



UNIVERSITAS  
INDONESIA



INTERNATIONAL CONFERENCE  
**3<sup>rd</sup> ICSSSED**  
OF SOCIAL SCIENCES AND EDUCATION

# The **3<sup>rd</sup>** INTERNATIONAL CONFERENCE OF SOCIAL SCIENCES AND EDUCATION

*Certificate of Appreciation*

No. 3/UN34.14/PM.02.08/2019

is awarded to

**Kurnia Nur Fitriana**

As

**Presenter**

In the Event of:

**THE 3<sup>rd</sup> INTERNATIONAL CONFERENCE OF SOCIAL SCIENCES AND EDUCATION  
THEME: CHALLENGES OF SOCIAL SCIENCES AND EDUCATION  
FOR ACHIEVING SUSTAINABLE DEVELOPMENT GOALS (SDGs)**

Held on July 23-26, 2019  
**PRIME PLAZA HOTEL JOGJAKARTA  
INDONESIA**

Dean,  
Faculty of Social Sciences,



**Prof. Dr. Ajat Sudrajat, M.Ag.**  
NIP 19620321 198903 1 001



**FACULTY OF SOCIAL SCIENCES**  
Yogyakarta State University  
Karangmalang Yogyakarta  
Indonesia  
[www.fis.uny.ac.id](http://www.fis.uny.ac.id)

**THE 3RD ICSSD**

# **BOOK OF ABSTRACT**

**CHALLENGES OF SOCIAL SCIENCES AND  
EDUCATION FOR ACHIEVING SDG'S**

Yogyakarta, 23-26 July 2019



**FACULTY OF  
SOCIAL SCIENCES  
UNIVERSITAS NEGERI YOGYAKARTA**

Indonesia – Malaysia Relations as Represented In Kedaulatan Rakyat 2002 – 2018.....	120
<i>Ita Mutiara Dewi, Ajat Sudrajat, Danar Widiyanta, Muhammad Yuanda Zara</i>	
The Bureaucratic Ethics In Realizing Public Service Integrity.....	121
<i>Lena Satlita, Kurnia Nur Fitriana, Francisca Winarni</i>	
The Collaborative Governance On Inclusive Services For Elderly.....	122
<i>Puji Wulandari Kuncorowati, Kurnia Nur Fitriana, Utami Dewi, and Pandhu Yuanjaya</i>	
Understanding The Livelihood of Urban Poor through the Lens of Sustainable Livelihood Approach.....	123
<i>Nor Hafizah Hj. Mohamed Harith</i>	
Gender Equality in Determining the Contributing Factors of Young Women Participation in Politics.....	124
<i>Siti Hajar Abdul Sookor &amp; Azizan Zainuddin (Phd)</i>	
The Participatory Social Services For Elderly In Disaster Management.....	125
<i>Kurnia Nur Fitriana, Nurul Khotimah, Poerwanti Hadi Pratiwi</i>	
Performance Of Balai Preservation Of Cultural Reservoir (Bpcb) Jambi Province In Improving Efforts To Improve Cultural Reservation Based On Local Interest In Muaro Jambi.....	126
<i>Hapsa and Firmansyah Putra</i>	
You'll Never Walk Alone: Pedestrian Marketing Goes Digital.....	127
<i>Irmawan Rahyadi</i>	
Understanding The Geographical Environment as a Spatial Event.....	128
<i>Muhammad Nursa'ban, Mukminan</i>	

# **Strengthening Collaborative Governance in Participatory Social Service For Elderly (Case Study: Yogyakarta Province, Indonesia)**

**Kurnia Nur Fitriana<sup>1</sup>, Nurul Khotimah<sup>2</sup>, Poerwanti Hadi Pratiwi<sup>3</sup>,**

**Yogyakarta State University, Indonesia**

<sup>1</sup>kurnianurfitriana@uny.ac.id, <sup>2</sup>nurulkhotimah@uny.ac.id, <sup>3</sup>ph\_pratiwi@uny.ac.id

