

Volume 7, Issue 2, November 2024

Page 225–238

Navigating the choice: Family decision-making for elder care in urban Indonesia's Panti Werdha

Shinta Julianti¹, Fahlesa Munabari^{2*}

¹Department of Sociology, Universitas Jenderal Soedirman, Jl. Profesor DR. HR Boenyamin, Brubahan, Kabupaten Banyumas, Jawa Tengah, Indonesia 53125 ²National Resilience Studies, School of Strategic and Global Studies, Universitas Indonesia, Jl. Salemba Raya No.4, Daerah Khusus Ibukota Jakarta, Indonesia 10430 ²Department of International Relations, Universitas Budi Luhur, Ciledug Raya, Petukangan Utara, Daerah Khusus Ibukota Jakarta, Indonesia 12260

*Corresponding author E-mail address: fahlesa.wisa41@ui.ac.id DOI: https://doi.org/10.21107/sml.v7i2.27247

ARTICLE INFO	ABSTRACT
<i>Keywords:</i> elderly care <i>Panti Werdha</i> nursing homes decision-making process rational choice theory	This study investigates the decision-making processes of upper-middle-class families in Jakarta, Indonesia, when choosing elder care facility (<i>Panti Werdha</i>) for their elderly parents. Utilizing the Rational Choice perspective, the research examines how these families navigate cultural and religious values while considering individual preferences and family dynamics. This qualitative case study explores the experiences of three families consisting of upper-middle-class families who have entrusted the care of their elderly relatives to <i>Panti Werdha</i> . It analyzes the negotiation stages among family members, particularly between children and their elderly parents. The study seeks to understand how these families balance material and moral considerations while adhering to societal norms, ultimately questioning whether their choices are truly rational. It reveals that the decision-making process is a complex negotiation involving rational choices, weighing material and moral benefits, and ultimately driven by the desire to minimize burdens and ensure the elderly's autonomy and well-being. The study identifies a shift in values among these families, suggesting that traditional models of family care are evolving, with nursing homes becoming a more acceptable option for the elderly and their families.

Citation suggestion:

Julianti, S., & Munabari, F. (2024). Navigating the choice: Family decision-making for elder care in urban Indonesia's Panti Werdha. *Simulacra*, 7(2), 225–238. https://doi.org/10.21107/sml.v7i2.27247

Received 20 August 2024; Received in revised form 9 September 2024; Accepted 15 September 2024; Published online 25 November 2024.

Introduction

It is argued that although the elderly make up only about 7% of the world's population, this number is expected to double by the year 2050 (Mégret, 2010, p. 2; Peláez & Kalache, 2001, p. 5). Interestingly, the proportion of the elderly is higher in the Asian region (Tsuno & Homma, 2009, p. 3). According to data from the WHO, as cited in an article published by the Ministry of Health of the Republic of Indonesia in 2013, the elderly population in Asia is predicted to reach 17.1% of the total population by 2030. This condition is attributed to the declining birth rate and increasing life expectancy. The data shows that since 2015, Indonesia has been classified as a country with an aging population, as the number of residents aged 60 and over has exceeded 6% (Central Agency of Statistics, 2015). The number of aging individuals has also increased year by vear.

The increase in the number of elderly individuals reflect rising life expectancy, indicating success in the development of the health sector, including advancements in health technology and services. Additionally, public awareness of maintaining health has also increased. While the rise in life expectancy, resulting in a larger elderly population, presents potential benefits, it also poses challenges for national development. The elderly can be seen as a community group that can continue to participate, remain active, and even be productive with support from society and family (Mégret, 2010, p. 6). Nonetheless, the presence of the elderly can also be perceived as a burden and is susceptible to negative stereotypes and marginalization (Greer et al., 2007, p. 242). Whether the elderly are viewed as a potential or a challenge is fundamentally influenced by internal factors related to their health conditions and competencies. Additionally, external factors, such as the

values and socio-cultural norms regarding the status and roles of the elderly in society, also play a role. This includes perceptions of social and cultural constructions about the elderly and the roles expected of them.

In general, Indonesian society adheres to Eastern cultural values that position the elderly as family and community members who must be respected and valued. In Eastern cultures, there is a tendency to emphasize the needs of the group above those of the individual, placing importance on shared responsibility, collaboration, and maintaining social peace (Ramesh et al., 2017, p. 207). When individuals enter old age, cultural and religious values ensure their protection and care. Through the existing kinship system, their children and extended family are obligated to respect, appreciate, and provide love and attention to their parents (Setiti, 2006, p. 13). Respect for the elderly is demonstrated through their roles as decision-makers, preservers of culture or tradition, advisors, and participants in the upbringing or care of their descendants, especially grandchildren or great-grandchildren. (The responsibility of families in caring for the elderly remains dominant in Indonesia. Interestingly, data from The National Social-Economy Survey (Susenas or Survei Sosial Ekonomi Nasional) indicates that 60.71% of elderly individuals still hold the status of head of the household. The presence of elderly individuals as heads of households suggests their active role within the family. However, it can also be seen as a form of recognition and social appreciation (Central Agency of Statistics, 2018, p. 16).

