

Policy Strategy for Social Protection Toward Independent and Productive Ageing in Indonesia

Yanti Damayanti *

Planning Bureau, Ministry of Social Affairs of the Republic of Indonesia

*Correspondence: yantid08@gmail.com

Received: May 22, 2025 Accepted: December 20, 2025 Published: December 31, 2025

Abstract

Indonesia has entered the ageing population era since 2021, with the older population projected to exceed 65 million by 2045. This demographic shift presents complex challenges across health, social, economic, and environmental sectors, demanding adaptive, inclusive, and sustainable social protection policies for older persons. This study evaluates the effectiveness of current policies by referring to global, regional, and national frameworks, while assessing critical aspects including human resources, financing, infrastructure, and program governance. The analysis identifies major implementation gaps, including limited capacity of social workforce, heavy dependence on the state budget (APBN), lack of age-friendly infrastructure, and poor inter-agency coordination and data integration. To address these gaps, the paper proposes a core strategy centered on strengthening the competencies of human resources and raising public awareness. This involves standardized training programs, nationwide awareness campaigns, and partnerships with academic institutions and professional organizations. The proposed strategy draws on a life-cycle approach, the concept of healthy ageing, and integrated cross-sectoral collaboration. Its objective is to establish a robust and responsive social protection system that secures the health, economic resilience, and social inclusion of older persons. This paper aims to provide evidence-based policy recommendations to ensure that older persons live independently, with dignity and quality of life.

Keywords: older persons, social protection, policy strategy

Introduction

According to Statistics Indonesia (BPS, 2021) the elderly population (aged 60 and above) in Indonesia reached 29.82 million people, or approximately 10.82% of the total population. This figure indicates that Indonesia has entered the ageing population phase. Over the past decade (2015–2024), the proportion of elderly in Indonesia increased by nearly 4 percentage points, reaching 12.00%. Life expectancy also shows an upward trend, from 70.78 years in 2015 to 72.39 years in 2024. This indicates that, on average, individuals born in 2024 can expect to live up to 72 years (BPS, 2024). By 2045, the elderly population is projected to reach 65.82 million, accounting for 20.31% of the total population (BPS, 2023). The rise in the elderly population has significant implications for national development. On one hand, it reflects the government's success in implementing health programs and related support initiatives, enabling older people to live healthier, more resilient, and productive lives for a longer period. On the other hand, it also presents challenges across multiple aspects of elderly life, including health, social, economic, and environmental dimensions. In all countries, both developed and developing, older people face an array of vulnerabilities. Among these are lack of income, health insecurity, and the need for physical care (Bloom, Jimenez, Rosenberg, 2011)

Data indicates that one in five older person experiences health complaints that interfere with daily activities. Although Indonesia's life expectancy stands at 71.85 years, the Healthy Life Expectancy (HALE) is only about 62.8 years. This implies that, on average, Indonesians spend about nine years of their old age in poor health. Access to healthcare services for the elderly remains uneven, with limited geriatric services in primary health centers and hospitals, especially in remote areas (Coordinating Ministry for Human Development and Cultural Affairs, 2025). Additionally, many elderly Indonesians live with low levels of well-being. Around 11% of older persons live in poverty, and over 60% reside with other family members who often act as informal caregivers. Moreover, households with elderly

members spend approximately 3% more on monthly expenses compared to those without (TNP2K, 2020).

Through integrated Health Post for the Elderly (*posyandu lansia*), aim to raise awareness among older persons about the importance of participating in these services. Such participating is expected to enable early detection of non-communicable diseases (NCDs) among the elderly, allowing for prompt management and the prevention of further complications. However, participation in elderly health post remains very low despite the number of older persons. This limited participation is primarily due to a lack of awareness about the importance of *posyandu lansia*, difficult access to the facilities, and the absence of accompanying persons to assist older persons in reaching the services locations (UMS, 2024).

