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Analysis of Determinants of the Subjective Welfare of the Elderly in Membwi District, Badung District

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Abstract. KThe subjective well-being of the elderly population is one of the focuses of attention in solving population problems, where the condition of the elderly population is a benchmark for the economic conditions of a region. The increasing problems of the elderly certainly require special attention and handling in the development process. The aim of this study; 1) analyze the simultaneous influence of education level, income, access to health, equal social interaction, and level of religiosity on the subjective well-being of the elderly in Mengwi District; 2) analyze the partial influence of education level, income, access to health, equal social interaction, and level of religiosity on the subjective well-being of the elderly in Mengwi District; 3) analyze the role of the level of religiosity in moderating the influence of equal social interactions on the subjective well-being of the elderly in Mengwi District. The population in this study was residents aged 60 years and over in Mengwi District, namely 19,294 people. Based on calculations using the Slovin formula, the total sample of elderly residents in Mengwi District was obtained as a total of 100 elderly residents from 20 villages/sub-districts in Mengwi District. Sampling was carried out using accidental sampling. Data collection methods were observation, structured interviews, in-depth interviews and data analysis using moderated regression analysis. The research results show; 1) level of education, income, access to health, equal social interaction, and level of religiosity simultaneously have a significant effect on the subjective well-being of the elderly in Mengwi District; 2) level of education, income, access to health, equal social interaction, and level of religiosity partially have a significant positive effect on the subjective well-being of the elderly in Mengwi District; 3) the level of religiosity moderates/weakens the influence of equal social interaction on the subjective well-being of the elderly in Mengwi District.

Keywords: Education level, income, access to health, social interaction

BACKGROUND

Indonesia has experienced a growth in the elderly population that has occurred over the last 50 years. The proportion of elderly people in Indonesia doubled during that period. Indonesia has entered the era of an old population structure. Data from the Central Statistics Agency in 2022 shows that there are already eight provinces that have an elderly population structure that makes up more than 10 percent of the total population, including: DI Yogyakarta, Central Java, East Java, Bali, North Sulawesi, West Sumatra, South Sulawesi, and Lampung.

The increasing proportion of the elderly population requires special handling and attention in the development process. The final stage of the aging process, as experienced by people aged 60 years and over, will have an impact on three aspects, namely economic, biological and social. Indonesian economists support the government's conservative policies and provide important notes (Linblad, 1997). The state must take part in providing attention in the form of empowerment and protection for the elderly so that they are not seen as a burden

on development.

An elderly person is someone who has reached the age of 60 (sixty) years and above. The world's elderly population is growing very quickly compared to other age groups. The proportion of the population that is young or under 15 years old has decreased, although the number is still increasing. Development progress as part of the demographic transition process is believed to be a significant factor in changes in population structure (McDonald, 2015).

The welfare of the elderly population is one of the focuses of attention in solving population problems, the welfare condition of the elderly population is a benchmark for the success of a country's development program. BPS (2017) concluded that over the past few years it has become increasingly recognized that it is important to pay attention to measuring the level of population welfare, not only focusing on monetary or economic aspects, such as the value of goods and services produced in a country within one year as measured by Gross Domestic Product (GDP).) only. Well-being indicators are prepared not only to describe conditions of material prosperity (welfare or well-being), but also more towards conditions of subjective well-being or happiness which influence the quality of life of the elderly. Economic theory studies how humans allocate limited resources to meet their needs and desires, and subjective well-being can be used as one of the goals of this resource allocation, including for the elderly population. If seen from an educational perspective, the elderly population is said to be prosperous if the elderly population has adequate education so that they have good job opportunities. Blanchflower and Oswald (2004) found that individuals with higher levels of education tend to have higher subjective well-being. This study also shows that the level of education can influence subjective well-being by increasing access to resources, increasing control over life, and providing satisfaction with achievements. Having good job opportunities will affect the quality of life and economic conditions. Meanwhile, in terms of health, happy elderly people are elderly people who are in prime condition, healthy, fit and able to carry out their activities well. A study by Diener and Chan (2011) shows that people who feel happier and more satisfied with their lives tend to be physically and psychologically healthier. This study also shows that low subjective well-being can increase the risk of physical illness and mental disorders such as depression and anxiety.

