

Strategies to improve the quality of life of elderly: Integrating the roles of families and nursing homes

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Abstract

This study explores the roles of family and nursing homes in enhancing the quality of life of elderly in Bintan Regency, Kepulauan Riau Province, Indonesia, focusing on the quality of elder care, social interaction, and well-being. Using a qualitative case study approach, data were collected from two nursing homes through in-depth interviews with caregivers and family members, as well as direct observation. Findings reveal three main caregiving models: institutional care emphasizing basic needs (food, hygiene, and health); community-based care promoting peer interaction and social activities; and family-based care involving regular visits and financial support. The study shows that the emotional well-being of elders is closely linked to family involvement and social connection within the facility. Caregivers also play a vital role in fostering emotional comfort. An ideal elder care model combines adequate institutional support, psychosocial engagement, and family participation. The study recommends caregiver training focused on emotional care and initiatives to encourage family involvement in improving elders' overall well-being.

Introduction

Global demographic shifts, particularly the rising proportion of older adults, have become a central concern across social, economic, and health-related research (Fang et al., 2023; Mahishale, 2015). Indonesia, where the elderly population is growing rapidly, faces complex challenges in providing adequate elder care services (Kadar et al., 2013). These challenges extend beyond medical dimensions, encompassing social, cultural, and ecological aspects of care environments. Older adults, as a vulnerable group, require not only physical support but also emotional and social care. This underscores the need to examine caregiving patterns and environmental dynamics within institutional settings such as nursing homes, which are increasingly present in mid-sized cities, including Bintan Regency.

Most studies on aging focus on health, quality of life, and psychosocial well-being. However, spatial and ecological dimensions in elder care remain underexplored (Engelen et

al., 2022; Finlay et al., 2015; Nutley, 2025; Ralston, 2018). Nursing homes are often perceived merely as custodial facilities, rather than as social and ecological spaces that shape residents' daily experiences. Yet, the ecology of space plays a pivotal role in structuring interactions among residents, caregivers, and the surrounding environment (Ehrlich et al., 2017).

In Indonesia, the shift from extended to nuclear family systems has resulted in more older adults living apart from their biological families, reinforcing the need for formal elder care institutions (Ng et al., 2025). Bintan Regency, as a growing urban center in the Riau Islands, presents a compelling case to examine how nursing homes provide responsive care environments for the elderly. Its unique geographical setting and diverse social composition offer an important context for understanding the spatial ecology of elder care in Indonesia.

Cultural factors further shape societal perceptions of nursing homes (Amri et al., 2022; Nakrem, 2015). In Malay culture, where kinship ties remain highly valued, placing older adults in such institutions carries ambivalent meanings balancing practical needs with social stigma. This cultural tension influences caregiving dynamics, where caregivers are not only tasked with professional responsibilities but also confronted with moral and cultural expectations to provide humane care.

Although research on aging in Indonesia is expanding, significant gaps remain in examining the role of spatial ecology within elder care. Much of the literature emphasizes medical, psychological, or familial aspects, while ecological dimensions how physical space, environment, and social interactions shape caregiving practices are often overlooked. The concept of spaces ecology provides an analytical lens to investigate the interplay between humans and space in institutional care settings (Roxberg et al., 2020).

In Bintan Regency, studies specifically addressing how caregiving practices emerge within the environmental dynamics of nursing homes are limited. Yet, physical spaces such as bedrooms, communal areas, gardens, and facility layouts directly influence the quality of interaction between residents and caregivers (Suryanti et al., n.d.). For instance, cramped or inaccessible spaces may cause both physical and psychological strain, while open and inclusive environments can promote independence and emotional well-being.

Caregiving patterns are shaped not only by institutional procedures but also by the broader social ecology within nursing homes (Bowlby, 2012; Ulsperger & Knottnerus, 2008). Caregivers act as mediators between residents and their physical and social environments. However, heavy workloads, resource constraints, and cultural pressures often lead to negotiated and compromised care practices. This highlights the need for deeper inquiry into how caregiving is enacted and negotiated within institutional spaces, and how ecological factors mediate these processes.