Family support plays a crucial role in the quality of life of the elderly. In Asia, particularly in countries like Japan, Taiwan, and Singapore, the fulfillment of the needs of the elderly is often centered around the family, which is considered primarily responsible for ensuring their welfare.

While the specific reasons for relocating elderly individuals to elder care facilities may differ from family to family (Sun et al., 2021), research by Chou and Chi (2007, p. 183) suggests that older adults in Hong Kong generally anticipate their families will provide care for them in their later years. However, while family support is essential, it is not sufficient on its own; the government also bears responsibility through various policies and public services. Families are ideally suited for caring for the elderly, but there are many cases where they are unable to provide adequate support, both materially and non-materially (Dong et al., 2020; Maeda, 2013, p. 32). The Head of the National Population and Family Planning Agency (BKKBN), Surya Chandra Surapaty, has emphasized that there have been missteps in how the elderly are treated within families. Many families still hold the stigma that views the elderly as unproductive and weak. This stigma influences the treatment of elderly parents, who are often not respected or given the opportunity to improve their quality of life simply because of their age (Sutrivanto, 2016).

The readiness of families to provide support for the elderly is influenced not only by family structure, but the diminishing culture of etiquette towards elders also hinders the provision of support for the elderly (Andesty et al., 2018, p. 170; Sholicati, 2017, p. 17; Syamsuddin & Santi, 2018, p. 215). This shift in societal values is reflected in the attitudes and behaviors of the younger generation, such as: when meeting older individuals, young people do not greet them, do not allow older people to walk ahead, do not prioritize the needs of the elderly, and tend to prioritize their own work over accompanying the elderly to medical appointments, among other things. This indicates a decline in the culture of respect towards the elderly, and there is

even a tendency toward apathy and a lack of appreciation for the elderly.

In various societies, such as those in Europe, the responsibility for elderly care is not placed solely on children and families. It is common and considered reasonable for elderly care to be provided in Panti Werdha. The term refers to a residential care facility designed specifically for elderly people, similar to what might be known as a nursing home or retirement home in Western contexts. These institutions provide shelter, care, and support for older adults who may not have family members to look after them or require special care that cannot be administered at home. Panti Werdha is also recognized by the Ministry of Social Affairs of the Republic of Indonesia, which emphasizes that efforts to support the elderly in improving their quality of life can be carried out not only by families but also through services provided by Panti Werdha (Ministry of Social Affairs of the Republic of Indonesia, 2014) According to (Handajani, 2012, p. 21),

Panti Werdha is an option and solution to social changes regarding elderly care. The existence of Panti Werdha in Indonesia appears to be increasingly accepted by society, as indicated by data from the Ministry of Social Affairs showing a rise in the number of facilities, from 186 elder care facilities in 2002 to 444 by 2010 (Ministry of Social Affairs of the Republic of Indonesia, 2010). The provision of elderly care services through Panti Werdha is managed both by the government and by private or community sectors. An important consideration regarding private Panti Werdha is whether they function as business entities or social institutions. It is undeniable that some Panti Werdha are developed as business service units targeting middle to upper-class segments of society. These private facilities strive to provide elderly care services with complete and adequate facilities so that the elderly can enjoy their retirement years.

Employing the theoretical perspective of Rational Choice Theory, this study explores how upper-middle-class families in Jakarta, Indonesia, decide on placing their elderly parents in elder care facilities. It highlights that the decision is influenced by family dynamics, such as marital status and family structure, rather than the number of siblings. The study reveals a shift in values, with families and elderly individuals preferring elder care facilities for privacy and autonomy, indicating that elder care does not necessarily require cohabitation or traditional family involvement.

Method

Research on the decision-making process for elderly care in *Panti Werdha* employs a qualitative approach because the social phenomenon of how upper-middle-class families decide on elderly care requires indepth study and understanding. The type of research used in this study is a case study, as it focuses on the decision-making process of upper-middle-class families who are economically capable of providing care within the family but choose to use *Panti Werdha*.

The category of informants as a unit of analysis in this study consists of uppermiddle-class families who have entrusted the care of their elderly relatives to *Panti Werdha*. The elderly individuals cared for in the facility are still active, capable of communicating effectively, engaging in activities, and maintaining an active lifestyle. Informants were selected from a private *Panti Werdha* (referred to here as STW) located in Cibubur, East Jakarta District, Jakarta, Indonesia.

The criteria for selecting informants are individuals who can effectively provide information relevant to the issues and phenomena addressed in this research. To identify suitable informants, a snowball sampling technique is employed. The categories of informants in this study are as follows: 1) The elderly as core informants, who are residents of *Panti Werdha*, and; 2) The children as supporting informants, who have the closest relationship with the elderly, possess a strong emotional bond, and are traditionally seen in Indonesian society as most responsible for their parents' care, thereby aligning with the family-oriented category.