One indicator of the success of government programs such as improving welfare which refers to the quality of life of the population is an increase in life expectancy and an increase in health status. A study by Steptoe & Wardle (2011) shows that high subjective well-being can predict increased life expectancy. The study found that people who felt happier and more satisfied with their lives tended to live longer than those who felt unhappy or dissatisfied. This is due to the fact that people who feel happy and satisfied with their lives tend to have healthier lifestyles, such as exercising regularly and avoiding risky behaviors such as smoking. However, age can also influence a person's subjective well-being. A study conducted by Diener and Chan (2011) shows that subjective well-being generally increases with age, but then tends to decline in old age. A person who has reached old age may face new challenges such as deteriorating health and decreased mobility that affect their subjective well-being.

The increase in the number of elderly basically has both positive and negative impacts. It has a positive impact if the elderly population is healthy, active and productive, while it has a negative impact if the elderly have problems with declining health which results in increased health service costs, decreased income, increased disability, as well as the absence of social support and an environment that is less friendly to elderly population (Dewi Utami & Rustariyuni, 2016). The average life expectancy in Bali Province tends to increase. Based on BPS data, it shows that there is a trend towards increasing life expectancy, as a consequence the number of elderly people (elderly) is increasing (Sudibia, et al. 2014). Next, related tolife expectancyfor each district/city of Bali Province can be seen in Table 1.

Table 1. Life Expectancy in Bali Province by Regency/City (Year), 2020-2022

Regency/City	Life Expectancy According to Regency/City and Gender (Years)							
		Man		Woman				
	2020	2021	2022	2020	2021	2022		
Jembrana	70.40	70.50	71.14	74.22	74.30	74.68		
Tabanan	71.74	71.84	72.13	75.48	75.53	75.88		
Badung	73.26	73.35	73.63	76.77	76.77	77.10		
Gianyar	71.78	71.87	72.16	75.50	75.56	75.91		
Klungkung	69.27	69.44	69.81	73.14	73.27	73.70		
Bangli	68.51	68.61	68.90	72.44	72.53	72.91		
Karangasem	68.47	68.57	68.85	72.38	72.43	72.77		
Buleleng	69.87	69.99	70.29	73.71	73.80	74.18		
Denpasar	72.96	73.08	73.39	76.61	76.68	77.05		
Bali province	70.28	70.39	70.69	74.03	74.17	74.53		

Source: Central Statistics Agency, 2023

Based on Table 1, an increase in life expectancy occurred in all Regencies/Cities of Bali Province during 2020 to 2022, where Badung Regency is the Regency with the highest life expectancy in the last three years where in 2022 Badung Regency's life expectancy has reached

age 75.36 years.

The increasing life expectancy of the population has resulted in an increase in the elderly population. The increase in the composition of the elderly population can be caused by a decrease in birth and death rates. Apart from that, increasing life expectancy can change the overall population structure. An increase in life expectancy reflects an increase in the quality of life. This increase shows the success of human development, but if it is not accompanied by an increase in the quality of the population, it will place a burden on a country's development. The increasing life expectancy indirectly results in an increase in the growth rate of the elderly which tends to be faster, progress in the economic sector, improvements in the living environment and advances in science, as well as advances in medical science, are able to increase life expectancy (Kartika, 2014).

Data from the Central Statistics Agency in 2021 shows that there are still many people aged 60 years and over who work, namely 153,724 men and 139,618 women. The increase in the number of elderly people is accompanied by various problems that arise for the elderly themselves. Several things that support the increase in the number of elderly people are because the socio-economic level of society continues to increase, there is progress in the field of health services and the level of public knowledge is getting better (Sulandri et al, 2009). The increase in the number of elderly people is basically a positive impact of development. Development improves people's standard of living, reduces death rates and increases life expectancy. Indirect development also has a negative impact through changes in family values which have an unfavorable effect on the subjective well-being of the elderly. Development has a negative impact on increasing the prevalence of rural-urban migration, increasing women's economic activity, changing the traditional economic system to a modern economy which reduces the work participation of the elderly (Purwono, 2012).