This study seeks to address these gaps by exploring the spaces ecology of elder care in nursing homes in Bintan Regency. It focuses on understanding caregiving patterns and environmental dynamics within elder care institutions. Through a spatial-ecological approach, the study examines how interactions among residents, caregivers, and physical environments generate distinct care practices.

Specifically, the research investigates three dimensions: first, how caregiving patterns are formed in caregivers' daily practices; second, how the physical environment of nursing homes design, facilities, and spatial organization supports or constrains elder care; and third, how local sociocultural values, particularly kinship norms and the stigma of institutionalization, shape caregiving dynamics in Bintan Regency.

By situating older adults within a socio-ecological environment, this approach expands the understanding of elder care beyond its medicalized frame, highlighting the elderly as active subjects embedded in particular care spaces. In doing so, the study contributes to academic debates on aging and elder care, while offering practical implications for developing more humane, environmentally sensitive, and culturally responsive nursing home management.

Furthermore, the study aligns with global sustainable development agendas, particularly Sustainable Development Goals (SDGs) on good health and well-being (SDG 3), reduced inequalities (SDG 10), and sustainable cities and communities (SDG 11). By foregrounding spatial ecology as integral to elder care, it proposes a holistic framework for addressing population aging in Indonesia.

Methods

Design

This study adopts a qualitative research design with case study orientation to capture the lived experiences, caregiving practices, and environmental dynamics within nursing homes in Bintan Regency. The case study research conducted in nursing home Rumah Bahagia Bintan in Bintan Regency.

Participants

Participants include elderly residents, caregivers, administrators, and family members where possible. Approximately 7 informants participating to engaged to ensure diverse perspectives.

Table 1 Participants

Initial name	Ages/sex	Profesion
BD	71/women	Resident (elderly)
HJ	80/women	Resident (elderly)
KP	67/women	Resident (elderly)
WR	49/women	Caregiver
TE	41/women	Caregiver
BP	35/men	Administrator
WT	38/women	Caregiver

Sources: Fieldwork Data, 2025.

Participants allow the researcher to capture everyday interactions, spatial practices, and environmental arrangements. In-depth semi-structured interviews conducted with caregivers and residents to explore their perceptions of caregiving and space utilization. Complementary to this, field notes and visual mapping of nursing home layouts will document spatial dynamics and their influence on care practices.

Instruments

The primary instruments consisted of semi-structured interview guides and supporting documentation. Semi-structured interviews were used to obtain in-depth information from elderly residents, caregivers, administrators, and family members. The interview guide was developed around the three analytical dimensions of the study: caregiving patterns and routines, the role of the physical environment, and cultural-social influences on caregiving practices. The semi-structured format enabled participants to express their experiences openly while allowing the researcher to probe emerging themes relevant to the research objectives.

Table 2. semi-structured interview guide

The interview instrument for elderly residents	The interview guide for caregivers	The interview guide for administrators
Daily experiences inside the nursing home; Perceptions of caregiving quality and emotional support; Relationships with caregivers and other residents; Feelings of comfort, safety, and belonging within the institution; Adaptation to institutional living;	Daily caregiving routines and responsibilities; Challenges encountered in caring for elderly residents; Communication patterns with residents; Strategies for emotional and physical care; Perceptions regarding institutional support and facilities;	Institutional policies and caregiving systems; Resource management and staffing; Environmental arrangements within the nursing home; Programs designed to improve residents' wellbeing; Collaboration with families and local authorities.
Cultural and spiritual practices maintained during residence.	Cultural values influencing caregiving behavior.	Institutional policies and caregiving systems;

Field notes were used to document contextual information, spontaneous interactions, researcher reflections, and non-verbal communication observed during interviews and observations. These notes allowed the researcher to capture subtle social dynamics and emotional nuances that may not emerge directly through interviews.

Procedure

The study began with a literature review related to elderly care, institutional caregiving, environmental gerontology, and nursing home experiences. Following the literature review, the researcher prepared research instruments, including interview guides, observation sheets, and consent forms. Prior to fieldwork, permission and research approval were obtained from relevant local authorities and the administration of Rumah Bahagia Bintan Nursing Home. Ethical considerations were prioritized, particularly because the study involved elderly individuals categorized as vulnerable participants.