The data gathered were then compiled, verified, and analyzed using the Rational Choice Theory as a tool of analyses to help answer the research question of this study. Particularly, the data that have been compiled and verified, that are discussed in the following section, were analyzed to answer the following group of questions: 1) What are the decision-making patterns in the Elderly's Families of this study? 2) What are the relationships between the elderly and their families? and 3) What are the family support patterns for the elderly in the elder care facilities?

Results and Discussion

Decision-making patterns in the elderly's families

Decisions regarding elderly care within families are influenced by factors such as ethnicity, socioeconomic status, and geographical location (Caron & Bowers, 2003, p. 55; Dilworth-Anderson & Gibson, 2002, p. 557; Gaugler et al., 2003, p. 221). Meanwhile, other scholars found that healthrelated decisions concerning elderly care are affected by the severity of illness, education, gender, and family expectations (Clark et al., 2001, p. 3; Johnson et al., 2010, p. 359; Pinquart & Sörensen, 2006, p. 33). Among the three families of elderly individuals who served as informants in this study, all decided to care for their elderly relatives

in Panti Werdha and came from an uppermiddle-class socioeconomic background. This is evident from the material resources they possess; all three elderly individuals receive pensions, own their homes, and hold bachelor's degrees. Similarly, most of their children are educated and employed, and they also have their own residences. This contrasts with the findings of (Gaugler et al., 2005, p. 2099; Kwon & Tae, 2012, p. 145; McFall & Miller, 1992, p. 574) who discovered that the decision to place elderly individuals in *Panti Werdha* was primarily due to families lacking the capacity to care for them at home. Additionally, in terms of geographical location, the three families of elderly informants reside in urban areas, which is different from rural communities that tend to care for elderly individuals within the family setting.

Regarding gender in decision-making patterns, there is a noticeable difference between elderly men and elderly women. Elderly men provide reasons for deciding to live in *Panti Werdha*, primarily because they no longer wish to be involved in family matters. For example, Grandpa An stated that he chose to live in *Panti Werdha* because he did not want to interfere in his children's affairs, feeling that it was no longer his place to be involved in their family issues. Another reason Grandpa An opted to stay in *Panti Werdha* is that he believes his responsibilities were fulfilled once all his children got married. Furthermore, Grandpa An prefers not to meddle in his children's family lives (Informant Grandpa An, interview at STW on Friday, January 12, 2019).

The elderly female informants, Grandma Al and Grandma Rs, expressed that their decision to live in Panti Werdha was motivated by their desire not to burden their children and to have a private space. Grandma Al mentioned that while living in her children's home, she felt like she was inconveniencing them (Informant Grandma Al, interview at STW on Thursday, January 10, 2019). Meanwhile, Grandma Rs explained that her reason for living in Panti Werdha is that she feels she cannot freely engage in activities at home when living with her children. She also feels more comfortable in a place that offers her privacy (Informant Grandma Rs, interview at STW on February 21, 2019).

The background of families caring for the elderly in *Panti Werdha* is influenced by issues such as economic difficulties, conflicts with in-laws, elderly parents complaining of loneliness, lack of housing, children feeling burdened, and changes in the emotional dynamics between parents and children (Silverstein et al., 2006, p. 1070). One of

Decision-Making Patterns in Families	Informant's Family		
	Grandma Al	Grandpa An	Grandma Rs
Background for the Decision to Live in <i>Panti</i> <i>Werdha</i>	 Feeling restricted Feeling like a burden to the children Feeling lonely 	 Feeling that responsibilities within the family are complete Avoiding conflict Feeling a decline in emotional well-being 	 Feeling restricted Feeling lonely and bored
Reasons for Deciding to Live in <i>Panti Werdha</i>	 Availability of private space Presence of peers Availability of facilities and activities Opportunity to socialize and participate in activities 	 Not wanting to be involved in family matters with his children Enjoying retirement Being able to socialize and participate in activities 	 Availability of private space Presence of peers Ability to socialize and participate in activities Better health monitoring

Table 1. Decision-Making Patterns for Living in an Elder Care Facility (Panti Werdha)

the factors contributing to the informants' decision to care for the elderly in *Panti Werdha* is the loneliness experienced by Grandma Rs, even while living with her children. This sense of loneliness arises because her children are busy with work, and she finds it challenging to communicate with her grandchildren (Informant Grandma Rs, interview at STW on February 21, 2019).

The findings of Amalia (2013, p. 205) research indicate that loneliness and social isolation are issues faced by the elderly. From a sociological perspective, the elderly experience a reduction in social relationships due to changes in their social roles. While conflicts within the family are not the primary reasons for these issues, they do contribute to the situation, as experienced by Grandpa An. He chose to live in Panti Werdha to avoid conflicts with his children because he felt an emotional change that made him more sensitive to situations that could lead to conflict, such as seeing a grandchild being scolded or witnessing arguments between his children and their spouses. Given these circumstances, Grandpa An felt that he could no longer tolerate such situations; on the other hand, he also realized that he could not intervene too much, so he believed it was better to withdraw (Informant Grandpa An, interview at STW on Friday, January 12, 2019).