---

## **Sub Theme: Public Administration**

### **Abstract**

The objective of this research was developing social service model for elderly according to their needs analysis specifically. The aging of Indonesia's demographic structure over the past decade had a significant impact on the dependency ratio on the productive age group. This condition also occurs in Yogyakarta Province as province which has highest number of elderly and highest life expectancy in Indonesia. The increasing number of elderly people in Yogyakarta Province has not been able to be accompanied by efforts to improve the quality of elderly wellbeing through inclusive social services due to limited government's capacity in budget support, infrastructure support, skilled human resources support and pro elderly policy support. Moreover, the social services for elderly have been implemented in top down policy with the dominant role of government. Therefore, the alternative problem solving is implementing the values of collaborative governance through a participatory social service model by non-governmental actors. The social engagement of communities, elderly's families, social workers, volunteers, social organizations, and government agencies in elderly's social service inclusively is important step to improving elderly wellbeing sustainability through strengthening of social capital. The research approach that used in this research was research and development research for two years (2017-2018). The aim of the first year in this research is creating social service model for elderly according to their needs analysis inclusively. The technique of collecting data conducted observation, in-depth interview, focus group discussion, and secondary data documentation. The implementation of this model consist of six main stages: (1) identifying problems in social services for the elderly as a problem mapping; (2) analyzing the needs of the elderly as target groups in social services; (3) social engagement collaboratively, responsively, and inclusively. Existing stakeholders are the government agencies, social workers, volunteers, social organizations, social communities, and elderly's families, (4) empowering elderly as the subject of social services through assisting elderly activities in social, economic, religiosity and psychoemotional; 5) undertaking a social impact analysis of program outcomes and evaluating the result; (6) providing feedback of program evaluation as a sustainability process in program planning. The key to the successful implementation of this model depends on the commitment in social engagement, social bonding and social capital involvement responsively, collaboratively, and inclusively of among the stakeholders involved.

**Keywords: participatory social service, elderly's wellbeing, collaborative governance.**

## 1. Introduction

Indonesia is facing a population ageing that has become a significant demographic transition. In 2016, Indonesia reached the fourth rank among the countries with the highest population of elderly people in Asia, after India, China and Japan (Source: <http://surveymeter.org/read/33/penuaan-penduduk-dan-pembangunan-dokumentasitangan-dan-langkah-lanjut>, accessed on 20 Februari 2016). The population ageing was happened in every province in Indonesia with the percentage of the elderly population reaching 8,5% of the 255.2 million total population of Indonesia. In the period 2010-2035, the number of elderly in 100 population aged 0-14 years increased from the previously 23 people to 73 people (Central Bureau Statistics of Indonesia (BPS Indonesia), 2015). This condition has an impact on the increasing dependency ratio. The demographic transition is a challenge for stakeholders in managing the elderly to still get a good quality of life. Moreover, the World Bank (2015) showed that the majority of people in Indonesia feel unequally both socially, economically and politically. Services for the elderly as vulnerable groups actually reflect the treatment of inequality (Mohammad, Dom, dan Ahmad, 2016). Therefore, the management of population ageing conditions in Indonesia required a collaborative role-based networking pattern between state, private, and community actors in the context of inclusive services to realize the welfare of the elderly wellbeing (Sachs, 2012).

Elderly as a citizen was entitled to gain a decent and dignified life. The ideal condition to be created by the state that was inclusiveness in public policy and public service. In the public policy perspective, during these elderly-oriented policies was limited in Law No. 13 of 1998 on Elderly Welfare. However, this law has not positioned the elderly as the subject of development and implemented partialy so it has not reflected the social policy characteristic of Indonesia. On the other hand, the orientation of public services in Indonesia has not been designed for the elderly in general, especially in healthcare services, citizen administration services, public space accessibility, public transportation, and social services. Various inequalities in the public service domain for the elderly showed that a participatory approach was essential part of social services to be created. Social inclusion could be realized with adopted publicness values of human rights, equality, redistribution and participation (Sen, 1999; Gupta dan Thomson, 2010). It refers to Sustainable Development Goals (SDGs) agenda that has at least 13 of the 17 destinations of SDGs demanding the creation of social inclusion. This indicated that strong support globally and nationally for the creation of social inclusion in 2030 or the end of SDGs emphasized the creation of inclusiveness or equality between people, within a country and between countries (Gupta, Pouw dan Ros-Tonen, 2015).