Badung Regency, which is one of the districts in Bali Province with a percentage of elderly (elderly population) of more than fourteen percent, is facing a significant increase in the number of elderly people. This is reflected in the highest increase in life expectancy among 8 districts and 1 other city in Bali Province. This increase in life expectancy indirectly causes an increase in the number of elderly people, and there is a tendency that this increase will occur more quickly (Ascroft & Cavanough, 2018). The increase in life expectancy also reflects progress in the economic sector, efforts to improve the environment, as well as developments in science, especially in medical science (Dewi et al., 2016). This shows that Badung Regency and Bali Province as a whole are experiencing positive progress in efforts to improve the quality of life of their residents, including the elderly population. Badung Regency's Life Expectancy Rate (AHH) is relatively high and tends to increase over the years. The elderly population for each sub-district in Badung Regency for 2019-2022 can be seen in Table 2.

Table 2. Number of Population Aged 60 Years and Over in Badung Regency (Thousand People) 2019-2022

Subdistrict	2019	2020	2021	2022
Abiansemal	10.57	13.86	14.43	14.82
Kuta	4.42	5.55	5.28	5.52
South Kuta	9.28	12.28	9.74	10.32
North Kuta	7.24	9.22	8.59	9.62
Mengwi	17.06	17.75	18.54	19.28
Evening	3.32	4.41	4.85	4.97
Total	48.10	63.07	61.43	64.53

Source: Badung Regency Population and Civil Registration Service, 2023

Based on data from the Population and Civil Registration Service, the elderly population in Badung Regency is spread across 6 sub-districts, Mengwi District is the sub-district that has the largest elderly population, which from 2019-2022 continues to increase. In 2019 the number of elderly people in Mengwi District was 17.06 thousand people, while in 2022 the number of elderly people in Mengwi District increased to 19.28 thousand people, the highest among the five other sub-districts in Badung Regency. As the number of elderly increases, attention is needed from all parties in anticipating various problems related to population aging. The increase in the number of elderly people requires all parties to pay attention to facing various challenges that arise in connection with the population aging process. Population aging has a significant impact in various sectors, including social, economic, and especially in terms of health. This problem, if no anticipatory efforts are made from now on, will cause obstacles that arise in the development process in the future.

Subjective well-being refers to the level of subjective well-being, life satisfaction, and other positive feelings felt by individuals subjectively. Subjective prosperity is also related to the fulfillment of psychological and economic needs which are reflected in adequate clothing and food needs, affordable education costs and quality health. Factors that influence subjective well-being, namely socio-economic factors (level of education, type of work, income, household conditions, place of residence), demographics (age, gender, culture, marital status), beliefs, social relationships or behavior, certain events in life, health, and other activities.

One important aspect in people's lives that plays a role in improving the quality of life is the level of education. Likewise for the elderly population. The level of education can influence the subjective well-being of an elderly person because good education can increase a person's ability to overcome and understand the various problems they will face in their life. Elderly people with a high level of education will tend to have better subjective well-being than elderly people with a lower level of education. A high level of education can help in providing access to better jobs with higher incomes which can also influence the subjective well-being of an elderly person. Good education can play a role in helping someone to build social skills to establish more positive relationships between individuals which can also improve subjective well-being. Elderly people who reach a higher level of education are generally elderly people who previously had good jobs, so that in their old age they no longer need to work because they are able to support themselves. In contrast to elderly people who have low education, these elderly people are forced to still have to work in their old age to meet their needs only for that time, so that when they enter old age these elderly people do not have savings for their old age (Leonesio et al, 2012).

The economic situation of an elderly person can be viewed through the amount of income an elderly person generates to meet their living needs. This income can come from various sources. Elderly people who are working at their productive age will receive income in the form of pension funds when they stop working, while elderly people who are currently still able to work will receive income in the form of salaries. Apart from that, elderly income can also come from profits from running a business and financial support from other parties such as family, children and the government through social security. In research from Kahneman & Deaton (2010), income variables can influence subjective well-being through several mechanisms, including access to material resources, health, education, and the ability to choose the desired lifestyle. If viewed from an economic perspective, income influences the Subjective Welfare of the elderly population, this is because income in the form of money is a tool to meet a person's living needs.