Economically, the association of old age with the retirement age limits of older persons from continuing to work, even though many still have the capacity to contribute to the economy and maintain their standard of living. For this reason, retirement should be regarded as an individual right rather than a restriction on the ability to work (Adhi Santika et al., 2020). The majority of older persons lack a stable source of income, and only 4 percent of them receive a pension. Among those who are still working, most are employed in the informal sector with low earnings (The Prakarsa, 2020). Statistics Indonesia (BPS) in 2022 indicate that only 8.52% of elderly households have access to a pension security, and only 5.28% are covered by old-age security. This highlights that the majority of older persons lack a stable source of income after retirement (The Conversation, 2023). Furthermore, 78.5% of the 9.4 million older persons who are still working in Indonesia are employed in the informal sector, without guaranteed wages, fixed working hours, or adequate labor protection (Kompas.id, 2024). In 2025, approximately 85.25% of older persons are employed in the informal sector, with 76.29% of them trapped in vulnerable employment. Their average monthly income is IDR 1.71 million, which falls below the minimum wage in several regions (Harian Jogja, 2025). According to The Prakarsa (2023), only 14.8% of older persons in Indonesia currently receive a pension. By 2050, it is projected that only 6% of older persons aged 65 and above will receive a pension, placing Indonesia as the third lowest among ASEAN countries in this regard.

Politically, the engagement of older persons in public participation is very low, and their level of participation is largely determined by their previous socio-economic status (The Prakarsa, 2020). This indicates that older persons often lack sufficient space to participate in decision-making processes that affect their lives. Therefore, the provision of adequate social protection programs for older persons is essential. Targeted social protection programs enable them to meet their basic needs and, to some extent, ease the burden on family members. The main reason for investing in social protection is to improve the incomes of individuals and families. There is good evidence of schemes providing recipients with greater income security, although the extent of the impacts depends on the level of investment (Kidd, 2014). Socially, older persons often receive insufficient respect from society. The Ipsos Global Advisor, in its 2018 global survey titled *Views on Aging* conducted across 30 countries, found that 60% of respondents agreed that older people are not treated with the respect they deserve (Ipsos, 2018).

Despite the implementation of various programs, the proportion of older persons benefiting from social protection remains low. Only around 12 percent of older persons are covered by contributory social security schemes, such as government and military pensions, as well as pension programs under The Social Security Administering Body for Employment (BPJS Ketenagakerjaan). Most of these beneficiaries are retired civil servants or military personnel (TNP2K, 2020). In contrast, only about 2 percent of older persons benefit from non-contributory social protection schemes or social assistance programs nationwide (The SMERU, 2020). Another barrier is the limited digital literacy among older persons, which hinders their ability to access services such as opening bank accounts required for receiving social protection benefits (Baskara, 2023). This highlights how digital exclusion can be a significant obstacle for older persons in accessing available social protection programs. Social protection programs for older persons remain very limited in both quality and coverage. According to National Socio-Economic Survey (SUSENAS) in 2017, only 13 percent of older persons had access to social protection programs such as the Rasta food assistance program, PKH cards, Social Protection Cards (KPS)/Prosperous Family Cards (KKS), and Micro Business Credit schemes (The Prakarsa, 2020).

Social protection for older persons is a strategic component in addressing Indonesia's demographic transition toward an ageing society. According to Indonesia Statistic projections, older persons are expected to constitute more than 19 percent of the total population by 2045. This demographic shift demands a structured, inclusive, and sustainable policy response. Indonesia has set an agenda for economic transformation to achieve the Vision of Golden Indonesia 2045, in which social protection is a key focus under the National Long-Term Development Plan (RPJPN) 2025–2045,

including the enhancement of social security in response to population ageing (APRC, UNFPA-Indonesia, 2024). Furthermore, it was noted that current social protection measures begin at age 58 and will be progressively strengthened to ensure the social and economic well-being of older persons. As part of this commitment, Indonesia has developed the Care Economy Roadmap 2025–2045 as a strategic framework for advancing the care economy sector. This roadmap encompasses the provision of long-term care services, the development of the care workforce, and the strengthening of supportive infrastructure for older persons. It is an integral component of the 2025–2029 National Medium-Term Development Plan (RPJMN) and is designed to support an adaptive and responsive social protection system in the context of demographic transition.