The province that has the highest number of elderly in Indonesia is Yogyakarta Province. The growth of the elderly in Yogyakarta Province in 2012 reached 48.092 population / year (Source: <http://krjogja.com/read/131008/lansia-indonesia-ternyata-dapat-dibanggakan.kr>, accessed on March, 8, 2017). This condition was influenced by the life expectancy of the population where Yogyakarta Province was the region with the highest life expectancy in Indonesia. The high rate proportion of elderly people in Yogyakarta Province will be continued to increase significantly by 2020 to reached 14,7% and on peak in 2030 will be reached 19,5% (Source: <http://www.merdeka.com/uang/jumlah-penduduk-lansia-di-yogyakarta-tertinggi-di-indonesia.html>, accessed on March 8, 2017). The distribution of the number of family members elderly in 2008 in DIY from highest to lowest was: (1) Kulonprogo Regency on 14,71%; (2) Gunungkidul Regency on 13,89%; (3) Bantul Regency on 11,35%; (4) Sleman Regency on 11,25%; and (5) Kota Yogyakarta equal to 10,84%. (Source:

<http://dinsos.jogjaprov.go.id/lansia-terlantar-di-diy-sebanyak-36-728-orang/>, accessed on February, 19, 2017).

The progressive aging population structure in Yogyakarta Province will be impact on various aspects of elderly people's life especially on health, social and economic aspects. In the health aspect, along with the decrease of nutritional intake and physical ability, elderly will be faced with various health disorders that varied due to decreased function of organs which usually will also be followed by psychosocial and psychoemotional disorders, as well as social problems with family and the surrounding community. Whereas, in the socio-economic aspect, the elderly entering retirement will become an unproductive and dependent population for the productive age population (Yanuardi, Fitriana, and Ahdiyana, 2016). These conditions decrease their self esteem and social existency to interact with the social environment thus affected on marginalization of the elderly in society. The last data of the number of neglected elderly in Yogyakarta amounted to 36.728 people with the most distribution stayed in Gunung Kidul regency of 14.851 people (Source: <http://dinsos.jogjaprov.go.id/lansia-terlantar-di-diy-sebanyak-36-728-orang/>, accessed February, 19, 2017).

Therefore, it needs a model of social services inclusively for elderly on community-based participation by strenghtening social capital in collaborative governance. The orientation of the inclusive social service model for elderly was aimed to support capacity building of society and government agencies as caregivers and create community environment more friendly for elderly in dignified way. Inclusive service was a public service system that is open and accessible to anyone including citizens who due to age have difficulty to access the service fairly with the characteristics: (1) the existence of a complete openness, (2) recognition of diversity or diversity of needs, (3) have positive outcomes, (4) togetherness, (5) fairness and equity in accessibility (Dwiyanto, 2010). In analyzing social services for the elderly can be done by using collaborative governance framework because of the involvement of government agencies and non-government actors collectively to achieve improving the quality of life of the elderly. We can adopt the essential meaning of collaborative governance as a governing arrangement where one or more public agencies directly engage non-state stakeholders in a collective decision-making process that is formal, consensus-oriented, and deliberative and that aims to make or implement public policy or manage public programs or assets. Collaborative process variables are starting conditions, institutional design, and leadership variables represented as either critical contributions to or context for the collaborative process. Starting conditions set the basic level of trust, conflict, and social capital that become resources or liabilities during collaboration. Institutional design sets the basic ground rules under which collaboration takes place. Therefore, leadership provides essential mediation and facilitation for the collaborative process. The collaborative process itself is highly iterative and nonlinear that defined as a cycle of public agencies in interagency coordination by nonstate stakeholders (Ansell and Gash, 2007).