Utilization and improvement of better access to health is one of the supporting components in the process of maintaining physical and psychological health for the elderly population, because improving components of general welfare and good health services have a positive effect on the quality of life of the elderly population (Cantarero & Potter, 2014). The healthy living behavior of the elderly in the past will influence the physical health of the elderly in the present. Elderly people who in the past did not maintain a good lifestyle, the physical health status of the elderly in the present will decline (Utami et al., 2009). An examination of health access can also be seen from several aspects, including the distance between health services and where the elderly live, the health insurance that the elderly population has, and the existence of social groups that the elderly population joins (Putri et al., 2017). Elderly people who have good health conditions and access tend to have a higher level of Subjective Wellbeing than those who have poor health conditions. By living healthily and rarely experiencing illness, elderly people can enjoy their days in peace without having to suffer. Elderly people who have access to good health will be able to live their lives healthily and happily.

Social interaction is considered one of the local wisdoms of the Balinese people which is based on the awareness that in society they do not live their lives alone, but rather they are integrated into a community order and the surrounding environment. Menyama braya is a social relationship based on kinship and kinship with a spirit of togetherness between members of the community. Basically, Balinese society in general has a collective nature that is still strong in a social system that emphasizes togetherness with interaction systems in customs, in integrative kinship, and in group systems (Sujana, 1994). Intensita Menyama Braya, as one of the local wisdom values, can be the main basis or foundation for maintaining harmony (Ludji, 2020). Social capital can have a strong relationship with the subjective well-being of the elderly. Social capital refers to social networks, norms, and values that facilitate coordination and cooperation between individuals and groups. Social capital can help older people feel more connected to society, get social support, and feel valued by others.

Elderly people who feel they have greater social support and feel appreciated by others tend to have higher subjective well-being. In addition, participation in social and community activities is also associated with higher subjective well-being in older adults. Miarta Putra (2021) in his research, the concept of mebraya braya, is a term commonly used to give identity to other people who do not have kinship ties. Even though there is no relationship between lineages, they still prioritize a sense of togetherness and help each other sincerely. According to Adnan, (1999) the principle of togetherness in human life will have meaning if family life can develop. Prioritizing a sense of kinship in life means having a sense of caring for each other, a sense of wanting to help each other economically and socially. The existence of social support from the community is very valuable and will add to the comfort of life for an elderly person (Kuntjoro, 2002).

The subjective well-being of the elderly population can also be influenced through religious values known as the concept of religiosity. Religiosity is an important factor in the life of an elderly person. This is related to the Subjective Welfare of the elderly because religion can play a role in fulfilling the psychological needs needed by an elderly person in old age by

helping them gain and maintain a sense of meaning in their life and helping them face death and accept the various losses that cannot be avoided in old age. Nashori (2007) in his research stated that the level of religiosity can play a role in reducing negative aspects such as stress, anxiety and hopelessness in individuals. Religiosity is a teaching of goodness that will help guide humans back to the essence of humanity (Keesing, 1999). Elderly people who have high religiosity means trying to learn to practice religious teachings in every aspect of life, so that beautiful and harmonious relationships can be established between each other, the universe and with God.

RESEARCH METHODS

The research design used in this research is a quantitative research design in associative form. This hypothesis was then tested through the data collected in this research. Quantitative research in associative form aims to determine the relationship between two or more variables (Sugiyono, 2017). Associative form, namely research that examines the influence of one variable on other variables or determines the relationship between or more variables. In this research, associative research was used to determine the factors that influence the subjective well-being of the elderly in Mengwi District.

RESEARCH RESULTS AND DISCUSSION

Data Analysis Results

Results of Moderated Regression Analysis (MRA)

Moderated regression was carried out to regress the status variables of education level (X1), income (X2), access to health (X3), equal social interaction (X4), level of religiosity (M), and the interaction of equal social interaction variables and level of religiosity (X4M) on the welfare of the elderly in Mengwi District. Based on the results of data processing, a moderated regression equation can be created as follows:

Y = 1,787 + 0.256 (0.099)

t = (2,103)(2,050)(9,808)(2,291)(2,269)(-2,143)

sig(t) = (0.038) (0.043) (0.000) (0.024) (0.026) (0.035)

R2 = 0.912 F = 104.359 Sig F = 0.000

Information:

Y : Subjective Well-Being of the Elderly

X1 : Level of education

X2 : Income

X3 : Health Access

X4 : Social Interaction with Braya

m : Level of Religiosity

X4M : Interaction between social interactions equals braya

with levelsreligiosity

Statistical Test Results

1) Testing the Effect of Education Level (X1), Income (X2), Access to Health (X3), Social Interaction with Braya (X4), and Level of Religiosity (M) Simultaneously on the Subjective Welfare of the Elderly in Mengwi District (Test F)

F test of the education level variable (X1), income (X2), access to health (X3), equal social interaction (X4), and level of religiosity (M) have a significant effect simultaneously on the variable subjective well-being of the elderly. The results of simultaneous hypothesis testing are shown in table 3.

