



Social Innovation through the Integrated Elderly Family Development Program in Pekanbaru City

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A B S T R A C T

This study aims to evaluate the effectiveness of the Integrated Elderly Family Development Program (BKL) in Pekanbaru and to identify areas needing improvement to enhance the well-being of the elderly optimally. This research employs a qualitative method with data collection techniques, including interviews, observations, and documentation, and utilizes Nvivo 12 Plus for data analysis. The findings indicate that the social innovation within the BKL Program in Pekanbaru includes the integration of health services, social welfare, economic improvement, food security, and social support through Posyandu Lansia and PUSAKA; the implementation of a comprehensive approach involving various activities in a single location; and cross-sector synergy to enhance coordination and effectiveness of services. However, key challenges include inadequate cross-sector coordination leading to a lack of synchronization in services, limitations in health services that may result in a deterioration of health among the elderly, and economic non-productivity exacerbating the economic burden on families and the community. Addressing these challenges requires better coordination mechanisms, improvements in access and quality of health services, and the integration of economic empowerment programs to support the independence of the elderly. This research contributes to the understanding how integrated social innovation can be applied to improve the well-being of older adults.

INTRODUCTION

The health and well-being of the elderly is an essential and urgent aspect because the elderly population continues to increase in many countries (Jin et al., 2021; Liang et al., 2017), including Indonesia. Based on the Indonesian Population Census in 2023, almost 12 percent or around 29 million of Indonesia's population is in the elderly category (BPS, 2023). Empirically, research shows that elderly people face various health challenges, such as chronic diseases, decreased physical and cognitive function, as well as psychosocial problems such as loneliness and depression (Campos et al., 2024; Carrasco et al., 2022; Lau et al., 2023; Xiang et al., 2024). This condition not only impacts the quality of life of elderly individuals but also burdens the national health and economic system (Galappaththi et al., 2023; Yang et al., 2024). Therefore, it is essential to ensure that elderly people have access to adequate health services, social support, and an environment that supports their well-being so they can live with dignity and prosperity.

The welfare of the elderly is an issue that is receiving increasing attention in social research and public policy, along with the increasing elderly population in various countries, including Indonesia (Saputra et al., 2024). The well-being of the elderly includes physical, psychological, social, and economic dimensions that are interrelated to ensure optimal quality of life in old age (Jensantikul & Aimimtham, 2023). Other research shows that factors such as access to health services, family support, social participation, and economic stability play an important role in determining the well-being of the elderly (Dai, 2019; Szulecki et al., 2024; Xu et al., 2021). In addition, programs such as Elderly Family Development in Indonesia have focused on strengthening family functions as a primary form of support in improving the welfare of the elderly (Nabila et al., 2024).

However, challenges remain, including social stigma, disparities in access to health services, and low levels of technological literacy among older adults (D'Ambrosio & Boriati, 2023; Kwok et al., 2024). Seniors in rural areas, for example, often face more significant access barriers than those in urban areas. Apart from that, poorly integrated public policies are also an obstacle to creating equitable welfare for the elderly (Mustari et al., 2024). Therefore, community-based approaches, adaptive technologies, and inclusive policy interventions are critical to comprehensively address this issue (Choi et al., 2022; Šolcová et al., 2022). Thus, efforts to improve the welfare of the elderly require a holistic approach that includes cross-sector collaboration, community empowerment, and policy integration to create sustainable and inclusive solutions.

Special programs to improve the welfare of the elderly are vital, considering the complexity of the needs and challenges this group faces. The program should be designed holistically by covering health, social and economic aspects, such as mobile health services that reach older adults in remote areas, digital skills training to increase technological literacy, as well as economic empowerment programs through productive activities according to the elderly's abilities (D'Ambrosio & Boriati, 2023; Hu et al., 2020; Taylor, 2024). In addition, strengthening family support through education for family members about elderly care is also an essential element (Bayter et al., 2018). Implementation of this program requires synergy between government, community organizations, and the private sector to ensure its sustainability and significant impact. Regular monitoring and evaluation are also needed to assess the program's effectiveness and adapt it to the growing needs of the elderly.

