The 6th ASEAN Regional Union Psychological Society (ARUPS) Congress
"Driving Mental Revolution in the Psychological Century: Enhancing Psychological Services for a Better Future"
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Proceeding

Editors:
Andik Matulessy
Tjipto Susana
Mirra Noor Milla
Anrilia Ema M. Ningdyah

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Proceeding of The 6ᵗʰ ASEAN Regional Union Psychological Society (ARUPS) Congress 2018

Driving Mental Revolution in the Psychological Century : Enhancing Psychological Services for a Better Future

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Preface

The ARUPS Congress is a routine activity held every two years. The Congress aims to develop professional cooperation of Psychology regionally, especially among ASEAN countries and, internationally. The Indonesian Psychological Association (HIMPSI) hosted the 6th Congress. The 6th ARUPS Congress was held on 20 - 22 February 2018 at Discovery Kartika Plaza Hotel, Kuta, Bali. Activities in the Congress consist of: workshops; HIMPSI meetings with the International Union of Psychological Science (IUPsyS), the Asia Pacific Psychological Alliance (APPA), Pan African Psychological Union (PAPU); plenary and panel sessions; oral presentations; and, poster presentation.

Meeting between professional organizations of psychology aims to strengthen cooperation these organizations, regionally between ASEAN countries, Asia Pacific, and global region. Additionally, academic forums as part of the meetings aim to disseminate research results to improve the quality of psychological practices in each country. There are over 600 abstracts listed in the presentation list. For the purpose of maintaining quality, the scientific committee conducted paper selection. The result was as follows: 406 papers were selected for oral presentations and 65 papers were for poster presentations. Total number of attendances includes more than 300 people from 20 countries.

Workshops held on 20 February 2018 include:

1. Character Building Through Traditional Games with BERLIAN Method.
   Speaker: Dr. lswinarti, M.Si. (Indonesian Association of Developmental Psychology/IPPI).
2. A Learning Culture as An Essential Organizational Capital to Face Tough Business Environment.
   Speaker: Prof. Dr.Andreas Budihardjo (Indonesian Association of Industrial and Organization Psychology / APIO).
3. ASD (Autism Spectrum Disorder) Early Identification and Intervention With TEACCH -
   Speaker: Margaretha, S.Psi., P.G.Dip.Psych., M.Sc. (Faculty or Psychology, Airlangga University).
4. Preventing Anxiety and Depression in Young People: Super Skills for Life.
   Speaker: Prof. Cecilia A. Essau (Roehampton University, England).
5. Methods and Procedures for Adapting Assessment Instruments for Psychological Research and Practices.
   Speaker: R. Urip Purwono, PhD. (Faculty of Psychology Universitas Padjadjaran, Indonesia);
6. After A Disaster: An Introduction to Key Concepts to Meet the Psychological Needs of Those Affected.
   Speaker: Associate Prof Clare Yeo and Dr. Tsao I Ting (Singapore);
7. How ASEAN Psychological Community Can Prepare Superior Human Capital for Global Competition: The Role of The Psychological Service of The Indonesian Army in Enhancing Resilience and Cultural Intelligence.
   Speaker: Colonel Drs. Gunawan, DESS (Indonesian Association of Military Psychology/APMI);
8. Rightsizing: Business Organizational Performance Improvement.
   Speaker: Dr. Sumaryono, M. Si. (Indonesian Association of Industrial and Organization Psychology/APIO);
9. Antenatal Resilience and Optimism Workshop: A Preview for Facilitator.

Speaker: Josephine Ratna, M.Psych, Ph.D, Psychologist (Widya Mandala Catholic University and Premier Hospital Surabaya);

10. Cognitive Interview: Technique to Obtain Information from Witnesses and Victims in The Criminal Justice System.
Speaker: Dra. Reni Kusumowardhani, M.Psi (Indonesian Association of Forensic Psychology / APSIFOR).