The strengthening of the national policy framework through the National Strategy on Ageing (*Stranas Kelanjutanisaan*), established by Presidential Regulation No. 88 of 2021, serves as a cross-sectoral reference for efforts to protect, empower, and ensure the active participation of older persons in development. The strategy is designed to promote the formulation of life-cycle-based policies encompassing social protection, healthcare services, the development of age-friendly environments, and the economic empowerment of older age groups. Through this planning framework, Indonesia not only demonstrates political and policy commitment to the protection of older persons but also advances long-term social and economic transformation that positions older persons as a strategic component of inclusive and intergenerationally just national development (Geriatri.id, 2024).

Drawing on the current conditions experienced by older persons and the existing implementation of social protection programs, this study aims to examine the implementation of social protection for older persons and to identify the main challenges encountered. The objective is to develop more effective and inclusive alternative strategies and formulate actionable recommendations to support the fulfillment of the rights and well-being of older persons in Indonesia.

Methodology

This study employed a qualitative method through a literature review and an interpretative approach to qualitative policy analysis, drawing on Fischer's (2007) argumentative policy analysis. The approach emphasizes that policymaking is a deliberative space where diverse perspectives, values, and experiences intersect through public argumentation. Deliberative policy analysis not only seeks technical solutions but also creates space for the integration of normative and empirical considerations. This approach is crucial for challenging technocratic assumptions and promoting more participatory and reflective processes in the use of policy knowledge (Cairney, 2023). In applying this framework, the study identifies priority strategies for social protection for older persons, emphasizing the strengthening of human resources and public awareness as foundational elements, in line with the direction set forth in the National Strategy on Ageing and the Draft Strategic Plan of the Ministry of Social Affairs 2025–2029. Data was collected through focus group discussions (FGDs) involving relevant work units, ministries/agencies, stakeholders, and development partners of the Ministry of Social Affairs.

Problem analysis was conducted using the problem tree analysis method, followed by the formulation of alternative solutions through a SWOT analysis - a strategic planning tool used to evaluate an organization's strengths, weaknesses, opportunities, and threats. Strengths and weaknesses are considered internal factors, while opportunities and threats are external factors (Hill & Westbrook, 1997). To determine priority strategies, the USG (Urgency, Seriousness, and Growth) method was applied, involving the weighting and ranking of key strategic alternatives. Once the policy alternatives were identified, a logic model was developed (McLaughlin & Jordan, 2015) to systematically map the relationships between inputs, activities, outputs, outcomes, and the ultimate goals of the proposed policy. The logic model serves as a structured and measurable framework for designing the implementation strategy of social protection policies of older persons and provides a foundation for formulating evidence-based policy recommendations.

Results and Discussion

As a member state of the United Nations, Indonesia has endorsed the Madrid International Plan of Action on Ageing (MIPAA) and the Political Declaration adopted at the Second World Assembly on Ageing (Madrid, 2002). This declaration marked a global paradigm shift in addressing population ageing, focusing on three priority areas: (1) older persons and development; (2) advancing health and well-being into old age; and (3) ensuring enabling and supportive. These three aspects form the foundation for policy formulation and recommendations for governments, non-governmental organizations, and various actors to transform perspectives, interactions, and care towards older persons. Through this political declaration, countries are expected to integrate ageing issues with social and economic development and human rights, as reflected in various UN summits over the past decade. This commitment was further reinforced by the Kuala Lumpur Declaration on Ageing: Empowering Older

Persons in ASEAN (2015), adopted by ASEAN member states. The declaration reaffirms ASEAN's collective commitment to building an inclusive, sustainable, and resilient community, implemented through ten concrete actions.