The welfare of the elderly is a multidimensional issue that requires cross-sector attention, both from policy, social and economic aspects. Although various programs such as Elderly Family Development have shown potential in increasing family

support, fundamental challenges such as gaps in access to health services, social stigma, and low technological literacy are still significant obstacles. The proposed solutions, including community-based approaches and adaptive technology, require synergy between stakeholders and a strong government commitment to create more integrated policies. However, these efforts will only be practical with regular evaluation and adaptation to the needs of older adults who continue to change. Therefore, more innovative and responsive steps are needed, including making older adults active subjects in the policy formulation process, not just beneficiaries, to ensure the sustainability and actual impact of the programs being designed.

The government needs to be the leading actor in ensuring the health and welfare of the elderly because it has the responsibility to protect and improve the quality of life of all its citizens (Chatterjee, 2019; Galappaththi et al., 2023), including vulnerable elderly groups (Grundy, 2006). As a policy maker, the government has the authority to design and implement comprehensive and sustainable health programs, such as free health services or drug subsidies for the elderly, as well as social support programs and the provision of elderly-friendly infrastructure (Hynd et al., 2008; Jiang et al., 2022; Xiao et al., 2022). Apart from that, the government also has a role in educating the public about the importance of elderly care and building a collaborative network between the public and private sectors to ensure that elderly people receive adequate services (Timonen & Doyle, 2007). Thus, the government's active role is critical in creating a fair and inclusive system for the welfare of the elderly.

Public policies regarding older people vary across countries but generally focus on social protection, health services, and community support. In developed countries such as Japan and Sweden, elderly policies are very comprehensive, with robust social security systems, including adequate pensions, universal health insurance, and long-term care services (Asuda & Ojima, 2001; Nagashima & Furuse, 2022; Stahlberg, 2018). Japan and Germany, for example, have "Long-Term Care Insurance" that ensures access to care for elderly people in need (Campbell et al., 2010). On the other hand, developing countries such as Indonesia are still in the early stages of developing elderly policies, with programs that are more focused on social assistance and essential health services (Luthfi & Hanri, 2023; Madyaningrum et al., 2018). However, some developing countries, such as Thailand, are starting to adopt more inclusive policies, including increasing access to health services and community-based elderly welfare programs (Aung et al., 2022). In general, to increase attention to the welfare of the elderly, social innovation is needed.

Social innovation is an essential strategic approach to overcoming various social challenges faced by society (Ascanio et al., 2023; Blanchet, 2024). This innovation not only focuses on solving existing social problems but also on developing new ideas, products, and services aimed at improving the quality of life and welfare of society (Burmeister & Wohlfahrt, 2016). By integrating various sectors—both public, private, and civil society—and creating new institutional relationships, social innovation is able to drive sustainable and far-reaching change. The main criteria for social innovation include the ability to increase individual and community capacity, as well as promote sustainability in various aspects of social life (Dall-Orsoletta et al., 2022; Dejene et al., 2024). Therefore, social innovation acts as a significant driver of transformation in an effort to create more

effective and efficient solutions to social problems that have not been resolved or have not undergone optimal change.

Pekanbaru, as a developing city, faces challenges in implementing the Integrated Elderly Family Development Program (BKL), which aims to improve the welfare of the elderly. In Pekanbaru, this program has been implemented through 31 BKL groups spread across 15 sub-districts. Even though this program is designed to empower elderly people to live independent, healthy, and productive lives, several problems remain in its implementation. One of the main challenges is that cross-sector coordination is not yet optimal, especially in terms of collaboration between the Health Service, Social Service, and Family Planning field instructors. This resulted in the health services provided through Posyandu for the Elderly and PUSAKA not running optimally, so several BKL members experienced a decline in their health.

Apart from that, many BKL members in Pekanbaru still need economic constraints, where they do not have gainful employment, thus becoming a burden on their families. Although the Integrated BKL program aims to overcome this problem by providing assistance and training that focuses on improving the economic welfare of the elderly, the results are not yet apparent. Therefore, social innovation through this program needs to be improved, including strengthening coordination between sectors and providing more comprehensive support to the elderly so that they can contribute positively to their communities. This research is essential to evaluate the extent to which the implementation of the Integrated BKL program in Pekanbaru City is running and identify areas that require improvement in order to achieve program objectives optimally.

Previous studies on the Elderly Family Development (EFP) program generally highlight the importance of the role of family and social support in improving the welfare of the elderly, as well as the effectiveness of community-based interventions in health and psychosocial aspects (Nabila et al., 2024; Saputra et al., 2024). However, most of these studies are still descriptive and have not in-depth evaluated the challenges of implementing the program across sectors, especially in a complex urban context such as Pekanbaru City. In addition, the social innovation approach as a strategy to improve program integration and strengthen cross-actor participation has not been widely discussed as a primary focus in previous studies. Thus, this study presents an important empirical contribution through an in-depth analysis of the implementation of the Integrated Elderly Family Development Program in Pekanbaru, emphasizing the aspects of social innovation and cross-sector collaboration to overcome existing obstacles and optimize program achievements.