Keynote speakers gave their thoughts on February 21, 2018 after the opening ceremony, as follows:

1. Professor Nila. F. Moeloek, Minister of Health of the Republic of Indonesia.
Topic: The role of psychologist in community health services in Indonesia.
Nila Djuwita Farid Moeloek is the Minister of Health of the Republic of Indonesia since 27 October 2014. She actively participates as a speaker, resource person or moderator in a wide range of scientific meetings and workshops. She has also authored or co-authored more than 150 scientific papers and five scientific books. Dr. Moeloek also leads a number of high-profile organizations in Indonesia. Foremost among these are her positions as General Chairperson of the Indonesian Dharma Wanita (the largest women's organization in Indonesia whose members are comprised of the women and wives of civil servants throughout Indonesia), General Chairperson of the Indonesian Ophthalmologist Association, General Chairperson of the Indonesian Cancer Foundation, and Chairperson of Medical Research of Faculty of Medicine at the University of Indonesia. Dr Moeloek earned her medical degree in ophthalmology from the Faculty of Medicine at the University of Indonesia. After earning her position as a specialist consultant in ophthalmology in 1998, she devoted herself to pursuing her PhD in ophthalmology, and earned a cumlaude degree in 2003. In 2007, she earned her full professorship at the Faculty of Medicine at the University of Indonesia.

2. Dr. Sathasivian Cooper, President of the International Union of Psychological Science (IUPsyS).
Topic: The role of psychological organization at the local, regional and global levels in responding to human and social problems in psychological century.
Sathasivian Cooper is a clinical psychologist in South Africa. He plays numerous public roles, including Vice President of the International Social Science Council (October 2013-present) and President of the International Union of Psychological Science (July 2012-present). Cooper completed his undergraduate degree in psychology from the University of South Africa and his PhD at Boston University (1989). He received many awards, among others: 'Distinguished Contributions to the Advancement of International Psychology' award (2014) from the American Psychological Association and Violence Prevention Award from Roxbury Comprehensive Community Health Centre.

Plenary panel session features speakers who are experts in their fields from different countries, such as:

1. Doran French, PhD- Purdue University, West Lafayette, United States of America.
Topic: Social and emotional development of children and adolescents in four countries: China, Thailand, Korea and Indonesia.
Dr. French's research focuses on social and emotional development of children and adolescent. He has conducted research on peer relationships, friendships, conflict,

psychopathology, and adjustment (e.g., delinquency, substance use, school drop out). Over the past 17 years, he has been increasingly concerned with understanding how children develop within the context of culture. Much of his research has been in Indonesia, and also China, Thailand, and Korea. His current projects include research involving children in different cultures. He is also interested in studying Islam in Indonesia and exploring how religious involvement is associated with social competence.

2. Associate Professor Claire Thompson (Associate Professor of Clinical Psychology, Central Queensland University, Australia).
   Topic: The cultural bases in the training of clinical psychologists in Asia.
   Associate Professor Claire Thompson has a Bachelor of Arts (Honours) from the University of Queensland, a Masters in Clinical Psychology from Bond University, and a PhD from the University of New South Wales. She is a registered psychologist with the Australian Health Practitioner Regulation Agency (AHPRA) and the Singapore Register of Psychologists. Dr. Thompson has over 25 years of professional experience in clinical, research and teaching psychology. She has also worked in private practice, mental health service management and professional supervision of psychologists. She has taught psychology at undergraduate and postgraduate levels, at several institutions in Australia and Singapore. Her research interests, publications and conference presentations are in the area of clinical and counselling psychology, particularly mental health and cognition in older age and cultural aspects of Clinical Psychology training programs.

3. Kwartarini Wahyu Yuniarti, Prof., Clinical Psych, M.Med.Sc., Ph.D- Gadjah Mada University.
   Topic: Illness perception, self-management and social support in health care in Indonesia.
   Professor Kwartarini Wahyu Yuniarti is the Director of Center for Indigenous and Cultural Psychology, Faculty of Psychology, Gadjah Mada University, Indonesia. She is also the Director of German Studies Center and the Country Representative of Asian Association for Social Psychology. Professor Kwartarini is on the Board of Asian Association of Health Psychology. Her key research focus is in the area of health psychology. Her research and publications include: Research on Asthma and emotion, comparative studies between those in Indonesia and in Germany; The assertiveness of passive smokers; Hygiene Behavior and Hepatitis A; Explorative Study on Health Anxiety among students in Aceh and Yogyakarta; Translating the Health Belief Model into Contextual Community Intervention A study on proper hygiene practices of mothers of children with diarrhea; Discrepancy between knowledge and behavior among mothers of children with diarrhea; Illness perception, stress, religiosity, depression, social support, and self management of diabetes in Indonesia.