At the national level, Indonesia has developed a comprehensive regulatory and policy framework for social protection of older persons. Key regulations include: Law No. 11 of 2009 on Social Welfare, Law No. 36 of 2009 on Health, Presidential Regulation No. 43 of 2004 on the Improvement of Social Welfare for Older Persons, Ministry of Health Regulation No. 79 of 2014 on the Provision of Geriatric Services in Hospitals, Ministry of Social Affairs Regulation No. 5 of 2018 on the National Standards for Social Rehabilitation for Older Persons, and Ministry of Social Affairs Regulation No. 7 of 2021 in conjunction with Ministry of Social Affairs Regulation No. 7 of 2022 on Social Rehabilitation Assistance (ATENSI). These regulations serve as the legal foundation for developing policy strategies that are adaptive to demographic dynamics and global as well as regional challenges.

Considering the challenges of an ageing population, Indonesia implements social protection for older persons through various program schemes that must be ensured to align with the National Strategy on Ageing as part of the Care Economy Roadmap 2025–2045. This alignment aims to support social protection for older persons and strengthen employment sectors related to care within the 2025–2029 National Medium-Term Development Plan. National Strategy for Ageing serves as a reference for ministries/agencies, provincial governments, and district/city governments in formulating policies, programs, and activities related to ageing as an integral part of national and regional development.

Previously, under the Ministry of Social Affairs' Strategic Plan (Renstra) 2020–2024, older persons were already recognized as a vulnerable group requiring empowerment and long-term care services. The Renstra emphasized the need to improve the *social functioning index* of older persons through rehabilitation programs, community-based services, and the development of long-term care for non-independent elderly (Ministry of Social Affairs, 2020). This provided the foundation for prioritizing older persons in subsequent planning cycles.

Building on previous efforts, the Ministry of Social Affairs of the Republic of Indonesia (MoSA), through its Strategic Plan (Renstra) 2025–2029, which was officially endorsed in October 2025, places older persons as a strategic priority in addressing the challenges of an ageing population. The policy direction emphasises strengthening rights-based social protection, empowering older persons, and developing a long-term care system as part of the care economy. This continuity reflects a progression from the rehabilitation and empowerment measures of the 2020–2024 period toward the institutionalisation of rights-based protection and the care economy in 2025–2029.

To support and measure these policy priorities, the forthcoming Strategic Plan introduces the Indeks Kesejahteraan Sosial (IKESOS), or *Social Welfare Index*, as one of its key performance indicators. Designed as a composite measurement, IKESOS captures three interrelated dimensions of social welfare: the fulfilment of basic needs (such as access to food, adequate housing, sanitation, safe drinking water, health services, and social protection); social participation and inclusion (including involvement in development processes, social cohesion, non-discrimination, and participation in decision-making); and economic empowerment (covering access to jobs, entrepreneurship, productive assets, and sustainable income).

Together, these dimensions provide a comprehensive picture of social well-being, enabling evidence-based planning, targeting, and evaluation of social protection and empowerment programmes at both national and subnational levels. By positioning IKESOS as a performance indicator, the Ministry of Social Affairs seeks to strengthen accountability and ensure that social welfare policies, particularly those for older persons are responsive to their needs and rights while supporting the broader transition towards an inclusive care economy.

In the context of the National Strategy on Ageing 2021, the Ministry of Social Affairs of Indonesia (MoSA) serves as the lead agency responsible for formulating and implementing social protection strategies for older persons. The implementation of these strategies is aligned with both regional and international commitments, particularly the Kuala Lumpur Declaration on Ageing, which outlines ten concrete actions to promote the rights and well-being of older persons. Furthermore, the national strategy is guided by existing policy frameworks and instruments within the mandate of the Ministry of Social Affairs, as detailed figure below.