Table 3. F Test Results

ANOVAa							
Model	Sum of Squares		Df		Mean Square	F	Sig.
1	Regression	2997,442		6	499,574	104,359	,000b
	Residual	445,198		93	4.7878		
	Total	3442.640		100			

Source: Primary Data, 2024

Based on the results of the SPSS regression analysis, it can be concluded that the Fcount value is greater than Ftable, namely Fcount = 104,359 > Ftable = F0.05 (6;93) = 2.20 or with a significance value of 0.000 < 0.05, then H0 is rejected and H1 is accepted, which means that the education level variable, income, access to health, equal social interaction, and level of religiosity simultaneously have a significant effect on the subjective well-being of the elderly in Mengwi District. This is supported based on the results of the moderation regression analysis, obtaining an R2 value of 0.912. This means that 91.2 percent of the variation in subjective well-being of the elderly in Mengwi District is influenced by variations in education level (X1). income (X2), access to health (X3), equal social interaction (X4), and level of religiosity (M), while the majority, namely 8.8 percent, is influenced by other variables not included in the research.

2) Testing the Effect of Education Level (X1), Income (X2), Health Access (X3), Social Interaction with Braya (X4), and Level of Religiosity (M) on the Welfare of the Elderly in Mengwi District (t Test)

The t test aims to determine the effect of education level (X1), income (X2), access to health (X3), equal social interaction (X4), and the level of religiosity (M) partially affect the subjective well-being of the elderly in Mengwi District, shown in table 4.

Table 4. t test results

	Coefficientsa								
		Unstandardized Coeffice Standardized Coeffice	t	Sig.					
1	(Constant)	B Std. Error	Beta	,220	,808,				
-	Level of education	,256.122	,148	2,103	,038				
	Income	7.110E-7,000	.143	2,050	,043				
	Health Access	2,074.211	,610	9,808	,000				
	Social Interaction Equals Braya	2,5531,115	,662	2,291	.024				
	Level of Religiosity	3,0821,358	,808,	2,269	.026				
	Interaction of X4 with M	212,099	-1,253	-2,143	,035				

Source: Primary Data, 2024 (Appendix 6)

Based on Table 4, the education level variable has a t valueThe calculated value is 2.103, while the calculated table value is t(a, df) = t(0.05:93) = 1.661. Thus, the tcount value is greater than ttable, namely with a significance of 0.05, so H0 is rejected and H1 is accepted, meaning that the level of education partially has a positive and significant effect on the subjective well-being of the elderly in Mengwi District. Furthermore, it is known that the coefficient value for education level is 0.256, meaning that if every year the success of the elderly increases by 1 year, it can increase the subjective well-being of the elderly by 0.256 points, assuming that other variables are considered constant at a significance level of 5 percent.

The results of calculating the income variable obtained the t valueThe calculated value of 2.050 is greater than ttable, namely 1.661 with a significance value of 0.05, so Ho is rejected and H1 is accepted, meaning that income partially has a positive and significant effect on the subjective well-being of the elderly in Mengwi District. Furthermore, it is known that the income coefficient value is 0.0000007110, meaning that if the elderly's income increases by Rp. 1,000,000 can increase the welfare of the elderly by 0.711 points assuming other variables are considered constant at a significance level of 5 percent.

The results of calculating the health access variable obtained the t valueThe calculated value of 9.808 is greater than ttable, namely 1.661 with a significance value of 0.05, so Ho is rejected and H1 is accepted, meaning that access to health partially has a positive and significant effect on the welfare of the elderly in Mengwi District. Furthermore, it is known that the health access coefficient value is 2,074, meaning that if health access increases by 1 point, it can increase the welfare of the elderly by 2,074 points assuming that other variables are considered constant at a significance level of 5 percent.