4. Professor Roger Moltzen- Waikato University - New Zealand.
   Topic: Creativity and talent development in Asia: Opportunities and challenges.
   Professor Moltzen teaches in courses on human development, individual differences and the education of gifted children. His research interests are the psychology and education of gifted individuals. Professor Moltzen area of expertise include intelligence and creativity, talent development across the lifespan, the education of gifted and talented students, special education, teaching, learning and the curriculum and human development.

5. Dr. Cristina Montiel- Ateneo de Manila University.
   Topic: The role of psychology in creating social justice and democratic governance in Asia. Cristina Montiel is a peace/political psychologist and has been teaching at the Ateneo de Manila University for more than 35 years. She chairs the Research Cluster on Peace, Social Justice and Democratic Governance in her university. She is the recipient of the 2016 Outstanding Psychologist from the Psychological Association of the Philippines; and the 2010 Ralph White Lifetime Achievement Award from the American Psychological Association's Division of Peace Psychology. Montiel was managing editor of the Encyclopedia of Peace Psychology (Wiley-Blackwell, 2012), and editor of the volume on Peace Psychology in Asia (Springer, 2009). Her recent journal publications include Discursive construction of political categories and moral fields (Political Psychology, 2015); and Nationalism in local media during international conflict (Journal of Language and Social Psychology, 2014).

6. R. Urip Purwono, PhD.
   Psychometrician / Measurement Specialist, Center for Psychometric Studies Faculty of Psychology Universitas Padjadjaran Bandung, Indonesia.
   Topic: Test and the profession: revitalizing psychological testing. Urip Purwono is a senior lecturer and psychometrician at the Faculty of Psychology, Universitas Padjadjaran, Bandung, Indonesia. He received his Ph.D. (psychology) from the University of Massachusetts at Amherst, USA specializing in psychometrics, M.S. (Education) from Indiana University, Bloomington, Indiana, USA, M.Sc. (Psychology) from the University of Massachusetts at Amherst, USA, and Drs. (Clinical) in Psychology from Universitas Padjadjaran, Bandung, Indonesia. He joined Universitas Padjadjaran in 1985, founded and headed the Center of Psychometric Study, Assessment, and Evaluation. His teaching assignments includes undergraduate and graduate level courses in the area of quantitative research methodology, psychological assessment, test theories, and test construction. Urip Purwono is the author of many psychological tests used in Indonesia namely Test of Learning Ability, Comprehensive Cognitive Ability Test, General Cognitive Ability Test, and Multi Factor Personality Inventory. Currently involved in the development of CHC Based Intelligence Test in Indonesia, his research interest includes test theory, test construction, test adaptation, and structural equation modeling.

7. Yudi Latif, PhD., Head of the Presidential Work Unit of Pancasila Ideology- Republic of Indonesia.
   Topic: The way Pancasila engaging globalization.

Closing ceremony of the 6th ARUPS Congress was marked by Kecak dance performance which symbolizes spirit and optimism for the better future and closing speech from Mr. Urip Purwono, PhD - the newly elected President of ARUPS, focusing on the importance of continuing mutual positive cooperation between ARUPS country members and also with other international psychology organizations.

Dr. Seger Handoyo, Psikolog
President of HIMPSI

Content

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How to improve the elderly's psychological well-being? Community-based in implementing the six PWB's modules

Jatie K. Pudjibudojo	Marselius Sampe Tondok	Nurul Trianawati
Fakultas Psikologi	Fakultas Psikologi	Fakultas Psikologi
Universitas Surabaya	Universitas Surabaya	Universitas Surabaya

Abstract

Biopsychosocial changes have affected the elderly's psychological well-being (PWB). Therefore, anykind of interventions were needed to increase the elderly's PWB. This research aimed to evaluate the implementationof a set of six modules based on the six dimensions of PWB according to Riff & Keyes (1995). This study used participatory action research desain that conducted in three elderly communities in Surabaya, done in two phases: modules implementation, and evaluation of the implementation. Data were obtained through observation, interviews, questionnaires then be analyzed quantitatively and qualitatively. Results of this study indicated that before being implemented, the modules must be customized to the needs of each community. In general, the interventions perceived by the elderly could increase their PWB in each of the six dimensions of PWB. Before these intervention modules were implemented in other communities, they were necessary to be adjusted according to the characteristics of the target community.