Mapping the Kuala Lumpur Declaration, National Strategy on Ageing, and Indonesia Ministry of Social Affairs Implementation

Kuala Lumpur Declaration	National Ageing Strategy (Ministry of Social Affairs as Focal Point)	Implementation by the Ministry of Social Affairs
1. Shared responsibility approach in supporting older persons and caregivers	Strategy 1 – Policy Direction 1.1 Improving social protection	Social assistance programs for older persons (PKH, ATENSI, Funeral Assistance) and ongoing social services exist, but they do not fully reach all older persons in need. Long-term care is not yet fully covered.
2. Intergenerational solidarity and increased public awareness on older persons' rights and issues	Strategy 3 – Policy Direction 3.1 Socialization of ageing issues	Socialization exists, but is not yet massive. Support from intergenerational communities and local governments is needed.
3. Life-course and rights-based approach for public services & legal protection	Strategy 5 – Policy Directions 5.4 & 5.7 Protection from violence & elderly regulations	Advocacy for violence against older persons and legal aid has been implemented, but not yet systematic and does not fully address gender issues. Sectoral regulations are not yet fully integrated.
4. Mainstreaming ageing issues into national policy	All strategies under the National Ageing Strategy	Ageing issues have been elevated via the national strategy, but mainstreaming into sectoral policies remains limited. The Ministry of Social Affairs is more active in the social aspect only.
5. Development of human resources in gerontology and geriatrics	Strategy 4 – Policy Direction 4.7 Institutional capacity building	Basic training (Basic Social Work) has been implemented, but there are no special gerontology competencies. No certification for professional elderly care workers.
6. Provision of data & research based on gender-responsive evidence	Relevant to DTKS development	DTKS is the basis for social intervention, but is not yet gender-responsive and lacks integration with the health system and elderly care data.
7. Strengthening capacity, institutions & multisector collaboration	Strategy 4 – Policy Direction 4.7 Institutional capacity building	LKS-LU services and organizations are being developed, but not yet evenly distributed. Cross-sector collaboration is still weak.
8. Support for elderly associations and networks	Strategy 3 – Policy Direction 3.1 Socialization of ageing issues	Community support is delivered through socialization, but formal elderly associations are still limited and not yet widely facilitated.
9. Enhancing regional cooperation & exchange of good practices	Not yet explicitly reflected in the National Strategy	Some regional cooperation has been facilitated, but still limited to ASEAN-level cross-sector initiatives. The Ministry of Social Affairs has not fully played a regional facilitator role.
10. Strengthening regional policies and exchange of good practices	Not yet explicitly reflected in the National Strategy	Several activities have involved regional exchanges, but not yet aligned with ASEAN best practice sharing. The Ministry of Social Affairs needs to act as a regional collaboration facilitator.

As indicated in the introduction, the implementation has not been optimal and several weaknesses have been identified. From a human resources (HR) perspective, there are several types of personnel involved in social protection programs, including social workers, social counselors, facilitators, and volunteers. Although these roles are relatively numerous, the public often lacks awareness of their existence, duties, and functions. Moreover, there is frequent overlap in roles and responsibilities among different categories of social welfare personnel. In addition, their roles remain suboptimal due to the absence of specific regulations governing their functions, limited knowledge and skills related to community development, and inadequate supporting infrastructure and facilities (Sugiyanto & Suradi, 2020).

In 2022, a Draft Presidential Regulation on Development Facilitators (RPP tentang Pendamping Pembangunan) was proposed but has not yet been enacted. The regulation is considered urgent for several reasons: (1) to strengthen economic leverage in rural areas; (2) to consolidate and improve the efficiency and effectiveness of programs implemented at the village level; (3) to accelerate inclusive, equitable, and sustainable development; (4) to expedite the achievement of national development targets; (5) to ensure the continuous quality and competency of facilitators across various programs; and (6) to enhance coordination among facilitators from different ministries/agencies, local governments, and development partners across Indonesia (Coordinating Ministry for Human Development and Culture, 2023). The absence of this Regulation has become a barrier to the effective coordination and optimization of the programs.

