the author focuses on discussing the third vulnerable group, the elderly, because they are more vulnerable in health, economic and social aspects.
due to increasingly limited mobility during this pandemic. In the data on deaths due to covid 19 released by the covid 19 task force above, it can also be seen that the death rate due to covid 19 is higher in the elderly, ironically, more than 80% of the elderly still do not have access to minimum income assistance/pensioners, thus making them vulnerable to economic turmoil as a result of the covid 19 pandemic. The elderly also experience limited mobility. Their condition is more vulnerable to being affected by covid 19, thus requiring them to stay at home more even though it can lead to increased depression, fear, and feelings of helplessness.

**The fourth vulnerable group with Congenital Diseases (Komorbit)**

Based on data from the Covid 19 Handling Committee and the latest National Economic Recovery (covid 19), the most common congenital diseases found in COVID-19 cases are heart disease (17.7%), hypertension (50.4%), pregnant women (9.2%), chronic lung disease (7%), kidney disease (5.1%), respiratory disease (3.2%), asthma (3.1%), and diabetes mellitus (9.5%). So that comorbidities can make the clinical symptoms of Covid 19 worse due to decreased organ function so that the resistance in people who suffer from the disease above makes the immune system low compared to people who have DM or high blood pressure.

The informal economy sector refers to all economic activities by workers and economic units which in law or in practice is not adequately covered by formal arrangements. The majority of all informal workers are exposed to higher occupational safety and health risks, but they do not receive social protection or other formal arrangements.

**Handling Of The Elderly In The Time Of The Covid Pandemic**

In this section, the results and discussion of the implementation of elderly protection carried out by the Government and the Community elderly social institutions are presented during the Covid-19 pandemic. As is known, physically the elderly were vulnerable to being exposed to Covid-19. For this reason, social institutions for the elderly had an important role in protecting the elderly so that they were protected from Covid 19. The role was in terms of prevention efforts both socio-economically and healthily.
Prevention of health aspects started from the application of health protocols, providing health services, and conducting rapid tests for the elderly and officers. In addition, the personal hygiene of the elderly and their environment was no less important. Meanwhile, socio-economic prevention was also carried out. So that they were not affected socio-economically, social assistance was provided in various forms. Before describing the results of the study and discussion, the characteristics of the respondents were first stated.

In an effort to protect the elderly during the Covid-19 pandemic, elderly social institutions were required to be adaptive (adjust) to the current conditions. Overall, in the elderly social institutions of the Central Government, Regional Government, and the Community, adjustments had been made to activities, especially in the health sector by implementing health protocols, infrastructure and working hours for employees/officers. This change was important to do, so that all beneficiaries and employees/employees/officers were protected from Covid 19. The implication of changing activities at these elderly social institutions was that budget changes were unavoidable.

**Conclusion**

The elderly as a vulnerable group exposed to Covid-19, have the right to get protection. The occurrence of the Covid-19 pandemic which was not previously predictable requires all parties, especially elderly social institutions, both those organized by the Government (Central, Regional) and the community, to adapt to these conditions. In an emergency situation – the Covid-19 pandemic, elderly social institutions were required to make adjustments to the current conditions. Changes in institutional activities were unavoidable, especially the implementation of health protocols with all their needs. In addition, social assistance was an important part of social institutions for the elderly, as an integral part of prevention efforts so that beneficiaries are protected from Covid-19. The current Covid-19 pandemic is referred to by many as a period of emergency because the spread is very powerful and worrying for everyone, including the elderly, and those identified as vulnerable groups exposed to Covid-19. Elderly people have the right to get maximum protection. Ministry of Social Affairs R.I. as a government mandatory for the realization of the welfare of the elderly has an important and strategic role. For this reason, the Ministry of Social Affairs needs to continue to develop policies for the protection of the elderly according
to contemporary dynamics. The study is an important instrument for developing policies, in this case the protection of the elderly. In this regard, the Center for Research and Development of Social Welfare views the urgency of conducting a study on "Social Protection of the Elderly during the Covid-19 Pandemic: In Government and Community Elderly Social Institutions" as information and input for the development of the intended elderly protection policy. The results of the study show that prevention efforts from being exposed to Covid-19 were not only the application of health protocols in the implementation of activities for the elderly and employees at these elderly social institutions, but social assistance was also important in order to ease the burden on the elderly social institutions, especially for those held by society. In addition, in order for the protection of the elderly during the Covid-19 pandemic to be maximal, it was necessary to know the needs of these elderly social institutions, both urgent needs and priority needs.

Bibliography

Badan Pusat Statistik, Statistik Penduduk Lanjut Usia 2019. Jakarta: Badan Pusat Statistik, 2019.

Bogdan & Taylor, Metodologi Penelitian Kualitatif. Bandung: Remaja Karya. 1975.

Cuddy, Michael. etc., Statistik Penduduk Lanjut Usia 2019. Jakarta: Badan Pusat Statistik, 2019.

Farida, Umma, H. Hardivizon, dan Abdurrohman Kasdi. “Menyingkap Maqasid Profetik dalam Hadis tentang Relasi Laki-Laki dan Perempuan.” AL QUDS : Jurnal Studi Alquran dan Hadis 5, no. 2 (30 November 2021): 819–42. doi:10.29240/alquds.v5i2.3319

Hardivizon, Hardivizon, Mhd Sholihin, dan Anrial Anrial. “Relasi Agama dan Pilihan Nasabah: Grounded Theory dan Reposisi Agama pada Pilihan Nasabah Bank Syariah di Bengkulu.” Turast : Jurnal Penelitian dan Pengabdian 4, no. 1 (2016): 1–19. doi:10.15548/turast.v4i1.306.
Kementerian Perencanaan Pembangunan Nasional/Badan Perencanaan Pembangunan Nasional, Perlindungan Sosial di Indonesia: Tantangan dan Arah ke Depan. Jakarta: Direktorat Perlindungan dan Kesejahteraan Masyarakat. 2014.

Kementerian Sosial R.I., Peraturan Menteri Sosial RI. Nomor 5 Tahun 2018 Tentang Standar Nasional Rehabilitasi Sosial Lanjut Usia. Jakarta: Kemensos, 2018.

Miles, Mathew B., and A. Michael Huberman, Qualitative data Analysis: A Source book of New Members. Beverly Hills, CA: SAGE, 1984.

Rys, Vladimir, Merumuskan Ulang Jaminan Sosial, Kembali Ke Prinsip-Prinsip Dasar. Beverly Hills, Jakarta: Pustaka Alvabet, 2010.

Rahayu, K.S, Recommendations in the PRAKARSA Webinar “Social Protection For The Elderly In the COVID-19 Pandemic, Beverly Hills, Jakarta: TNP2K, 2020.

Seftiani, S., Lansia dalam Situasi Pandemik Covid-19. Jakarta: LIPI, 2020.

Sugiyono, Metode Penelitian Kombinasi (Mixed Methods). Bandung: Alfabeta, 2012.

Suharto, Edi, Kemiskinan dan Perlindungan Sosial di Indonesia Menggagas Model Jaminan Sosial UniversalBidang Kesehatan, Bandung: Alfabeta, 2009.