Grandma Rs also feels that living in *Panti Werdha* is healthier and better controlled compared to living at home (Informant Grandma Rs, interview at STW on February 21, 2019). From the family perspective, the information gathered from the children regarding the background of caring for the elderly in *Panti Werdha* indicates that the decision was made to honor the wishes of the elderly themselves for the benefit and happiness of their parents, considering a safe and comfortable environment with good facilities. As expressed by Et and Eu (the children of Grandma Al), they decided to care for their mother in *Panti Werdha* because it was Grandma Al's own wish. They hope that fulfilling Grandma Al's wishes will contribute to her happiness and well-being. Additionally, another consideration is that the environment in *Panti Werdha* is quite safe, with available health facilities, nutritious meals, peer companionship, and various activities to participate in. Meanwhile, at home, there is no one to look after her, and the children and grandchildren are busy with their own activities (Informant Et, interview at STW on October 26, 2018; Informant Eu, interview at STW on October 26, 2018).

Similarly, R (the child of Grandpa Al) decided to care for the elderly in *Panti Werdha* because she believed that every decision made by Grandpa Al was based on logical reasoning, making it difficult for the children to argue against it. These logical reasons were acceptable to his children, as Grandpa An believed that once his children had families of their own, his responsibilities were fulfilled, and he did not want to go through the burdensome phase again, as he did when raising his children in the past (Informant R, interview by phone on January 13, 2019).

Relationship patterns between the elderly and their families

According to the findings of Setiti (2006, p. 20) living arrangements influence the relationship between the elderly and their families based on cultural values. However, in this study, the relationship between the elderly and their families shows differences not based on cultural values, but rather on distance, time, and location. The communication patterns and relationships within the families of the three elderly individuals changed after they moved to *Panti Werdha*, primarily due to a decrease in the frequency of visits. Additionally, among the three elderly informants, there are varying degrees of closeness with each of their children. One child tends to maintain a closer and more frequent line of communication with the elderly.

communication The patterns and relationships established in Grandma Al's family after moving to Panti Werdha have changed; they now communicate more often via telephone and have fewer large family gatherings. When the extended family does gather, it usually takes place at the house of the second child (Csy) or at the home of the youngest daughter (Eu). Occasionally, some of the children and grandchildren also visit Panti Werdha (Informant Grandma Al, interview at STW on Thursday, January 10, 2019).

Grandma Al also stated that since moving to Panti Werdha, she has developed a closer relationship and communicates more frequently with Et and Eu. They were the ones who managed her admission process to Panti Werdha and continue to assist in meeting her needs more often. This is because Grandma Al's son is busy working, rarely at home, and feels more reserved around his wife. To maintain their closeness, they usually gather (Informant Grandma Al, interview at STW on Thursday, January 10, 2019). Similarly, Eu (Grandma Al's youngest child) stated that there is no difference in communication with Grandma Al. However, since Grandma Al moved to Panti Werdha, they have been communicating more frequently by phone to maintain their closeness (Informant Eu, interview at STW on Friday, October 26, 2018).

In Grandpa An's family, the relationship patterns with his family reflect differences in both quantity and method, especially after his children got married and he moved to *Panti Werdha*. Communication has decreased, and interactions now occur more frequently via phone and WhatsApp rather than in person. While he usually sees his children at least once a month, it is uncertain which child he will meet, as it depends on who has free time or specific needs. Grandpa An more often visits his children, either being picked up by them or having them arrange rides through Grab or Gojek. This arrangement is due to his children's busyness and limitations, in addition to Grandpa An feeling capable of going out on his own (Informant Grandpa An, interview at STW on Friday, January 12, 2019).

R also expressed that since starting her own family, her main priority has become her immediate family, which has limited her freedom to meet with Grandpa An compared to before she got married. The time spent with Grandpa An now prioritizes quality over quantity, focusing on specific moments, such as celebrating Grandpa An's birthday together (Informant R, interview via WhatsApp on April 25, 2019; Informant R, interview via phone on February 19, 2019). There is also а difference in communication within Grandma Rs's family before and after living in Panti Werdha. After moving to Panti Werdha, Grandma Rs meets her children only once a month, and even then, not all her children can come-only those who are available and have free time. The only exceptions are during holidays or when there are important matters to discuss; at those times, all her children will gather. Grandma Rs never takes the initiative to contact her children or request visits because she is afraid of disturbing their activities, something important unless there is (Informant Grandma Rs, interview at STW on February 21, 2019).