Participants were selected purposively based on their involvement and experiences within the nursing home environment. Approximately seven informants were recruited, including elderly residents, caregivers, administrators, and family members where possible. Selection criteria emphasized participants who were capable of providing rich and relevant information regarding caregiving experiences and institutional dynamics. Before participation, all participants received explanations regarding the research objectives, confidentiality procedures, voluntary participation, and their right to withdraw at any time. Written or verbal informed consent was obtained prior to data collection.

Data collection was conducted through interviews and documentation review. Semi-structured interviews were conducted in a flexible and conversational manner to encourage participants to share their experiences openly. Interviews were conducted in locations within the nursing home considered comfortable and safe for participants. With participant permission, interviews were audio-recorded to ensure data accuracy.

Data Analysis

Data analyzed using thematic analysis, with coding focused on three dimensions: (1) caregiving patterns and routines, (2) the role of physical environment in shaping experiences, and (3) cultural and social factors influencing caregiving practices. Informed consent obtained from all participants, with particular attention to vulnerable groups such as elderly residents. Identities will be anonymized to protect confidentiality. Research approval will also be sought from relevant local authorities and nursing home administrations.

Results

This study aims to examine how caregiving patterns and environmental dynamics are constructed within nursing homes in Bintan Regency by employing the framework of spaces ecology. Through observations, interviews, and documentation, the research reveals that elder care is not merely a medical practice or a form of social service, but rather a process shaped by spatial arrangements, social relationships, and local cultural values. The findings indicate that spaces within nursing homes function not as passive backdrops, but as active agents that structure both the experiences of residents and the work patterns of caregivers.

A key finding of this research is the emergence of relatively consistent caregiving routines across both nursing homes studied, despite differences in implementation. Caregiving in Bintan Regency reflects a distinctive character: the integration of institutional routines with caregivers' improvisations in responding to residents' diverse needs.

Daily routines typically begin around five in the morning, with caregivers waking residents, assisting with personal hygiene, and preparing breakfast. Residents are then guided into communal areas for light social activities such as morning exercise, prayers, or casual conversation. These routines provide a collective rhythm that structures daily life in the nursing home.

Yet, behind this formal structure lies ongoing improvisation. One caregiver explained:

“We do have a fixed schedule, but sometimes the elderly prefer to stay longer in their rooms or take a walk in the garden. We have to adjust. We can’t be rigid, because each of them has their own habits.” (Interview with Ani, caregiver, 2025).

This balance illustrates the tension between standardized institutional care and personalized attention. Some residents resist group activities due to fatigue or a preference for solitude, prompting caregivers to negotiate between institutional demands and individual needs. Such dynamics underscore the ecological nature of caregiving, where human actors and institutional norms continuously interact.

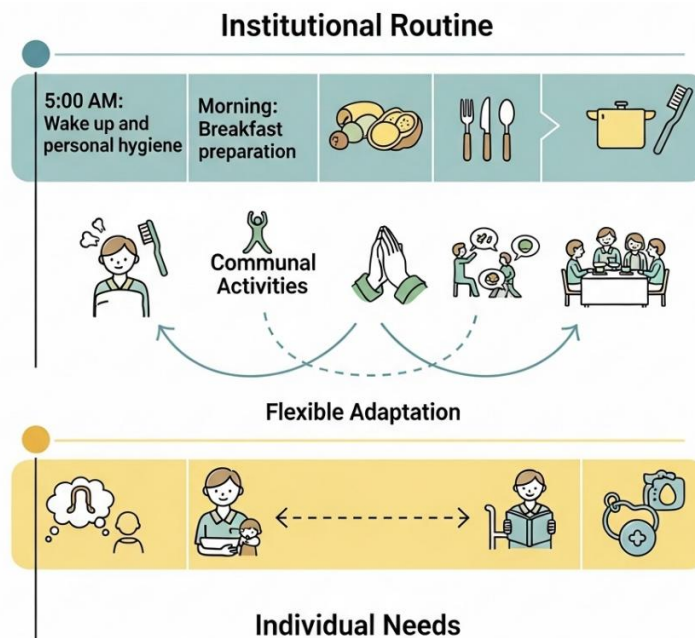


Figure 1. Caregiving Pattern In The Nursing Home

The Figure 1 illustrates a caregiving pattern in the nursing home that reflects a dynamic balance between institutional routines and the individual needs of the elderly. Beginning at 5 a.m., it outlines a structured daily flow waking, personal hygiene, breakfast, and social activities interwoven with flexible pathways indicating caregivers' adaptability to each