Keywords: *community psychology, elderly, intervention modules, psychological well-being (PWB)*

Introduction

The pyramid of the Indonesian population, including the city of Surabaya showed that the number of elderly people was increasing from year to year. Data Dispenduk Kota Surabaya (Surabaya City's Office of Demographic Affairs) showed that in 2015 the number of elderly population (60 years and over) the city of Surabaya was 276,346 people or 9.4% of the total population of Surabaya. The city of Surabaya was one of the cities with a quite high composition of elderly people, as shownin the Population Pyramid of Surabaya City 2015 at Figure 1.

The problems of elderly in Surabaya were: the increasing of elderly population (2011: 9,1%); city productivity decreased so that the city load increased; the number of poor elderly reached 11,7% and the socialization of elderly was still limited (Komda Lansia Kota Surabaya, 2015). In relation to the above issues, the Surabaya City Government has established the *Komda*

Lansia, with an activity program in 2015, namely: the coordination program of elderly commissions, the development of *UPTD*for the elderly, skills training, supplementary feeding, health screening services, gymnastics and health competitions, and coaching activities.

In order to gathering the data about the effectiveness of above programs for the elderly that have been implemented by the Surabaya City's Government, the researchers from the University of Surabaya has conducted a preliminary research in 2015 (Setiawan, Pudjibudojo, Tondok, 2017). The study was conducted on 97 elderlies who came from 9 urban villages in Surabaya namely: Sukolilo Baru, Kendangsari, Rungkut, Medokan Ayu, Penjaringan Sari, Kedung Baruk, Rungkut Kidul, Kali Rungkut, Tenggilis Mejoyo. The result of the research showed that the intervention program conducted by Surabaya City's Government through *Karang Werda* has not fully meet the elderly's biopsychosocial needs because the program been designed using top-down approach, rather than based on empirical findings.

As follow up of the previous research, the same researcher team from University of Surabaya (Pudjibudojo, Tondok, Setiawan, 2016) conducted further research in order to developing intervention modules based on the empirical findings. The study involved 59 people consisting of 16 elderlies, 20 elderly cadres, and 23 representatives of Surabaya City's *Dinas Sosial* as well as from the management of Surabaya City's *Paguyuban Lansia*. The outcomes of the research were 6 modules of intervention to meet the needs of elderly biopsychosocial needs that been developed from the six dimensions of PWB according to Ryff and Keyes (1995): autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance.

Ryff and Keyes (1995) definedPWB as an individual's impulse to explore his/her potential of the individual as a whole. Such encouragement,in one hand, could cause an individual to become resigned to a state that made his/her PWB be low. On other hand, the impulseencouraged the individual in seeking improvementof his/her living conditions that finally would make the individual's PWB in higher level.

People in high level of PWB were the people who satisfied with their life, fulfilled with positive emotional states, be able to overcomenegative emotional states, had positive relationships with others, be able to determine their own destiny, taking control the condition of the immediate environment, having a clear purpose in their life, and be able to develop themselves (Ryff, 1989).Consequently, according to Ryff (1989) there were six dimensions that form PWB i.e. *self-acceptance*, *positive relation with others*, *autonomy*, *environmental mastery*, *purpose in life*,

and*personal growth*. In carrying out the six modules for improving elderly'sPWB, we implementthe community psychology approach. According to Kloss et al. (2012:12) "*community psychology concerns the relationships of individuals with communities and societies. By integrating research with action, community psychology seeks to understand and enhance quality of life for individuals, communities, and societies*".

The community psychology approach could be used in this research because the three groups of Karang Werda that being partners in this research,were community. By Kloss et al. (2012:177) community term refered to "Gemeinschaft" concept of Ferdinand Tönnies, a German sociologist. Therefore, a community was group or an association of individuals that characterized chiefly by a strong sense of community identity, close personal relationships, and an attachment to traditional and sentimental concerns.

Karang werda that that been established by Surabaya Government could be categorized as community, that caracterized by common and shared identity, personal relation, as well as strong social support among the members. Karang werda community was formed due to the similarity or proximity of the residence of its members (as locality), as well as the existence of characteristic similarity as the elderly underlying interpersonal interaction among its members (as a relational group) (Bishop, 2002, Kloss et al., 2012). In relation to the concepts, karang werda was a community combined between community as locality and community as relational groups.

Based on the above explanations, this study aimed to: 1) knowing how to implement the six PWB module using community-based in improving elderly's PWB; and 2) encouraging capacity building of the karang werda in managing assets owned by the community based on the principle of "from the elderly, by the elderly, for the elderly".