In addition, another difference after Grandma Rs moved to *Panti Werdha* is that the communication pattern has become more one-sided, and the time spent together with all her children has become rare, occurring only during holidays, days off, and Grandma Rs's birthday when they visit *Panti Werdha*. This is in contrast to when Grandma Rs lived outside of *Panti Werdha*,

Relationship Patterns of the Elderly with Their Family	Informant's Family			
	Grandma Al	Grandpa An	Grandma Rs	
Parties Involved in Communication and Visits	 Children communicate through the phone or through the staff at the <i>Panti Werdha</i>. Children visit the elder care facility. 	 The children and Grandpa An communicate through the phone or WhatsApp. Grandpa An visits the children's homes, either being picked up by his children or having a ride arranged through an online taxi service. 	 The children communicate via phone. The children visit the <i>Panti Werdha</i>. 	
Frequency of Communication and Meetings	 Communicate every week and meet at least once a month. Duration of visits to the <i>Panti Werdha</i> is more than five hours. 	 Communicate every week and meet at least once a month. Duration of visits to the children's homes can last a whole day, sometimes even overnight. 	 Communicate and meet once a month. Duration of visits is one to three hours. 	
Activities During Communication and Meetings	Chatting, checking health records, eating together, taking to the bank, and accompanying to medical check-ups.	Chatting and eating together.	- Chatting and discussing.	

Table 2. Relationship Patterns between the Elderly and Their Families

where communication was more two-sided and the frequency of meetings was higher. After Grandma Rs moved to *Panti Werdha*, In and his wife visit her regularly, at least once a month. There is no specific schedule imposed on the other children of Grandma Rs.

Family support patterns for the elderly in elder care facilities (Panti Werdha)

Family support for elderly care is influenced by education and economic status (Albertini et al., 2007, p. 320; Lee & Aytac, 1998, p. 427; Rossi, 1990, p. 955; Wolf et al., 1997, p. 102). Support from the three families that served as informants in this research indicates that there is a change in the form of support provided to the elderly when they move to *Panti Werdha*. Material support is primarily provided by Grandma Al's children after she moved to *Panti Werdha*, which includes paying the monthly fee of IDR 3,000,000 for her stay and covering other necessities such as medical check-ups, daily supplies, and food, since Grandma Al's pension is insufficient to meet her needs.

There is a difference in the support given by her children based on gender. The daughters provide more technical support and handle small daily needs, such as buying food, snacks, utensils, and other necessities. Meanwhile, the sons are more involved in making decisions regarding larger issues, such as where Grandma Al should be treated when she is sick (Informant Eu, interview at STW on October 26, 2018). Similarly, regarding Grandpa An, after moving to Panti Werdha, he never set a specific amount that his children should provide. Instead, his children calculate the monthly expenses based on Grandpa An's pension, and any shortfall is subsidized equally by all of Grandpa An's children. Each month, Grandpa An's children transfer the required amount of money to him, and any additional support is at their discretion. In contrast to Grandma Al's children, the three children of Grandpa An play similar roles in providing support (Informant Grandpa An, interview at STW on Friday, January 12, 2019).

The support provided to Grandma Rs by all her children is coordinated by her eldest child. Once collected, the support is handed over to Grandma Rs. Another form of support given by her children is the provision of a companion who helps and serves Grandma Rs to meet her daily needs, such as tidving her room, washing clothes, ironing, preparing meals, taking her to the hospital, and assisting with other activities, among other things. This companion has been arranged by Grandma Rs's children since 2016, when she was hospitalized due to anemia caused by inadequate food intake. Since then, a companion has been provided to assist Grandma Rs every day from 7:00 AM to 4:00 PM (Informant Grandma Rs, interview at STW on February 21, 2019).

The forms of support provided are both material and moral. However, after Grandma Rs moved to *Panti Werdha*, her family provided more support, both moral and material, compared to when she was still living at home. An example of material support includes assistance with living expenses and self-actualization, while moral support consists of providing special medical care when she falls ill. (Information from In, obtained through a WhatsApp message on Monday, March 4, 2019, and Wednesday, March 6, 2019).

The decision to choose elder care in an elder care facility is a process grounded in rational choice theory. Key elements of rational choice actions, as noted by (Coleman, 1994, p. 569), involve both the individuals making the decision and the resources available, engaging both the elderly and their families. While the decision to seek care in an elder care facility may be initiated by the elderly themselves, who have diverse backgrounds, it also involves other family members, such as children, in-laws, and grandchildren. Consequently, the final decision is the result of family discussions. This process aligns with the postulates of rational choice theory as described by Coleman (1994) and Lindenberg (1985) including the first postulate (P1), the second postulate (P2), and the third postulate (P3), which state that social phenomena are outcomes of individual decisions, actions, and attitudes; these actions can be comprehended; and they are influenced by individual rationales. In this case, although the decision regarding elder care in an elder care facility is a family decision, it ultimately stems from the actions and attitudes of individual family members, each with their unique backgrounds.

The resources available to each actor in the decision-making process also have

Family Support Patterns	Informant's Family		
	Grandma Al	Grandpa An	Grandma Rs
Forms of Support	Children	Children	Children
Parties Providing Support	Daughters	Youngest Child	Eldest Child
Parties That Often Provide Support	Not Specified	An agreed-upon amount is established; any additional support depends on the capacity of each child.	Not Specified
Methods of Providing Support	Each child immediately gave something to Grandma Al when visiting <i>Panti Werdha</i> .	Each child transferred to Grandpa An.	The first child handed over something to Grandma Rs when visiting <i>Panti Werdha</i> .