Although the number of elderly people in Indonesia continues to increase and the importance of their health and well-being is increasingly pressing, existing research focuses more on the general health challenges faced by the elderly, such as chronic diseases, cognitive decline, and psychosocial problems. However, there is a lack of comprehensive analysis of how innovative social programs can be implemented effectively and integrated to overcome these challenges, especially in urban contexts such as Pekanbaru. The implementation of the Integrated Elderly Family Development Program (BKL) in Pekanbaru is currently facing significant obstacles. This shows that there is a research gap in evaluating the effectiveness of the program.

The search results in the Scopus and Google Scholar databases in June 2025 showed only 78 relevant documents discussing the elderly family development program. However,

not many studies specifically examine the aspect of social innovation in this context.

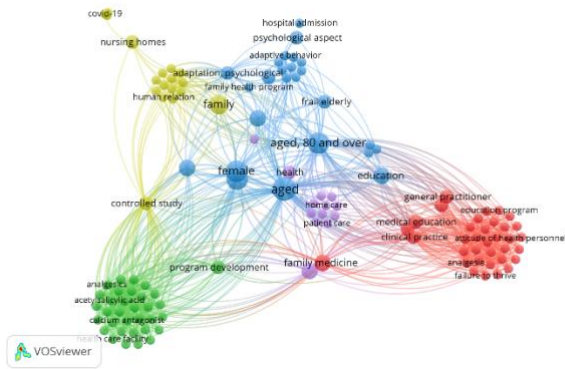


Figure 1. Current topic mapping

Source: Optimized by researchers with Vosviewer (2025)

This shows the novelty of this study because it integrates the social innovation approach into the context of Elderly Family Development, which has not been widely explored in previous literature. Thus, this study provides theoretical and practical contributions to expanding the understanding of how social innovation can strengthen the effectiveness of family-based programs for the elderly, especially in Indonesia.

This study aims to explore innovation in the implementation of the Integrated Elderly Family Development Program in Pekanbaru City and analyze the various challenges faced in its implementation. Based on these objectives, the formulation of the problem in this study is focused on two main questions, namely: (1) What is the form of innovation in the implementation of the Integrated Elderly Family Development Program in Pekanbaru City? Moreover, (2) What are the challenges faced in the implementation of the Integrated Elderly Family Development Program in Pekanbaru City? This study is expected to provide a deeper understanding of the effectiveness of the program and its contribution to improving the welfare of the elderly.

METHOD

The research method used is qualitative research, which aims to obtain an in-depth understanding of the phenomenon being studied. The types of data used in this study consist of primary data and secondary data. Primary data was obtained through interviews and direct observation at the research location. Meanwhile, secondary data was obtained through documentation that includes official reports, scientific literature, and online news collected from various media portals. Interviews were conducted with informants who were considered relevant and related to the formulation of research questions. The selected informants included the Head of the National Population and Family Planning Agency for Riau Province, the Head of the Pekanbaru City Population and Family Planning Control Service (DISDALDUK KB), the Head of the Pekanbaru City Health Service, the Head of the Pekanbaru City Social Service, Family Planning Instructors/KB Field Instructors, and Community Development Cadres Family. Observations are carried out to gain a better understanding of natural conditions in the field, while documentation collects data from documents such as reports, scientific literature, and other related information.

The research process begins with drafting interview questions that are relevant to the problem formulation. After the draft was prepared, interviews with the selected informants were

carried out. Apart from interviews, news from online media regarding the Elderly Family Development program was collected. The news was taken from various news portals, both national and regional, and saved using the Google Chrome browser. News data is captured using the Ncapture extension that has been installed in the browser. To achieve efficiency and effectiveness in data collection, the Ncapture feature is used to download news articles and import them into the Nvivo 12 Plus software. NVivo is software specifically designed for qualitative data analysis. Using Nvivo 12 Plus, data collected from interviews, observations, and documentation were organized and analyzed systematically.