The social engagement of communities, elderly's families, social workers, social organizations, nursing homes, and government agencies as caregivers in the first entry level of inclusive social service is important parf to overcome the complex elderly dislocation through the strengthening of social capital. This is reinforced by research results from Setiti (2015) that showed social services in the nearest relatives and communities made the elderly accepted in their social environment and protected by their families and communities in socio-community space. A good parenting pattern for the elderly is in keeping with the cultural, religious, and social values it embraces in order for the moral and social bonds to build. In addition, the influence of family knowledge level has a closed relationship to support the behavior of life and health of the elderly becomes increasingly better (Fitriana, 2013). Indeed, this research

focuses on the development of participatory social service model for the elderly in Yogyakarta Province. The goal achievement orientation of this study was analyzing of the elderly's needs inclusively and creating an inclusive social service model for the elderly by adopting the publicness value in collaborative governance framework.

## **2. Research Methods**

This research used a research and development approach to obtain participatory social service model for the elderly. This study was conducted for 2 years (2017-2018) in Yogyakarta Province as an area with the largest proportion of elderly population in Indonesia. Data was collected through observation, in-depth interviews, Focus Group Discussion (FGD), and documentation of secondary data. The research steps were described as follows: (1) conducting preliminary research to identify elderly needs in accessing social services in Yogyakarta Province, (2) measuring outcomes of social services for elderly in Yogyakarta Province, (3) designing community-based social service model in Yogyakarta Province, (4) developing social service based model (5) developing guidelines for the implementation of community-based social service model for empowering elderly, (6) implementing community-based social service model for elderly. The subjects of this research are: (1) National Population and Family Planning Board (BKKBN) of Yogyakarta Province, (2) Provincial Health Office of Yogyakarta, (3) Provincial Social Office of Yogyakarta, (4) Elderly Regional Commission of Yogyakarta Province, (5) Communication Forum of Elderly Affairs in Yogyakarta Province, (6) Office of research and development of social welfare services of Indonesian Social Ministry, (7) Social Service Center of Tresna Werdha (BPSTW) Abiyoso and Budi Luhur Yogyakarta, (8) Provincial Ombudsman Institution of Yogyakarta, (9) Private nursing home , (10) Social welfare institutions of elderly affairs in Yogyakarta Province, (11) elderly people, (12) Community and elderly family as elderly foster families, (13) Social Security Administrator in Health Insurance of Yogyakarta Province (BPJS) , (14) Study Center for Policy and Population of Gadjah Mada University (15) Research centers of early childhood and the elderly of Yogyakarta State University, and (16) Social worker. The informant was chosen by using purposive sampling method as expert. Analytical techniques are carried out qualitatively with research and development steps including: (1) identification of potentials and problems, (2) data collection, (3) designing model draft, (4) model validation, (5) review and revision model, (6) limited product trial, (7) product revision, (8) trial usage, (9) final revision, and (10) result dissemination (Sugiyono, 2010).

## **3. Results**

### **Elderly Profile in Yogyakarta Province**

Yogyakarta Province is a province with the highest percentage of elderly population in Indonesia that reached 13.04% in 2012 exceed the projections of the elderly population nationwide at the level of 11.34% in 2020 (Provincial Social Office of Yogyakarta, 2014). According to Central Bureau of Statistics of Yogyakarta Province (BPS,2014) data, in the Yogyakarta Province Annual Data Study Report of Elderly which issued by the Provincial Social Office of Yogyakarta in 2014, this was an imbalance between the percentage of the population distribution of elderly in Yogyakarta Province each year (Table 1).

*Table 1. The Presentage Comparison of The Total Population Distribution of Elderly in Yogyakarta Province at 2014*



Total Amount of Population in Yogyakarta Province			Total Amount of Pre-elderly Population in Yogyakarta Province		Total Amount of Elderly Population in Yogyakarta Province	
District/City	Amount	Percentage (%)	Amount	Percentage (%)	Amount	Percentage (%)
Bantul District	921.263	26,42	164.5664	26,83	110.900	24,06
Gunungkidul District	677.998	19,44	136.055	22,18	132.553	28,75
Kulon Progo District	390.207	11,19	74.026	12,07	63.700	13,82
Sleman District	1.107.304	31,75	172.944	28,20	116.790	25,33
Yogyakarta City	390.553	11,20	65.709	10,71	37.076	8,04
<b>Total amount of Yogyakarta Province</b>	<b>3.487.325</b>	<b>100</b>	<b>613.298</b>	<b>100</b>	<b>461.019</b>	<b>100</b>

Source: Provincial Social Office of Yogyakarta, 2014.