The results of the calculation of the social interaction variable equal braya, obtained a tount value of 2.291 which is greater than ttable, namely 1,661 with a significance value of 0.05, so Ho is rejected and H1 is accepted, meaning that social interaction equal braya partially has a positive and significant effect on the subjective well-being of the elderly in Mengwi District. Furthermore, it is known that the social interaction coefficient value equals 2.553, meaning that if health access increases by 1 point, it can increase the welfare of the elderly by 2.553 points assuming other variables are considered constant at a significance level of 5 percent.

The results of calculating the religiosity level variable obtained the t valueThe calculated value of 2.269 is greater than the table, namely 1.661 with a significance value of 0.05, so H0 is rejected and H1 is accepted, meaning that the level of religiosity partially has a positive and significant effect on the welfare of the elderly in Mengwi District. Furthermore, it is known that the coefficient value for the level of religiosity is 3.082, meaning that the level of religiosity increases by 1 point, which can increase the welfare of the elderly by 3.082 points, assuming that other variables are considered constant at a significance level of 5 percent.

The variable level of religiosity (M) moderates the relationship between the equal social interaction variable (X4) and the welfare of the elderly (Y) in Mengwi District. The significance value of the religiosity level variable (M) is actually 0.026, then the significance value of the interaction between the social interaction variables is equal to the religiosity level (X4M) of 0.035. The significant value of each religiosity level variable (M) and the interaction between the social interaction variables is the same. Braya and the level of religiosity (X4M) are both smaller than the level of significance used of 0.05 so that both variables are significant. Therefore, the variable level of religiosity (M) is a pseudo-moderating variable. The coefficient value of the interaction variable between the social interaction variable equals braya and the

level of religiosity (X4M) is -0.212 and significant, for the coefficient of the variable social interaction equals braya (X4) is 2.553 and significant. Therefore, the variable level of religiosity (M) acts as a moderating variable that weakens the influence of equal social interaction (X4) on the subjective well-being of the elderly (Y) in Mengwi District.

Discussion of Research Results

Based on the results of data analysis and testing carried out, it can be stated that the list of questions and models used in this research are valid. The independent variables have each been tested for their relationship to the dependent variable in this research, namely the subjective well-being of the elderly. The first independent variable in this research is the level of education. The research conducted in Mengwi District showed that the level of education had a positive and significant effect on the subjective well-being of the elderly in Mengwi District, seen from the coefficient value which had a positive value of 0.256 with a significant value of 0.038. These results are supported by previous research by Dang (2019) which stated that the level of education has a positive and significant effect on the subjective well-being of the elderly. Through education, both formal and informal education and a high level of education can also determine a person's ability to choose or get a job and income which will influence his ability to meet life's needs (Putri Dharmayanti, et al, 2017). A high level of education is closely related to an elderly person's better knowledge and results in a higher level of welfare.

The variable in the second study is income. Income in this study has a positive and significant influence on the subjective well-being of the elderly in Mengwi District, seen from the coefficient value of 0.0000007110 and a significant 0.043. These results are in line with previous research conducted by Wang, Y & Zhang (2022) where the income variable influences the level of subjective well-being of the elderly. Viewed from an economic perspective, income can influence the welfare of the elderly, because income in the form of money is a means to meet a person's living needs. This research is also strengthened by the results of an interview with I Ketut Karsa, 60 years old, an elderly person living in Sading Village, Mengwi on February 22 2024, who said that:

"My main income currently comes from my salary as a teacher. Income is important for me to meet my daily needs in old age and to help my children and grandchildren at home."

By fulfilling their food needs, the elderly will be more prosperous. This research illustrates that an elderly person who has a high income can improve the subjective well-being of the elderly. The results of this research are supported by research from Kartini and Kartika (2020) which states that income has a positive and significant effect on the welfare of the elderly population. Income in the form of money is a tool to meet a person's living needs. One of the welfare factors is the fulfillment of an adequate standard of living.