Method

Research Desain

This research used participatory action research (PAR) design. Through PAR approach researchers engaged with participants to take collective action toward social change (Nelson & Prilleltensky, 2005). Through this research, the researchers together with the three communities implemented the six modules for increasing PWB in elderly. This study applied the principle: from the elderly, by the elderly, and for the elderly. This meaned that the implementation of the elderly PWB improvement module was conducted through activities designed basedon the elderly's notion, and doing by the elderly, and targeted for the elderly.

Setting and Participants

This research was conducted on three community of *karang werda* located in Surabaya. Participants of this study acted as coactor or coreseachers came from three communities that were: 1) Karang Werda Temen Tinemu at Kendangsari Village, 2) Karang Werda Yudistira at Tenggilis Village, and 3) Karang Werda Sukolilo Baru at Sukolilo Baru Village. Each community got 3 modules of the six PWB dimensions. In each implementation of the modules, the host community was asked to invite 11-15 elderly members in their community. Two other elderly groups sent three representatives as participant in each program implementation.

Procedure for implementation of the modules

This research was a follow up of previous research conducted on the three communities of karang werda. In previous research, researchers had designed six modules for improving elderly's PWB. The modules were developed from the six PWB dimensions developed by Ryff and Keyes (1995), namely self-acceptance, positive relation with others, autonomy, environmental mastery, purpose in life, and personal growth. The implementation of the six modules for increasing PWB in elderly in this study were conducted from January 2017 until March 2017, in the following four steps.

1) Module distribution. At the beginning of this study, researchers invited three people from each *karang werda* community to explain the objectives, mechanisms of implementing the PWB modules. At this meeting, the modules were distributed randomly and each karang werda community got two modules. The distribution of the modules was as follows: a) Karang Werda Tinemu got purpose in life, personal growth modules, b) Karang Werda Yudistira got positive relation with others, environmental mastery modules, c) Karang Werda Sukolilo Baru got autonomy, self-acceptance modules.

2) Activity design. Each community after obtaining the modules, was given 2 weeks for discussing in their community the form of activity that perceived appropriate to stimulate the increase of PWB in the elderly based on predetermined PWB dimensions. The chosen activities were expected in link with the asset or resources having by each karang werda.

3) *Activityimplementation.*Implementation of activities were conducted in turns among the three karang werda communities in 6 meetings. The elected community acted as host in implementing the module. Each meeting was attended by the elderly of the host community as well as by three

elderliesfrom each two other communities. Implementation of the moduleswere done alternately on the schedule as shown at Table 1.

4) *Activity evaluation*. Evaluation on module implementations were done 6 times at the end of each meeting. The evaluation of module implementation consisted of 3 aspects, namely: a) suitability of activity with the PWB's dimension, b) suitability of activity with the objective to be achieved, and c) benefit of the activity.

Measures and procedure for evaluation of the modules

Data in this research were obtained through observation, interview, and questionnaire. The three methods of data collection were intended to find out the process of module implementation in increasing the elderly's PWB, and to get input how the elderly community could manage their assets based on the principle: from elderly, by elderly, and for the elderly. Assessment of each module implementation using questionnaire with descriptive quantitative data. Each participant was given an evaluation sheet with a score range from 1 to 5 in which: 1 = poor; 2 = below average; 3 = average; 4 = good; 5 = excellent. Evaluation of the module implementation was analysed by using descriptive quantitative analysis, as well as qualitative descriptive.

Result

To find out how the six PWB modules were implemented and the results were presented as follows.

1. Autonomy

Implementation of autonomy module by Karang Werda Sukolilo Baru demonstrated by how to make various handicrafts using clamshell and scrap wood. Clamshell made for place of tissue, mirror frame, and keychain.Meanwhile scrap wood made for vehicle miniature. The final objective of this activity was to increase the spirit of the elderly to be more productive and independent individuals although his/her physical and psychological condition decreased. Table 2 showed the evaluation from the participants for the implementation of autonomy module. According to Table 2, total mean showed that all of the three aspects rated average to good. Compared with other aspects, benefit of the activity perceived most positively by total mean score of 3.70.