Data on table 1 showed that the highest percentage of elderly population was found in Gunungkidul District which reached 28,75% more than percentage of total amount of population of Gunungkidul District which only reached 19,44% from total amount population of Yogyakarta Province. In the other hand, the lowest distribution of elderly population in Yogyakarta Province was Yogyakarta City that only got 8.04% and the percentage of pre-elderly population reached 10.71%. This condition illustrated that the distribution of elderly population in rural area was higher than urban area, therefore the elderly life expectancy in the rural area was higher than the life expectancy of elderly in the urban area. This condition indicated that the carrying capacity of social and cultural environment in the village was more elderly friendly despite the lack of supporting infrastructure. However, the rural area has social vulnerability of neglected elderly population in Yogyakarta Province. Gunungkidul District as rural area was the highest of social vulnerability in total amount of neglected elderly in Yogyakarta Province that reached 195.011 people at 2014. The total number of neglected elderly in Yogyakarta Province had significant increase occurred in the year 2009 - 2010 on 7.801 people, while the decline in the number of neglected elderly occurred in 2012-2013 amounted to 471 people and increased again in 2014 of 1.720 people. It means during six years (2009-2016), the implementation of social policy in Yogyakarta Province was ineffective in managing neglected elderly because the trend of neglected elderly number in Yogyakarta has been tended increasingly (Yanuardi, Fitriana, and Ahdiyana, 2016). This showed that the population structure of the Yogyakarta Province in this decade entered into the population ageing. The level of elderly prosperity in Yogyakarta City as a urban area is better than Gunungkidul District and Bantul District as rural areas. This influenced by several factors, namely: (1) Social factors: social engagement of community and elderly's family care, (2) Economic factors: poverty and economic gap, (3) Infrastructure factors: accessibility and availability of healthcare, food, energy, sanitation, and home, (4) Policy factor: policy support from local government in aspects of morally will and political will.

### **The Challenges of Elderly Social Services in Yogyakarta Province**

At first entry level of social services for the elderly, collaboration roles of non-government actors as facilitator of caregiving such as nursing homes or social service centers, social organizations, social workers, communities and elderly's family is required largely. However, during a decade, the government has dominated the contribution of its role in social services because the source funding of the program of social services and the policy implementation has been based on the state budget. Therefore, the increasing number of elderly and life expectancy rate of elderly in Yogyakarta Province has been affected to the complexity of government challenges in solving elderly problems. Moreover, the central government and local government, had limited capacities on: (1) the budgetary support, (2) the carrying



capacity of the social welfare service provider infrastructure for the elderly that only based on social services center or state nursing homes, (3) the capability of human resources as professional social workers, (4) the local policy support for inclusive social service of elderly. The scope of public services for the elderly has been limited to healthcare services and social services based on state nursing homes, whereas public services broadly have not been able to be realized inclusively. Therefore, the role of non-government stakeholders is urgently needed to contribute in social service delivery for elderly. However, in practice, they have not yet gained access to budget support, capacity building on institutions and skills, and a clear legal framework related to the protection of their rights and obligations. The challenges of elderly social service are focused on general problems:

- 1) Improving social policy capacity for elderly wellbeing in the local context;
- 2) Strengthening the social engagement among stakeholders in assisting social services for elderly inclusively;
- 3) Advocating budget allocation for optimizing social services;
- 4) Upgrading skills capacity of caregivers in social services for the elderly;
- 5) Providing social services infrastructure for the elderly in inclusively;
- 6) Assesing the specification of social services according to elderly needs specifically;
- 7) Developing collaborative social service model.

### The Participatory Social Service Model for Elderly

Social services for the elderly should be developed based on the needs analysis of target groups and stakeholders capabilities. There are three main issues: (1) dividing of social services according to the needs analysis of elderly specifically, such as the needs of productive and nonproductive elderly, (2) developing participatory social service model, and (3) improving sustainability of social services through designing empowerment programmes for the elderly (especially for productive elderly). The results of this study recommend the development of participatory social service model that adopted collaborative governance framework (figure 1).