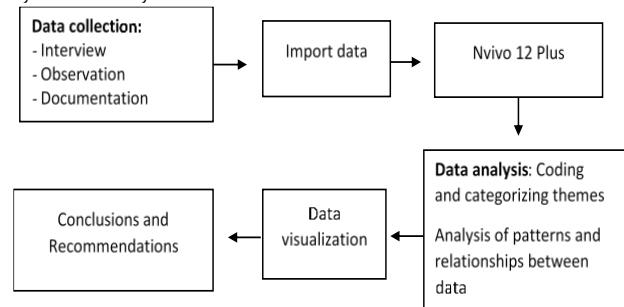


Figure 2. Research stages

Source: Edited by researcher (2025)

This stage helps to formulate conclusions and make recommendations based on the findings of the data analysis.

RESULTS AND DISCUSSION

Innovation of the Integrated Elderly Family Development Program in Pekanbaru City

Innovations in the Integrated Elderly Family Development Program (BKL) in Pekanbaru City include several main points as follows:

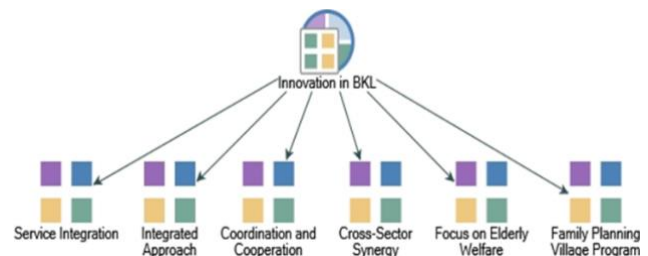


Figure 3. Several main points in the BKL program

Source: Optimized by researchers with Nvivo 12 Plus (2024)

The integration of services in the Integrated Elderly Family Development Program (BKL) aims to combine various aspects of services needed by the elderly in one integrated system. This program includes health, welfare, family economic improvement, food security, and social welfare services, which are distributed through the Elderly Posyandu and Family Compensation Center (PUSAKA). With this approach, seniors receive comprehensive and coordinated assistance, ensuring that all their needs are met holistically and efficiently. This integration not only strengthens the support provided but also facilitates seniors' access to various services, thereby improving their quality of life and overall well-being.

An integrated approach in the Elderly Family Development (BKL) program is carried out by consolidating all services into one location, involving cadres and the community. In this approach, various activities are carried out simultaneously,

including counseling, family meetings, home visits, and mentoring. This model aims to facilitate better coordination and communication, as well as ensuring that all aspects of elderly needs—health, welfare, and social support—are served comprehensively and integrated in one integrated activity. In this way, it is hoped that services to the elderly can be more effective and have a more significant positive impact in improving their quality of life.

Coordination and cooperation in the Elderly Family Development (BKL) program involves the formation of a solid working network between implementers and managers of BKL activities, Posyandu for the Elderly, and PUSAKA. This process includes preparation, implementation, and evaluation stages, with the aim of ensuring that all related parties work in synergy to provide effective and comprehensive services. This close coordination is essential to minimize service overlap, optimize resources, and ensure that the needs of elderly people can be met comprehensively and sustainably. With continued coordination and cooperation efforts, it is hoped that the BKL program can have a significant impact in improving the welfare of the elderly in society.

Cross-sector synergy in implementing the Elderly Family Development (BKL) program involves various related sectors such as the Health Service (puskesmas), Social Service, and Family Planning field instructors. This collaboration ensures that the services provided cover various aspects of elderly needs, from health and social welfare to improving the family economy. By engaging these sectors in an integrated manner, BKL programs can utilize the expertise and resources of various institutions to provide holistic and effective services. This cross-sector synergy aims to create a more comprehensive approach to supporting the well-being of the elderly and ensuring that they receive assistance that suits their needs.

The focus on the welfare of the elderly in the Elderly Family Development (BKL) program aims to create elderly who are resilient and able to adapt to the aging process positively. This program seeks to ensure that the elderly are in a comfortable environment and are physically, socially, and mentally healthy. With this approach, it is hoped that elderly people can live out their old age with a high quality of life, remaining active, productive, and independent. This includes support in aspects of health, social well-being, and participation in community activities that improve their overall quality of life. This approach underlines the importance of integration between social support and health to improve the quality of life of the elderly holistically and sustainably.