2. Environmental mastery

Environmental mastery module implemented by Karang Werdha Yudhistira Tenggilis in a way ofutilization of vacant land around house or using pot to cultivate family medicinal plants; and

household waste recycling. At the time of implementation, Karang Werdha Yudhistira displayed several family medicinal plants and explained how to plant and benefit from the plant. In addition, Karang Werdha Yudhistira also featured some items of household waste recycling from used bottle such as handphone casing, cup lamp and so on.Karang Werda Yudhistira performed this activity because they saw amount of waste materials surrounding them that could endanger the elderly's health. The purpose of this activity was to create a safe and clean physical and non-physical environment for the elderly by applying the 3R principle of Reuse, Reducing, and Recycle.

During the implementation of this activity, all participants were actively involved. Here are the evaluation results from the participants who attended the event held by Karang Werdha Yudhistira Tenggilis Village. Followingswere the evaluation from the participants for the implementation of environmental mastery module, as shown at Table 3. Results on Table 3 based on total mean showed that all of the three aspects rated average to excellent. Compared with other aspects, benefit of the activity perceived most positively by total mean score of 4.23.

3. Personal growth

Karang Werda Temen Tinemu, Kendangsari implemented personal growth module by demonstrating activity of making 'ongol-ongol' cakes and soy essence.Some reasons why Karang Werda Temen Tinemu selected these activities because according to them, in elderly period, the elderly experienced some changes such as whitened hair, wrinkled skin, weight loss, tooth dislodged. In addition, there were several changes experienced by the elderly that related to psychological life such as feeling been marginalized, no longer been needed, unacceptable of new realities such as palliative diseases. Two other changes that should be faced by elderly, namely social and economic changes. Social change included changing roles, the death of a spouse or close friends. The economic change concerned the financial dependence on pension salary as well as on child or family compassion.Followings at Table 4 were the evaluation from the participants for the implementation of autonomy module by Karang Werda Temen Tinemu, Kendangsari. Table 4 showed that based on total mean, all of the aspects rated average to excellent. Compared with other aspects, benefit of the activity perceived most positively by total mean score of 4.05.

4. Positive relation with others

Implementation of positive relation with othersmodule by Karang Werda Yudhistira, Tenggilis Mejoyo exhibitedin elderly gymnastics and singing with elderly.Some of the reasons why these activitieswere chosen because the community found that the elderly in their community

often showed feelings of loneliness, being not considered by the younger, being unappreciated, failing to establish good relationships among the elderly and with the younger. Our observation as researchers during the implementation of the activities concluded that all participants actively involved and look be happy. Followings were the evaluation from the participants of elderly gymnastics and singing with elderly activities as the implementation of positive relation with others module, as shown at Table 5. Based on Table 5, total mean showed that all of the three aspects rated average to excellent. Compared with other aspects, benefit of the activity perceived most positively by total mean score of 4.22.

5. Purpose in life

Implementation of the purpose in life's module by Karang Werda Temenemu, Kendangsari stimulated by using discussion activity. Their reason for choosing this activity because they found in their community there were many elderlies did not understand the purpose of life in elderly period so they considered themselves to be weakness and helplessness. The absence of purpose in life for the such elderlieshad impact on feeling been uncalm, unhappy, and unpeaceful.During this discussion, some elderly asked questions and other elderly responded to the questions so that there were sharing of opinions and experiences among the elderly.We interviewed two participants and overall, they felt that by the sharing among elderly they were encouraged and found social support in finding their purpose in life so that they became more optimistic in fulfilling their life.Table 6 showed the evaluation from the participants for the implementation of purpose in life module by Karang Werda Temen Tinemu, Kendangsari. Table 6 revealed that based on total mean, all of the aspects rated average to excellent, and the suitability of activities with PWB's dimension rated be highest aspect by total mean score of 4.00.

6. Self-acceptance

Implementation of self-acceptance dimension module was done by Karang Werda Sukolilo Baru   and the community chose two activities that were making broses from shell and having recreation together to Taman Pelangi (Rainbow Garden) located at Kenjeran Beach. The reason Karang Werda Sukolilo in choosing these activities was to increase the productivity of the elderlies in filling their spare time, so that they could be happy and not often daydreaming about his life in old age. The purpose of this activity according to one member Karang Werdha Sukolilo was "to train elderly to remain productive so that he/she is not dependent on others". Table 7 showed the evaluation from the participants in implementation of self-acceptance module by Karang Werda

Sukolilo Baru. Results on Table 7 displayed that one of the three aspects rated below average to excellent. Compared with other aspects, benefit of the activity perceived most positively by total mean score of 3.96.