resident's preferences and conditions. The curved arrows and branching lines visualize an "ecology of care," where institutional rules operate responsively rather than rigidly, echoing caregiver Ani's remark: "We can't be strict; they each have their own habits." Thus, the Figure 1 represents more than a daily schedule it embodies a human-centered caregiving philosophy that honors the dignity and individuality of older adults.

The physical environment significantly shapes the caregiving experience. Observations reveal that room layout, lighting, ventilation, and access to outdoor spaces directly affect residents' well-being. In the government-run nursing home, rooms are more crowded, housing four to five residents per room. This arrangement often creates discomfort, as one resident noted:

"at night it's hard to sleep, because there are many people in the same room. Some cough, some talk in their sleep. But what can we do, that's just how it is here. (Interview with H, resident, 2025).

By contrast, private facilities provide more personal space, with only two residents per room, large windows, and direct access to small gardens. These conditions foster a sense of privacy, autonomy, and improved social interaction.

Communal areas also serve as symbolic and practical spaces for community-building. However, limitations such as non-ergonomic seating or inadequate lighting sometimes diminish comfort and accessibility. Outdoor environments, particularly gardens, function as therapeutic spaces. Residents who regularly walk in the garden report better physical and emotional health:

"in the morning, I like walking around the garden. It feels refreshing, and my mind feels calmer. If I stay in the room all day, my body hurts even more.) (Interview with S, resident, 2025).

These findings highlight the importance of age-friendly design, where space is not only functional but also cultivates an atmosphere conducive to mental and emotional well-being.

Socio-cultural values also strongly influence elder care in Bintan Regency. Within Malay society, kinship norms remain highly valued, making nursing homes often perceived as a "last resort" or even a form of neglect. Some residents expressed feelings of guilt about living in a nursing home, despite family constraints:

" my children are busy with work and cannot take care of me. Deep down, I still want to live with my family, but they also face difficulties. So I just accept being here. (Interview with M, resident, 2025).

This stigma extends to caregivers, who sometimes face criticism for "taking over" familial duties. Yet, many caregivers reinterpret their role as one of devotion and service:

"outsiders sometimes say it's sad that the elderly are left here. But for us, caring for them is a form of worship. It's not just a job we become part of their family. (Interview with R, caregiver, 2025).

These accounts demonstrate that caregiving cannot be reduced to formal services alone; it is deeply embedded in cultural meanings. Relationships between residents and caregivers often evolve into kin-like bonds, filling the emotional gaps left by absent family members.

Discussion

The discussion can be further deepened by situating these findings within the broader socio-institutional landscape of elderly care in Bintan Regency, particularly the dynamic relationship between families and nursing homes as co-constitutive actors in shaping the quality of life of older persons. The spatial ecological perspective not only reveals how care is practiced within institutional settings but also highlights how these practices are continuously negotiated across domestic and institutional spheres (Fischer & Jobst, 2020; Ornstein & Caruso, 2024). In this sense, nursing homes should not be viewed as isolated care environments but as extensions sometimes complements, sometimes substitutes of family-based care systems that remain culturally dominant in Indonesian society.

The influence of physical space, as identified in the findings, becomes even more significant when understood in relation to family expectations and involvement. Families often carry emotional and moral responsibility for the well-being of their elderly members, even after institutionalization. Therefore, the design of nursing home environments should not only respond to residents' physical needs but also facilitate ongoing family engagement. For instance, providing private yet welcoming visitation areas, flexible visiting hours, and family-inclusive spaces can help maintain emotional continuity between elderly residents and their kin. In this regard, spatial arrangements act as mediating structures that either strengthen or weaken intergenerational bonds. When physical environments are designed without considering this relational dimension, institutional care risks reinforcing feelings of abandonment among residents (Bowlby & McKie, 2019; Rosenberg et al., 2009).