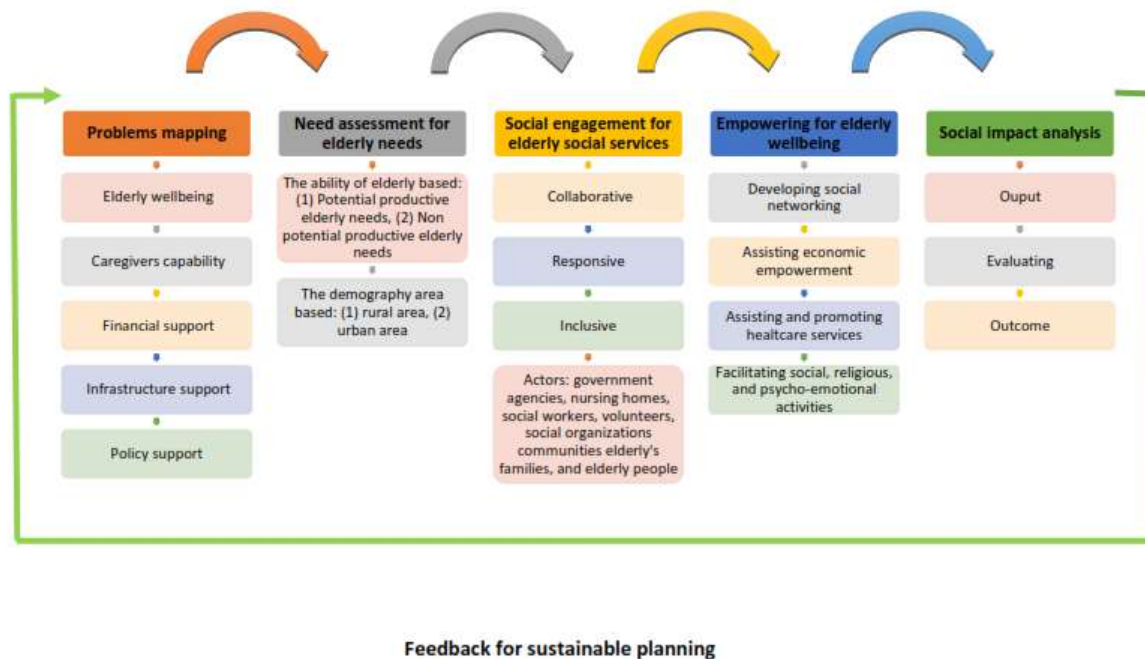


Figure 1. Participatory social service model for elderly

Figure 1 provides a visual presentation of the participatory social service model for elderly as research findings. The model has six stages: (1) problems mapping, (2) need assessment for elderly needs, (3) social engagement for elderly social services, (4) empowering for elderly wellbeing, (5) social impact analysis, (6) providing feedback of program planning sustainability. The first stage identifies problems in social services for the elderly as problems mapping. There are five main issues: (1) the elderly wellbeing, (2) the capacity of social service provider skills, (3) budget constrain allocation, (4) limited infrastructure support, and (5) limited policy support. Problems mapping is an important first step to find out the problems background and provide the database analysis of the target group needs. The second phase is a need analysis of the elderly as a target group in social services with a priority scale. In this case, the analysis of elderly needs can classify based on: (1) the ability of elderly self-reliance socially and economically as a productive elderly group and an unproductive group, (2) elderly livelihood that divided in a urban area and a rural area. The categorization of specific needs of elderly people is important in order to avoid the target inaccuracy of the beneficiaries of social services.