Discussion

In line with the purposes of this study, there were two points as the focus of discussion related to the results of this study. The first was the process of implementing the modules, and second was the evaluation of the modules' implementation.

1. Process of module implementation by using community approach

In this study, community based approach was designed based on the idea of the elderly, done by the elderly, and finally for the elderly. In other words, this research used participatory action research approach based on elderly community. Participatory action research (PAR) is an approach to research in communities that emphasizes participation and action. PAR seeks to understand the world by trying to change itcollaboratively. PAR emphasizes collective inquiry and experimentation grounded in experience and social history. Within a PAR process, "communities of inquiry and action evolve and address questions and issues that are significant for those who participate as co-researchers" (Reason & Bradbury, 2008).

In this study, PAR approach was purposefully chosen because the we as researchers assumed that the improvement of the elderly's PWB should be done together by the elderly as a community. The elderly were actors who had power and actively involved in increasing PWB among themselves.

One of the challenges experienced by us as researchers in applying this PAR approach was how to transform the paradigm or mindset of the elderly from the old paradigm to the new paradigm. The old paradigm, which has so far been used in interventions for the improvement of elderly's PWB was top-down models. The elderly's PWB improvement programs, so far using top-down model done Surabaya Government such as: supplementary feeding, monthly health check-up, competitions among elderly communities.

Another considerable challenge was how to manage elderly communities to be a solid community in building collective action to increase PWB among them. In building an elderly community as a solid community, we as researchers done collaboration with the partner communities to build a strong social identity in our partner elderly community by several activities as well as shared symbols. Social identity is a person's sense of who they are based on their group membership

(Tajfel, 1979). Karang Werda which each elderly belonged to, become an important source of pride and self-esteem among the elderly.

Based on our empirical experience as co-participants along with the elderly community, through intensive and positive interaction process within the three Karang Werda groups, groups and communities perceived by the elderly could provide a sense of social identity, a sense of belonging to the social world. With such processes, the elderly became proud to be the members group of karang werda, mostly because they in their group can provide meaningful things to themselves and to others around them. In relation to the PWB theory, the elderly in such conditions found themselves instate of self-acceptance, positive relation with others, autonomy, environmental mastery, purpose in life, and personal growth (Ryff, 1989).

In the process of empowering the elderly community through the implementation of modules for the improvement of PWB, researchers elaborated the ABCD approach (asset based community development). ABCD is a strategy for sustainable community-driven development (Dureau, 2013). Based on participatory processes in the three-selectedelderly community partners, this ABCD approach in our points of view has not been fully implemented because of the limited of time and resources in group accompaniment.

2. Evaluation toward module implementation

Program evaluation helps to determine whether community programs effectively attain their goals and how they can be improved (Kloss, et al., 2012). Evaluation result of implementation program for every aspect of PWB, stated in table 2-7 covering three aspect that are suitability of activity with the PWB's dimension, suitability of activity with the objective to be achieved, and benefit of the activity.

From the results of the evaluation it could be known that the implementation of the program on the six dimensions of PWB, generally perceived positively in all of three aspects of evaluation. In general, program implementation for the improvement of PWB on positive relation with others dimension was perceived higher than other programs. Activities such as elderly gymnastics and singing among fellow elderly were selected by Karang Werdha Yudistira in order to create togetherness, giving pleasure and happiness. Nevertheless, we as researcher evaluated that the activities carried out by Karang Werdha Sukolilo Baru to implement self-acceptance module was quite good, but the activities were less appropriate with the theme of self-acceptance dimension in the elderly. This dimension of self-acceptance should be more directed to the readiness of the

elderly to accept the changes that occur in him either physical changes, psychological and social changes.

One other limitation of this research was in evaluating the effectiveness of program implementation since from designing of the impact of program implementation, we as researchers did not use quantitative measurement of pre-test and post-test design.Therefore, although all the program implementations were perceived positively, but their impact on increasing elderly's PWB could not be simply concluded only by using data at the end of each program. Consequently, further measurements are needed so that the sustainability impact of the programs can be accurately monitored.

Conclusion

Based on this research findings, there weretwo main conclusions that could be proposed related to the process and results.