Moreover, the role of social space in shaping identity underscores the importance of recognizing elderly individuals as active social agents rather than passive recipients of care. Within nursing homes, residents constantly navigate their identities between autonomy and dependency, individuality and collectivity (Solina et al., 2025). This negotiation becomes particularly complex in contexts like Bintan, where communal values and respect for elders are deeply embedded in cultural norms. Social spaces such as shared dining areas, activity rooms, and religious spaces can either foster a sense of belonging or amplify social isolation, depending on how they are managed. Importantly, the involvement of families in these social spaces through participation in communal events or caregiving activities can reinforce residents' sense of identity and dignity. This suggests that integrating family roles into the social life of nursing homes is not merely an additional feature but a central strategy for enhancing well-being.

The cultural dimension of space further complicates the perception and acceptance of nursing homes in Bintan Regency. The dual framing of these institutions as both "sites of neglect" and "spaces of protection" reflects broader societal tensions regarding filial responsibility and modern care arrangements. In many cases, families experience ambivalence or even guilt when placing elderly members in nursing homes, as this decision may be perceived as failing to uphold cultural obligations (Suryanti et al., n.d.). At the same time, practical constraints such as economic pressures, migration, and changing family structures necessitate alternative care solutions. Within this context, nursing homes must actively construct their cultural legitimacy by aligning their practices with local values of respect, care, and dignity.

One important strategy is to incorporate culturally meaningful practices into daily routines, such as religious activities, traditional food, and community rituals. These practices help transform institutional spaces into culturally resonant environments, reducing the symbolic distance between "home" and "institution." Additionally, involving families in decision-making processes and caregiving activities can help reframe nursing homes as collaborative care spaces rather than sites of abandonment. Public narratives also play a crucial role; shifting discourse from "placing" the elderly in nursing homes to "entrusting" them to professional care can gradually reshape societal perceptions.

From a strategic standpoint, integrating the roles of families and nursing homes requires a multi-level approach. At the micro level, caregiving practices should emphasize personalized care plans that incorporate family input, ensuring that residents' life histories, preferences, and social ties are respected. At the meso level, institutional policies should facilitate regular communication between caregivers and families, including updates on residents' health and well-being, as well as opportunities for family participation in care activities. At the macro level, government and community initiatives should promote awareness about the evolving nature of elderly care, highlighting the complementary roles of families and institutions.

The ecological framework also invites attention to the training and professional development of caregivers. Beyond technical skills, caregivers need to develop sensitivity to spatial and relational dynamics, understanding how environments influence behavior, emotions, and social interactions. Training programs should therefore include components on environmental design, social facilitation, and cultural competence. For example, caregivers can be trained to use outdoor spaces such as gardens not only for recreation but also as therapeutic settings that encourage mobility, reduce stress, and foster social interaction. Similarly, they can learn to facilitate family involvement in ways that enhance, rather than disrupt, the daily routines of the institution.

Another critical implication concerns the need for adaptive and flexible care models. As demographic changes continue to reshape family structures in Bintan Regency, the demand for diverse forms of elderly care will increase. Nursing homes must therefore move beyond standardized models and develop hybrid approaches that integrate institutional care with community- and family-based support systems. This could include day-care services, respite care, or home-based extensions of nursing home services, allowing families to remain actively involved while benefiting from professional support. Such models not only expand care options but also reduce the stigma associated with full institutionalization.

Ultimately, the integration of spatial, social, and cultural dimensions highlights that enhancing the quality of life of the elderly is not solely a matter of improving facilities or services. It requires a fundamental rethinking of how care is conceptualized, organized, and practiced across different contexts. By viewing nursing homes as part of a broader ecological system that includes families, communities, and cultural values, more holistic and sustainable care strategies can be developed. In Bintan Regency, this approach is particularly relevant given the strong interplay between traditional norms and contemporary challenges.