 Table 3. Family Support Patterns

an impact. In this study, the three families are categorized as middle class. Based on educational background, the majority of actors, including the elderly individuals themselves and their families, have at least a bachelor's degree, have jobs, live in urban areas, and own vehicles. Economically, the three elderly individuals receive pensions, so they do not rely entirely on their children to meet their needs. The networks and knowledge level of the elderly and their families also play an important role, as they can access information about elder care facilities through various sources, such as social networks, mass media (both print and electronic), the internet, and direct visits to the elder care facilities themselves. The three elderly individuals are still healthy, active, and productive, which are necessary conditions for registering as prospective residents of an elder care facility. Additionally, each elderly person has at least three family members who meet the criteria to act as responsible parties. This serves as an additional resource for the elderly and their families when registering as prospective residents of the elder care facility.

The rational choice of opting for elder care in an elder care facility involves actors weighing the costs incurred against the benefits gained, in accordance with the proportions of rational choice as described by (White et al., 2018, p. 48). This aligns with the postulates of rational choice theory, specifically the fourth (P4) and fifth (P5) postulates: actions are taken based on the actor's consideration of the outcomes they will receive, and in taking action, the actor focuses on the consequences that will affect them personally (Coleman, 1994). The three elderly individuals, as actors, believe that residing in an elder care facility offers more benefits, enabling them to lead a more comfortable and peaceful life in their later years. This lifestyle includes access to healthcare facilities, opportunities to

socialize with peers, and participation in various activities. Although they do not live with their families, this arrangement can be more relaxing as it prevents involvement in their children's family dynamics. Despite living apart from family, communication is maintained to preserve familial ties. This is consistent with Francis Ivan Nye's (1982) rational choice proposition, which suggests that actors will choose actions that offer longterm benefits when the cost-benefit ratio is equivalent.

Meanwhile, the family's consideration in choosing an elder care facility for the elderly is centered on the well-being of the parents who wish to live there. This decision is made with careful consideration of the elder care facility's safe and comfortable environment, quality facilities, and the family's financial capacity to cover the costs. The family also initiates an adaptation period to monitor the elderly's physical and mental health. All three families acknowledged that their decision to place the elderly in an elder care facility was primarily focused on the parents' happiness, despite facing negative views and responses from outsiders, such as accusations of being ungrateful or neglectful children. From a financial perspective, neither the elderly nor their families feel burdened, especially when considering the benefits of the facilities and services provided compared to living at home. This approach aligns with the sixth postulate (P6) of rational choice theory suggesting that actors will choose actions that minimize losses through a cost-benefit analysis (Coleman, 1994).

In addition to considering the material benefits and costs, the role and support of the family, as categorized by (Pepe et al., 2017, p. 37), remain evident even though the three elderly individuals no longer live with their families. These include: 1) Esteem support, which is maintained through regular communication via phone calls, WhatsApp, or direct visits to the elder care facility;

2) Instrumental support, which involves assisting with all activities and needs of the elderly in the elder care facility, such as financial aid, providing special services to tidy their rooms, buying food, doing laundry, and helping with other activities; 3) Informational support, where the elderly are kept informed about family events or important matters and receive updates on their health based on information from nurses and doctors; 4) Emotional support, which is provided by allowing the elderly to socialize or engage in activities of their choice without restrictions or pressure. Furthermore, the family consistently makes time to gather with children, in-laws, and grandchildren during holidays and special occasions, go on trips, share stories, and encourage the elderly to pursue their hobbies.

Conclusion

This study, viewed through the lens of the Rational Choice perspective, examined the decision-making patterns among uppermiddle-class families in Jakarta, Indonesia, in selecting an elder care facility, which is commonly referred to as Panti Werdha, which literally means Elderly Home, in Indonesia as a care facility for their elderly parents. This study found that various family backgrounds influence the decision-making process, including the marital status of the three elderly individuals, who are widowed, feeling lonely after losing their spouses. The three elderly families fall into categories of extended families (Grandma Al) and nuclear families (Grandpa An and Grandma Rs). This indicates that the number of siblings in a family does not affect elder care. This finding contrasts with studies by Gans & Silverstein (2006), Lorca & Ponce (2015), and Wolf et al., (1997), which emphasize that the number of siblings is a significant factor in caregiving for the elderly.

The decision-making patterns among the three families of informants revealed similarities in their reasons for choosing elderly care at *Panti Werdha*. These reasons include the provision of privacy, facilities, and activities that make the elderly feel more comfortable and allow them to enjoy their later years without interference from their children's families. This decision is based on a rational calculation by the elderly to achieve a goal rooted in certain values or preferences (Coleman, 1994; Lindenberg, 1985).