1. According to this research process, the community-based approach used in this study could be proposed as an alternative intervention in empowerment of the elderly community in particular, and other communities in general. A community-based approach (bottom up) could be combined with a top-down approach, and vice versa. However, a community-based approach needed to consider the dynamics in each partner community; different dynamics of course requires a different approach.

2. The results of this research revealed that the increase of PWB in elderly could be done by using intervention modules. However, the result of increasing PWB elderly required sustainable intervention process and more accurate measurement both quantitatively and qualitatively.

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Glossary:

Dinas Sosial : Social Services Bureau

Dispenduk : Dinas Kependudukan or Office of Demographic Affair

Karang werda : Elderly's community

Komda Lansia : Komisi Daerah Lanjut Usia or Regional Commission for the Elderly

LPPM : Lembaga Penelitian dan Pengabdian Masyarakat or Research and Community Service (LPPM)

PWB : Psychological well-being

UPTD : Unit Pelaksana Teknis Daerah or Local Government Technical Implementation Bureau

Tables

Tabel 1. Modules implementation's schedule

No.	Module/Dimension of PWB	Date	Host Community
1	Purpose in life	January 20, 2017	Temen Tinemu, Kendangsari
2	Positif relation with others	February 3, 2017	Yudistira, Tenggilis Mejoyo
3	Autonomy	February 17, 2017	Sukolilo Baru, Sukolilo
4	Personal growth	March 10, 2017	Temen Tinemu, Kendangsari
5	Environmental mastery	March 16, 2017	Yudistira, Tenggilis Mejoyo
6	Self-acceptance	March 31, 2017	Sukolilo Baru, Sukolilo

Table 2. Evaluation toward autonomy's implementation module

Rated Aspects	Average (=3)		Good (=4)		Excellent (=5)		Total	
	N	f	N	f	N	f	N	Mean
1. Suitability of activities with PWB's dimension	6	18	4	16	0	0	10	3.40
2. Suitability of activity with the objective to be achieved	8	24	1	4	1	5	10	3.30
3. Benefit of the activity	4	12	5	20	1	5	10	**3.70**

Table 3. Evaluation toward environmental mastery's implementation module

Rated Aspects	Average (=3)		Good (=4)		Excellent (=5)		Total	
	N	f	N	f	N	f	N	Mean
1. Suitability of activities with PWB's dimension	3	9	16	64	3	15	22	4.00
2. Suitability of activity with the objective to be achieved	4	12	16	64	2	10	22	3.91

3.	Benefit of the activity	2	6	13	52	7	35	22	**4.23**

Table 4. Evaluation toward personal growth's implementation module

Rated Aspects	Average (=3)		Good (=4)		Excellent (=5)		Total	
	N	f	N	f	N	f	N	Mean
1. Suitability of activities with PWB's dimension	6	18	13	52	1	5	20	3.75
2. Suitability of activity with the objective to be achieved	12	36	6	24	2	10	20	3.50
3. Benefit of the activity	5	15	9	36	6	30	20	**4.05**

Table 5. Evaluation toward positive relation with other's implementation module

Rated Aspects	Average (=3)		Good (=4)		Excellent (=5)		Total	
	N	f	N	f	N	f	N	Mean
1. Suitability of activities with PWB's dimension	5	15	15	60	3	15	23	3.90
2. Suitability of activity with the objective to be achieved	2	6	16	64	5	25	23	4.13
3. Benefit of the activity	3	9	12	48	8	40	23	**4.22**

Table 6. Evaluation toward purpose in life's implementation module

Rated Aspects	Average (=3)		Good (=4)		Excellent (=5)		Total	
	N	f	N	f	N	f	N	Mean

1. Suitability of activities with PWB's dimension	4	12	7	28	4	20	15	**4.00**
2. Suitability of activity with the objective to be achieved	4	12	8	32	3	15	15	3.93
3. Benefit of the activity	4	12	9	36	2	10	15	3.87

Table 7. Evaluation toward self-acceptance's implementation module

Rated Aspects	Below average (=2)		Average (=3)		Good (=4)		Excellent (=5)		Total	
	N	f	N	f	N	f	N	f	N	Mean
1. Suitability of activities with PWB's dimension	0	0	9	27	15	60	0	0	24	3.63
2. Suitability of activity with the objective to be achieved	1	2	14	42	7	28	2	10	24	3.42
3. Benefit of the activity	0	0	6	18	13	52	5	25	24	**3.96**