Implications

This study implies that efforts to enhance the quality of life of the elderly in Bintan Regency must move beyond a purely institutional or family-centered approach by integrating both within a spatial ecological framework. Practically, this means that nursing homes should be designed and managed as relational spaces that actively accommodate family involvement, rather than as isolated care facilities. The provision of age-friendly physical environments, such as private yet accessible rooms, therapeutic outdoor spaces, and family-oriented visitation areas, should be aligned with strategies that maintain and strengthen intergenerational ties. At the same time, caregiving practices need to incorporate spatial awareness, enabling caregivers to utilize the environment as part of holistic care. These findings also suggest the importance of developing hybrid care models that bridge institutional and home-based care, allowing families to remain engaged while benefiting from professional support.

At a broader level, the study highlights the need for cultural and policy interventions that reframe societal perceptions of nursing homes. Public education campaigns and community engagement initiatives are necessary to shift the dominant narrative from viewing nursing homes as symbols of neglect to recognizing them as legitimate and humane care alternatives.

Policymakers should support this transformation by establishing standards that integrate cultural sensitivity, family participation, and environmental quality into elder care regulations. Furthermore, caregiver training programs must be expanded to include competencies in cultural understanding, social facilitation, and spatial utilization. Altogether, these implications emphasize that improving elderly well-being requires coordinated efforts across families, institutions, and policy frameworks, grounded in an understanding of care as a multidimensional and ecologically embedded process.

Limitations and future directions

This study has several limitations that should be acknowledged. First, the analysis is primarily based on observations and experiences within a limited number of nursing homes in Bintan Regency, which may not fully capture the diversity of elderly care practices across different regions or institutional settings. Variations in resources, management styles, and cultural dynamics could lead to different configurations of spatial ecology and caregiving practices. Second, the study focuses more extensively on the institutional environment, with relatively less systematic exploration of family perspectives and their lived experiences in navigating decisions about elderly care. As a result, the integration between family roles and nursing home practices, while conceptually emphasized, may not be fully empirically elaborated. Third, the qualitative nature of the study, while rich in contextual insights, limits the ability to generalize findings or measure the extent to which spatial, social, and cultural factors quantitatively affect the quality of life of elderly residents. Future research should address these limitations by adopting more comparative and mixed-method approaches. Expanding the study to multiple regions would allow for a deeper understanding of how different socio-cultural and economic contexts shape the integration of family and institutional care. Incorporating longitudinal designs could also capture how elderly residents' experiences and identities evolve over time within nursing home environments. In addition, future studies should more explicitly include family members as key informants, examining their perceptions, emotional negotiations, and patterns of involvement in caregiving. Quantitative measurements of well-being, spatial quality, and social interaction could complement qualitative findings, providing a more comprehensive assessment of care outcomes.

Conclusion

Based on the findings demonstrate that care for the elderly is not merely a set of medical or technical tasks, but an ecological process shaped by the interplay of residents, caregivers, and spatial arrangements. The notion of *spaces ecology* provides a valuable lens to understand how physical environments, social interactions, and cultural perceptions converge in shaping the daily lives of elderly residents. First, caregiving patterns in nursing homes are structured by institutional routines yet characterized by ongoing improvisation. Caregivers follow scheduled tasks but constantly adjust to the personal needs and moods of elderly residents. This reflects the dynamic negotiation between standardized care and individualized attention, where flexibility becomes a central element of compassionate caregiving. Second, environmental dynamics emerge as critical in influencing both the quality of care and the well-being of residents. The design and conditions of living spaces—such as room size, lighting, ventilation, and access to outdoor areas directly affect physical comfort and psychological health. Shared rooms often create tension, while open and accessible gardens provide therapeutic benefits. Space thus operates as an active agent that mediates relationships and well-being within the nursing home. Third, socio-cultural factors strongly shape the meanings of elder care in Bintan Regency. Within Malay cultural values, where family responsibility toward elders is highly esteemed, nursing homes are often viewed with ambivalence. Residents may internalize feelings of abandonment, while caregivers reinterpret their roles as both professionals and surrogate family members. This dual perception highlights the cultural

negotiation embedded in institutional elder care, where caregiving is performed not only as duty but also as moral and emotional practice.

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Author Contribution Statement

ES contributed to drafting the manuscript and conducting fieldwork. OA contributed to data visualization, analysis, and the development of the study's implications. HW and US contributed to the formulation of the methodology, the articulation of study limitations, and the literature review. FNR contributed to revising the manuscript, refining the analysis, and developing the conclusion.

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