Among the three families with elderly members as informants, a shift in values was observed. All three families believe that caring for parents does not necessarily need to take place within the family home, and that devotion to parents does not always require living together. All three elderly individuals express a desire not to burden their children's families, and they feel it is no longer their role to be involved in their children's households. This sentiment is echoed in other studies that highlight a deliberate preference among elderly individuals to reside in elder care facilities (Kaufman, 1994, p. 57; Kellett, 1999, p. 1475; Reuss et al., 2005, p. 21).

Recommendations for future research are expected to delve deeper into studies on elderly issues and family issues, focusing more on intergenerational issues, particularly the communication problems between the elderly and their families or with different generations. Some practical recommendations for various related parties include the state, which runs government policies and programs related to the welfare of the elderly. In this context, the government should focus more on promoting awareness and supervising both state-owned and private institutions that provide elder care. Additionally, through its policies, the government should socialize with the community and families about care and services that promote the well-being of the elderly.

Declaration of Ownership

This article is our original work.

Conflict of Interest

There is no conflict of interest to declare in this article.

Ethical Clearance

This study was approved by the institution.

References

- Albertini, M., Kohli, M., & Vogel, C. (2007). Intergenerational transfers of time and money in European families: Common patterns—different regimes? *Journal of European Social Policy*, 17(4), 319–334. https://doi. org/10.1177/0958928707081068
- Amalia, A. D. (2013). Kesepian dan isolasi sosial yang dialami lanjut usia: Tinjauan dari perspektif sosiologis. *Sosio Informa*, 52849.
- Andesty, D., Syahrul, F., & Epidemiologi,
 D. (2018). Hubungan interaksi sosial dengan kualitas hidup lansia di unit pelayanan terpadu (UPTD) Griya Werdha kota Surabaya tahun 2017. *The Indonesian Journal of Public Health*, 13(2), 169–180. https://doi.org/10.20473/ijph. vl13il.2018.169-180
- Caron, C. D., & Bowers, B. J. (2003). Deciding whether to continue, share, or relinquish caregiving: Caregiver views. *Qualitative Health Research*, *13*(9), 1252–1271. https:// doi.org/10.1177/10497323032572
- Central Agency of Statistics. (2015). Central Agency of Statistics. *BPS*.
- Chou, K.-L., & Chi, I. (2007). The temporal relationship between falls and fear-offalling among Chinese older primarycare patients in Hong Kong. *Ageing*

& Society, 27(2), 181–193. https://doi. org/10.1017/S0144686X06005393

- Clark, J. A., Wray, N. P., & Ashton, C. M. (2001). Living with treatment decisions: Regrets and quality of life among men treated for metastatic prostate cancer. *Journal of Clinical Oncology*, 19(1), 72–80. https://doi.org/10.1200/JCO.2001.19.1.7
- Coleman, J. S. (1994). *Foundations of social theory*. Harvard university press.
- Dilworth-Anderson, P., & Gibson, B. E. (2002). The cultural influence of values, norms, meanings, and perceptions in understanding dementia in ethnic minorities. *Alzheimer Disease & Associated Disorders*, 16, S56–S63.
- Dong, X., Wong, B. O., Yang, C., Zhang, F., Xu, F., Zhao, L., & Liu, Y. (2020). Factors associated with willingness to enter care homes for the elderly and pre-elderly in west of China. *Medicine*, 99(47), e23140. https://doi.org/10.1097/ MD.00000000023140
- Gans, D., & Silverstein, M. (2006). Norms of filial responsibility for aging parents across time and generations. *Journal of Marriage and Family*, *68*(4), 961– 976. https://doi.org/10.1111/j.1741-3737.2006.00307.x
- Gaugler, J. E., Kane, R. L., Kane, R. A., Clay, T., & Newcomer, R. (2003). Caregiving and institutionalization of cognitively impaired older people: utilizing dynamic predictors of change. *The Gerontologist*, 43(2), 219–229. https://doi.org/10.1093/ geront/43.2.219
- Gaugler, J. E., Kane, R. L., Kane, R. A., & Newcomer, R. (2005). Unmet care needs and key outcomes in dementia. *Journal* of the American Geriatrics Society, 53(12), 2098–2105. https://doi.org/10.1111 /j.1532-5415.2005.00495
- Greer, C. R. H., Francis, P., & Davies, P. (2007). *Victims, crime and society*. Sage.
- Handajani, Y. S. (2012). Kelanjutusiaan global:

Kebijakan yang mendukung kesejahteraan lanjut usia di Indonesia. Universitas Atma Jaya.