The third stage is social engagement in social services among stakeholders collaboratively, responsively, and inclusively. The existing stakeholders are the government agencies, nursing homes, social workers, volunteers, social organizations, social communities, elderly's families in participatory caregiving. It is necessary to give moral will and political will to carry out their roles. Then, the fourth stage is empowering the elderly as a subject of social service. The stakeholders can provide a social space to perform various of social activities, economic activities, religiousity activities, arts activities, and psycho-emotional activities both of the domestic sphere and the public sphere. The role of caregivers was oriented as facilitators for elderly in developing social network, directing the assistance of economic empowerment for productive elderly, training of social self-reliance, mentoring maintenance of healthcare regularly and facilitating the existence of elderly to conduct religious activities, art activities, and psychoemotional activities collectively. The fifth stage is conducting a social impact analysis on the output of programs/activities that involved stakeholders and evaluate outcomes regularly. Thus, the last stage of the participatory social service model is providing feedback on programs/activities planning sustainability. This step is oriented to capture the aspirations of elderly people and stakeholders as the first entry level of social services to be followed up by the government.

#### **4. Discussion and Conclusion**

The study of social services for the elderly has been studied extensively with sociology, psychology, social welfare, and public health sciences. Meanwhile, studies in the context of public administration have not been widely implemented. Therefore, this study undertook a study of inclusive social services in the context of collaborative governance to obtain analytical results that could explain the role relationships between actors involved in social services for the elderly and how to advocate for the development of a social service model for the elderly. Collaborative governance is more than steering and rowing public needs as public interests, moreover, collaborating implies a much more interactive process and a level of agreement on how to proceed that no consultation would entail. This mode of governance brings multiple stakeholders together in common forums with public agencies to engage in consensus-oriented decision making. One key to effective collaboration is enabling (or even helping to create) the citizen or community voice that permits real collaboration to occur. That voice is often complex, diffuse, uncollected, unorganised and thus not heard successfully unless efforts are

directed to ensuring that it is (Sylvan, 2008). Potential outcomes for a society can be created by collaboration between government agencies, social workers, volunteers, elderly's families, social organizations, and civil societies that not only in social service delivery but also how to empower them. Indeed, many positive benefits can emerge when public values are involved effectively in decisions that affect them.

There are two essential ingredients in social services for elderly to involve good collaboration as social partnership. First, the development of trust within that relationship among their actors. It is important step to reach tight social networking when the affiliation of participation has different social-economic background to deliver social services. Second, the willingness of the public service inclusively influenced by the community it is working in partnership with social engagement in order to developing social networking, assisting economic empowerment, assisting and promoting healthcare services, facilitating elderly activities in term of social, religious, art, psiko-emotional by participatory caregivers. Socially, eldercare norms adopt religious values and social values, which underlie caregiving in Indonesia. Caregiving is also defined as a component of respect, care, love, moral and spiritual debt and obligations, that is family responsibility, passed on from one generation to another, usually the eldest child (although there are regional variations) who take over the primary responsibility of aging parents. Therefore, strengthening the role of the family is needed to increase the emotional bonding and social bonding among family members. Then, this role can be extended to the social responsibility of communities to enhance social bonding as social responsibility in participatory social services. This allows an understanding of how the various demographic factors interact with sociocultural and developmental changes over time, and the effect of these on family size, patterns, generational relationships, all of which have consequences for old age (Brown and Keast, 2003). The participatory caregivers perspective helps us understand the experiences of the different cohorts of aging adults, and how their early life or historical experiences have shaped their understanding and expectations of kin support in old age and their interaction with formal systems of care, welfare agencies and institutions (Scharlach, Runkle, Midanik, & Soghikian, 1994). These concepts are universal and could be applied to any caregiving situation in any cultural context. Thus, in conclusion, the development of participatory social service models has adopted values in collaborative governance by involving non-governmental actors established through social engagement. The application of this model aims to improve the quality of elderly wellbeing by empowering the elderly through social assistance, economic, health, religious, and psycho-emotional services. The final stage to be performed in this model cycle is the social impact analysis of the application of this model by conducting results analysis and evaluating the results to provide feedback in strengthening collaborative social services governance for the elderly. The key to the successful implementation of this model depends on the commitment in social engagement, social bonding and social capital involvement responsively, collaboratively, and inclusively of among the stakeholders involved.