The Family Planning (KB) village program integrates Elderly Family Development (BKL) groups into existing structures in 15 sub-districts in Pekanbaru City to ensure comprehensive support for the welfare of the elderly. Through this integration, the Family Planning Village program enables better coordination between the various services that older people need, including health, social welfare, and economic support. By utilizing the KB Village network, efforts to empower and improve the quality of life of the elderly can be carried out in a more structured and coordinated manner, ensuring that the elderly get maximum benefits from the various programs available. This approach emphasizes the importance of community-based management in supporting the welfare of the elderly comprehensively and sustainably.

Challenges of the Integrated Elderly Family Development Program in Pekanbaru City

In implementing the Elderly Family Development Program (BKL), there are a number of significant challenges that affect the effectiveness and success of the program.

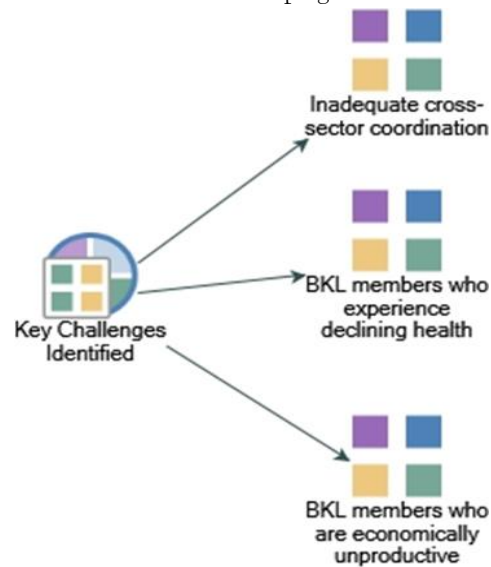


Figure 4. Several obstacles in the BKL program

Source: Optimized by researchers with Nvivo 12 Plus (2024)

The main obstacles in implementing the Elderly Family Development Program (BKL) involve several critical aspects that need to be addressed to increase the effectiveness of the program. First, cross-sector coordination often does not work correctly, resulting in a lack of synchronization between the various services and supports available to older people. This misalignment can cause overlaps or deficiencies in the delivery of health, social, and economic services to BKL members. Better coordination between the Health Service, Social Service, Family Planning field instructors, and other related institutions is essential to ensure that all aspects of elderly welfare can be accommodated in a comprehensive and integrated manner.

The long-term risk of a lack of cross-sector coordination in the implementation of the Elderly Family Development Program (BKL) could have a negative impact on the overall effectiveness of the program. Without adequate synchronization between various institutions, the possibility of duplication or deficiencies in services increases, which in turn can result in reduced service quality and dissatisfaction among BKL members. This can worsen the health, social, and economic conditions of the elderly and hinder the achievement of program goals to improve their overall quality of life. To mitigate this risk, the need to strengthen coordination and integration mechanisms between related sectors is crucial in ensuring more efficient and effective services.

To overcome cross-sector coordination challenges, it is essential to build a more effective and structured coordination mechanism between the various parties involved in the Elderly Family Development (BKL) program. Implementing an integrated project management system involving representatives from the Health Service, Social Service, Family Planning field instructors, and other related institutions can strengthen communication and collaboration. The use of information technology, such as digital platforms, to share data and monitor developments can also improve coordination and transparency between sectors. With this approach, it is hoped that all aspects

of services can be integrated holistically, reducing duplication and increasing the effectiveness of service delivery to the elderly.

The second challenge is that there are still BKL members who experience declining health due to less-than-optimal health services. Although the BKL program is designed to improve the welfare of the elderly, limitations in health services, such as limited access, lack of medical facilities, or inadequate quality of service, can cause ongoing health problems. Improving access and quality of health services for the elderly must be a priority so that they can receive care that suits their needs.

If access to health services remains limited and the quality of services is inadequate, there will likely be a decline in more severe and chronic health conditions among the elderly. This can worsen the health burden, increasing the need for more intensive and expensive medical care in the future. In addition, declining health can result in a decrease in the quality of life and productivity of older adults, which in turn can burden families and the health system as a whole. Therefore, improving access to and quality of health services is a crucial step to prevent long-term negative impacts and ensure the success of the BKL program.

Third, BKL members who are economically unproductive pose a significant challenge. Many BKL members need jobs that can generate income, so they become an economic burden on their families. The BKL program needs to include an economic empowerment component, such as skills training, small business support, or access to job opportunities that suit the abilities of seniors. This is important to increase the economic independence of the elderly and reduce their dependence on family. The long-term risk of the economic incapacity of unproductive members of Elderly Family Development (BKL) can have a severe impact on the economic stability of the family and society.