The variable in the third study is health access. In this study, the health variable has a positive and significant influence on the subjective well-being of the elderly in Mengwi District, seen from the coefficient value of 2.074 and a significant 0.000. These results are in line with research by Arissuhandana & Yasa (2022) which shows that the health access variable has a positive correlation. Improved levels of health access will support the health and well-being of the elderly. Maximum utilization and improvement of access to health is one of the supports in the process of physical and psychological health for the elderly, because environmental components, general welfare and good health services will have a positive influence on the quality of life of the elderly (Cantarero & Potter, 2014). This research is also strengthened by the results of an interview with Wayan Alon, 71 years old, an elderly person who lives in Abianbase Village, Mengwi on February 24 2024, who said that:

"For an elderly person like me, access to health is an important factor because having access to health close to where I live will make it easier to get checked out for treatment of the disease I suffer from."

The variable in the fourth study is social interaction Menyama Braya. In this study the Social Interaction variable Mesama Braya has a positive and significant influence on the subjective well-being of the elderly in Mengwi District, seen from the coefficient value of 2.553 and a significant 0.024. This research is also strengthened by the results of an interview with Ni Nyoman Nerki, 64 years old, an elderly person who lives in Lukluk Village, Mengwi on 19 February 2024, who said that:

"By interacting with the community, such as when helping in preparing religious activities, I can gather with my peers who make me feel like I exist and am respected as an elderly person."

These results are in line with research conducted by Basyir (2016) where equaling braya as a local wisdom value which contains concepts regarding what is considered valuable, valuable, important and correct which must be implemented in everyday life is expected to function as a guidelines for social life. The results of this research are supported by research by Bradshaw, et al (2011) where the factors that play a role in well-being can be through relationships with relatives, the environment and relationships between individuals.

The variable in the fifth study is the level of religiosity. In this study, the variable level of religiosity has a positive and significant influence on the subjective well-being of the elderly in Mengwi District, seen from the coefficient value of 3.082 and a significant 0.026. This

research is strengthened by the results of an interview with Ni Ketut Suardani, 63 years old, an elderly person who lives in Sempidi Village, Mengwi on February 26 2024, who said that:

"I pray every day and pray, as a Hindu it has become a habit because I can feel peace and tranquility when I do it and it feels like something is missing when I don't do it."

These results are in line with previous research from Ratih Pratiwi & Indrajaya (2022), the level of religiosity encourages an increase in the welfare of the elderly population in Marga District, Tabanan Regency. The results of this research are supported by research by Pamungkas, et al (2013) where religiosity can provide moral assistance to the elderly in facing a mental crisis, namely anxiety in facing a mental crisis, namely anxiety in facing death or death. Religiosity can improve the quality of life towards mental balance, including reducing anxiety experienced by the elderly. Elderly people in their old age tend to fill their time by studying the level of religiosity in order to give the elderly a sense of satisfaction as time goes by, they will get closer to the Creator.

The variable interaction between equal social interaction and the level of religiosity in this study has a negative and significant effect on the subjective well-being of the elderly in Mengwi District, seen from the coefficient value of -0.212 and a significant 0.035. The variable level of religiosity plays a weakening role in moderating the influence of pseudo-equal social interactions on the subjective well-being of the elderly in Mengwi District. The results of this research are in line with Murniti & Amara's (2023) research that the implementation of Hindu religious teachings in the Lontar Krama Pura at Tirta Empul Temple contains about cuntaka, that living as a human being according to Hinduism should understand about Cuntaka in order to improve the quality of holiness. People are said to be Cuntaka because there are causes such as death, menstruation and resentment because they are sick. The level of religiosity can be weakened if attending a place of ignorance will make people with a high level of religiosity reduce social interactions altogether. A high level of religiosity means trying to learn to practice religious teachings in every aspect of life, so that beautiful and harmonious relationships can be established between fellow religious believers and with the Creator.

CONCLUSION

Based on the results of the discussion and description previously presented, the following conclusions can be drawn:

1) Level of education, income, access to health, equal social interaction and level of religiosity simultaneously influence the subjective well-being of the elderly in Mengwi District, Badung Regency.

- 2) Level of education, income, access to health, equal social interaction, and level of religiosity have a positive and significant effect on the subjective well-being of the elderly in Mengwi District, Badung Regency.
- 3) The level of religiosity acts as a moderating variable that weakens the influence of social interaction variables equally on the subjective well-being of the elderly in Mengwi District, Badung Regency.

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