## 5. References

- Ansell, Chris and Gash, Allison. (2007). *Collaborative Governance Between Theory and Practice*. Journal of of Public Administration Research and Theory. Vol. 18, 543–571.
- Brown, K. and Keast, R. (2003). *Citizen–government engagement: community connection through networked arrangements*. *Asian Journal of Public Administration*, vol. 25, no. 1, pp. 107–31.
- Central Bureau of Statistics of Indonesia (BPS Indonesia). (2015). *Indonesia Demography Profile 2015*. Jakarta: BPS.
- Central Bureau of Statistics of Yogyakarta Province (BPS Provinsi DIY). (2014). *Yogyakarta Province in Number Figure 2014*. Yogyakarta: BPS DIY.

- Dwiyanto, Agus. (2010). *Public Service Management: Caring, Inclusive and Collaborative*. Yogyakarta: Gadjah Mada University Press.
- Fitriana, Wiwin. (2013). *Manuscript Publication: Relationship Level of Family's Knowledge with Elderly Behavior in Wirogunan Village, Kartasura District..* Surakarta: UMS.
- Gupta, J., & Thompson, M. (2010). *Development and Development Cooperation Theory*. Cambridge: Cambridge University Press.
- Gupta, J., Pouw, N., & Ros-Tonen, M. (2015). *Towards an elaborated theory of inclusive*. Cambridge: Cambridge University Press.
- Law No. 13 of 1998 on Elderly Welfare.
- Mohammad, S, A., Dom, M, M., dan Ahmad, S, S. 2016. *Inclusion of Social Realm within Elderly Facilities to Promote their Wellbeing. Social and Behavioral Sciences*, 114 – 124.
- Provincial Social Office of Yogyakarta. (2014). *The Annual Report of Social Welfare Services for the Elderly in Yogyakarta Province*. Yogyakarta: Provincial Social Office of Yogyakarta.
- Sachs, J, D. 2012. *From Millennium development Goals to Sustainable Development Goals*. Lancet Vol 379, 2206-2211.
- Scharlach, A., Runkle, C., Midanik, L., & Soghikian, K. (1994). *Health Conditions and Service Utilizations of Adults with Elder Care Responsibilities*. *Journal of Aging and Health*, 6, 336-352.
- Sen, A. K. 1999. *Development as Freedom*. Oxford: Oxford University Press.
- Setiti, Sri Gati. 2006. *Research Report: Kinship-Based Social Service for (Case Study in Five Areas in Indonesia)*. Jakarta: Puslitbang Kemensos RI.
- Sylvan, Louis. (2008). *Collaborative Democracy: The Citizen's Ability to Collaborate Effectively*. In O'Flynn, Janine and Wanna, John (Editor). *Collaborative Governance A New Era of Public Policy in Australia?* Canberra: The Australia National University Press.
- Sugiyono. (2010). *The Research Method of Quantitative Qualitative and R & D*. Bandung: Alfabeta.
- World Bank. 2015. *A Perceived Divide: How Indonesians Perceive Inequality and What They Want Done About It*. Jakarta: The World Bank.
- Yanuardi, Kurnia Nur Fitriana, dan Marita Ahdiyana. (2016). *The Research Report: The Evaluation of Social Policy to Improving Social Welfare for The Neglected Elderly in Yogyakarta Province*. Yogyakarta: UNY.

**Online References:**

- Anonim. (2014). *Jumlah Penduduk di Yogyakarta Tertinggi di Indonesia*. <http://www.merdeka.com/uang/jumlah-penduduk-lansia-di-yogyakarta-tertinggi-di-indonesia.html>, accessed on March, 8, 2017.
- Anonim. (2012). *Lansia Indonesia Dapat Dibanggakan*, <http://krjogja.com/read/131008/lansia-indonesia-ternyata-dapat-dibanggakan.kr>, accessed on March, 8, 2017.
- Anonim. (2017). *Lansia Terlantar di DIY Sebanyak 36.728 Orang*, <http://dinsos.jogjaprovo.go.id/lansia-terlantar-di-diy-sebanyak-36-728-orang/>, accessed on February, 19, 2017.
- Anonim (2016). *Penuaan Penduduk dan Pembangunan Dokumentasi, Tantangan, dan Langkah Lanjut*. <http://surveymeter.org/read/33/penuaan-penduduk-dan-pembangunan-dokumentasi-tantangan-dan-langkah-lanjut>, accessed on February, 20, 2016.