When older adults do not have adequate sources of income, they tend to rely on financial support from family members or social programs, which can cause additional economic burdens on families and social welfare systems. This can worsen poverty among the elderly, increase family economic instability, and hinder efforts to achieve economic independence for the elderly. Therefore, it is essential to integrate elements of economic empowerment in the BKL program, such as skills training and business support, to reduce economic dependence and promote sustainable independence and the welfare of the elderly.

To overcome the problem of declining health and economic unproductivity of BKL members, strategies need to be implemented that include improvements in health services and economic empowerment. Increasing access to health services can be done through developing more adequate medical facilities, improving the quality of services, and providing training for health workers regarding the unique needs of the elderly. On the economic side, empowerment programs that include skills training, small business support, and access to suitable employment opportunities should be introduced. By focusing on improving the physical and financial well-being of seniors, the BKL program can create an environment that better supports seniors' independence and overall quality of life.

An example of a country that can be a reference for the Pekanbaru government in reducing challenges in implementing the Elderly Family Development Program is Japan. Japan has succeeded in implementing a comprehensive elderly care system through an integrated approach involving coordination between the health, social, and economic sectors. The "Long-Term Care Insurance" program in Japan provides comprehensive health services and social support for the elderly, including home care,

nursing centers, and social welfare support (Asuda & Ojima, 2001; Campbell et al., 2010; Nagashima & Furuse, 2022). In addition, Japan also focuses on the economic empowerment of the elderly through various skills training programs and employment opportunities, which help the elderly remain economically active (Inaba, 2016). The integrated approach and diversity in this strategy can inspire the Pekanbaru government to overcome similar challenges and increase the effectiveness of the BKL Program.

The description of the results of this study shows that the application of the concept of social innovation in the Elderly Family Development Program (BKL) can improve the welfare of the elderly through an integrated approach involving health services, social protection, economic development, and food security. Social innovation in this context is characterized by cross-sector collaboration, community participatory approaches, and the use of local resources to address social challenges sustainably (Pache et al., 2022; Sadabadi & Rahimi Rad, 2022). The dimensions of social relevance and effectiveness of implementation are important indicators in assessing the success of this social innovation, where the integration of services through the Elderly Posyandu and the integration of BKL groups into the Kampung KB structure indicate innovative efforts in redesigning public services that are more responsive to the needs of the elderly.

However, the research results also reflect that the challenges of cross-sector coordination, limited health services, and low economic productivity among the elderly indicate that the dimensions of innovation capacity are still weak, especially regarding project management and information technology. For this reason, strengthening organizational capabilities is needed through a more structured coordination system and technology to support better cross-sector synergy (Blanchet, 2024). Sustainable social innovation in the BKL program must pay attention to scalability indicators, local actor involvement, and long-term impacts; hence, integrating quantitative approaches in further research is important to objectively and accurately measure results.

CONCLUSION

A holistic approach that combines various aspects of services—such as health, social welfare, economic improvement, and food security—can improve the quality of life for seniors. By integrating services through Posyandu for the Elderly and PUSAKA, as well as implementing an integrated approach in one location involving various activities such as counseling and mentoring, this program seeks to provide comprehensive support. Cross-sector synergy and a focus on the welfare of the elderly, which is oriented towards creating a comfortable and healthy environment, together with the integration of the BKL group into the KB Village structure, shows that good collaboration and coordination can optimize the benefits received by the elderly and improve the overall effectiveness of the program.

However, several main challenges were found in implementing the Elderly Family Development Program (BKL). First, cross-sector coordination is often not optimal, resulting in a lack of synchronization in the delivery of health, social, and economic services to the elderly. The recommendation to overcome this is to build a more effective and structured coordination mechanism, including the implementation of an integrated project management system and information

technology to improve communication and transparency. Second, there is the problem of declining health among BKL members due to limited health services, which needs to be addressed by improving access and quality of medical facilities and training for health workers. Third, the economic unproductivity of BKL members is a significant challenge.

The limitations of this research lie in the use of qualitative methods that do not consider quantitative approaches, which can provide more objective numerical data and broader generalizations. Therefore, it is recommended that future research include a quantitative approach to complement the existing qualitative analysis so that it can produce more comprehensive and in-depth data regarding the effectiveness of the Elderly Family Development Program. Integration of these two approaches will enable a more holistic and accurate understanding of the program's impact and the factors influencing its implementation.

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