- Johnson, R., Popejoy, L. L., & Radina, M. E. (2010). Older adults' participation in elder care facility placement decisions. *Clinical Nursing Research*, 19(4), 358–375. https:// doi.org/10.1177/1054773810372990
- Kwon, S.H., & Tae, Y.-S. (2012). Elder care facility placement: the process of decision making and adaptation among adult children caregivers of demented parents in Korea. *Asian Nursing Research*, 6(4), 143–151. https://doi.org/10.1016/j. anr.2012.10.005
- Lee, Y.-J., & Aytac, I. A. (1998). Intergenerational financial support among whites, African Americans, and Latinos. *Journal of Marriage and the Family*, 426–441. https://doi.org/10.2307/353859
- Lindenberg, S. (1985). Rational choice and sociological theory: New pressures on economics as a social science. *Zeitschrift Für Die Gesamte Staatswissenschaft/Journal of Institutional and Theoretical Economics*, *H.* 2, 244–255.
- Lorca, M. B. F., & Ponce, M. S. H. (2015). Normative, structural, and individual factors that predispose adult children to provide social support to their elderly parents. *Journal of Comparative Family Studies,* 46(4), 517–540. https://doi. org/10.3138/jcfs.46.4.517
- Maeda, D. (2013). The socioeconomic context of Japanese social policy for aging. In *Caring for the Elderly in Japan and the US* (pp. 28–51). Routledge.
- McFall, S., & Miller, B. H. (1992). Caregiver burden and elder care facility admission of frail elderly persons. *Journal of Gerontology*, 47(2), S73–S79. https://doi. org/10.1093/geronj/47.2.S73
- Mégret, F. (2010). The human rights of the elderly: An emerging challenge. *Available at SSRN 1584303*.

- Ministry of Social Affairs of the Republic of Indonesia. (2010). *Profile of Tresna Werdha Elderly Care Home*.
- Ministry of Social Affairs of the Republic of Indonesia. (2014). Elderly social service assistance modul. *Jakarta: Direktrat Pelayanan Sosial Lanjut Usia*.
- Nye, F. I. (1982). *Family relationships: Rewards and costs*. Sage Publications
- Peláez, M., & Kalache, A. (2001). Aging in developing countries. Weisstub DN, Thomasma DC, Gauthier S, Tomossy GF. Aging: Culture, Health, and Social Change. Amsterdam: Kluwer Academic Publishers, 145–159.
- Pepe, C. K., Krisnani, H., & Budiarti, M. (2017). Dukungan sosial keluarga dalam memenuhi kebutuhan sosial lansia di panti. *Share Social Work Journal*, 7(1), 33– 38.
- Pinquart, M., & Sörensen, S. (2006). Gender differences in caregiver stressors, social resources, and health: An updated metaanalysis. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 61(1), P33–P45. https://doi.org/10.1093/ geronb/61.1.P33
- Ramesh, B., Cao, L., Kim, J., Mohan, K., & James, T. L. (2017). Conflicts and complements between eastern cultures and agile methods: An empirical investigation. European Journal of Information Systems, 26(2), 206-235. https://doi.org/10.1057/s41303-016-0023-0
- Rossi, P. H. (1990). The old homeless and the new homelessness in historical perspective. *American Psychologist*, 45(8), 954. https://doi.org/10.1037/0003-066X.45.8.954
- Setiti, S. G. (2006). Pelayanan Lanjut Usia Berbasis Kekerabatan. Studi kasus pada lima wilayah di Indonesia. Sosio Konsepsia: Jurnal Penelitian dan Pengembangan Kesejahteraan Sosial, 17(1), 18-31.

Shinta Julianti, Fahlesa Munabari

- Sholicati, Z. (2017). Partisipasi masyarakat dalam pelayanan sosial bagi lanjut usia di Dusun Bulak, Desa Tuksono, Kecamatan Sentolo, Kabupaten Kulon Progo [Undergraduate Thesis]. Yogyakarta State University.
- Silverstein, M., Gans, D., & Yang, F. M. (2006). Intergenerational support to aging parents: The role of norms and needs. *Journal of Family Issues*, 27(8), 1068–1084. https://doi.org/10.1177/0192513X0628812
- Sun, C., Ding, Y., Cui, Y., Zhu, S., Li, X., Chen, S., Zhou, R., & Yu, Y. (2021). The adaptation of older adults' transition to residential care facilities and cultural factors: A meta-synthesis. *BMC Geriatrics*, 21, 1–14. https://doi.org/10.1186/s12877-020-01987-w
- Sutriyanto, E. (2016, October 5). Masih banyak kesalahan memperlakukan dan merawat lansia. *Tribun News*.

- Syamsuddin, S., & Santi, K. E. (2018). Perspektif kekuatan dan keberfungsian sosial lanjut usia penerima manfaat panti sosial Tresna Werdha Minaula Kendari. Sosio Konsepsia: Jurnal Penelitian dan Pengembangan Kesejahteraan Sosial, 7(3), 205–220.
- Tsuno, N., & Homma, A. (2009). Ageing in Asia-the Japan experience. *Ageing International*, 34, 1–14. https://doi. org/10.1007/s12126-009-9032-9
- White, J. M., Martin, T. F., & Adamsons, K. (2018). *Family theories: An introduction*. Sage Publications.
- Wolf, D. A., Freedman, V. A., & Soldo, B. J. (1997). The division of family labor: Care for elderly parents. *Journals of Gerontology Series B*, 52, 102–109. https:// doi.org/10.1093/geronb/52B.Special_ Issue.102