Another challenge - is the inadequate remuneration received by social program facilitators. Payments are disbursed only every three months, and the low honorarium significantly impacts the facilitators' motivation and performance in carrying out their duties (Widyakusuma, N. 2013). Furthermore, not all facilitators receive formal training or education. Nevertheless, they are expected to possess both theoretical and practical foundational knowledge to effectively deliver services to older persons (Ministry of Social Affairs, 2007). The Directorate General of Social Rehabilitation required a total of 1,306 professional social workers (*Pekerja Sosial/Peksos*), yet only 511 had been deployed, resulting in a shortfall of 795. Similarly, the demand for social counselors (*Penyuluh Sosial/Pensos*) was 174, but only 68 had been assigned, leaving a gap of 106 (Edi Suharto, MoSA, 2020).

In 2021, the number of Subdistrict Social Welfare Workers (Tenaga Kesejahteraan Sosial Kecamatan/TKSK) across Indonesia reached 7,230, up from 7,201 the previous year. TSKS serve as the frontline personnel in delivering social services at the subdistrict level, including programs related to community empowerment and rural cooperative development (MoSA, 2021). The Ministry of Social Affairs also oversees other social pillars, including 33,000 facilitators of the Family Hope Program (PKH), 24,391 Disaster Response Cadets (Tagana), and 1,946 facilitators of Social Rehabilitation (Rehsos). These personnel serve as key implementers of various social welfare programs across the

country (MoSA, 2025). The facilitators come from diverse educational backgrounds, including social work, science and technology, social sciences and humanities, arts, as well as education and teaching. However, they do not possess specialized skills in supporting older persons. Instead, they participate in basic social work skills training provided by the Center for Education and Training of Professional Development - Pusdiklatbangprof MoSA.

From the budgeting perspective, reference is made to Presidential Instruction of the Republic of Indonesia No. 1 of 2025 on Budget Efficiency in the Implementation of the State Budget (APBN) and Regional Budget (APBD) for Fiscal Year 2025. This instruction mandates that ministers review expenditures within their respective duties, functions, and authorities. In the implementation of the 2025 State Budget, this efficiency directive does not significantly impact the delivery of social protection programs, particularly those implemented through social assistance schemes. However, certain components of social protection programs, especially those involving assessments of prospective beneficiaries conducted through field visits, fall under operational spending subject to efficiency measures. Consequently, this poses a risk of reduced target achievement, particularly in the delivery of assistance under the Social Rehabilitation Assistance Program (ATENSI). However, several social assistance programs experienced budget cuts that affected the distribution of aid to poor families, older persons, and persons with disabilities (Nurhidayah, 2025).

The social protection program through the National Health Insurance (*Jaminan Kesehatan Nasional, JKN*) is also significantly affected. Access to health services for older persons remains uneven, with limited geriatric facilities available in community health centers (*puskesmas*) and hospitals, especially in remote regions. As of 2024, only 11.01% of hospitals provided integrated geriatric services. The target is to increase this coverage to 20% by 2025 and 50% by 2029. Siti Setiati, a geriatric specialist, remarked that "The health financing system for older persons has benefited significantly from BPJS (Health Social Security Administration Agency), but its implementation is still not optimal. Home care services, for instance, are highly preferred by older persons who generally wish to remain at home, yet these services are not covered by BPJS. Additionally, the referral system requires improvement to ensure that older persons are not subjected to prolonged waiting periods.

Several studies show that patients insured under BPJS still face significant waiting times for outpatient services. For example, at FMC Bogor Hospital, the average waiting time for BPJS outpatient services was found to exceed 30 minutes (Rehata dkk, 2025). Also, in Semarang Private Hospital, more than half of BPJS patient respondents waited over 60 minutes (Simanjuntak dkk, 2025). While these findings do not specifically isolate elderly patients, they strongly suggest that waiting time is a systemic issue that also affects older persons.

In terms of infrastructure for social protection, older persons are entitled to age-friendly environments as stipulated in the Regulation of the Minister of Social Affairs No. 4 of 2017 on Guidelines for the Development of Age-Friendly Areas. This includes the provision of accessible and safe public transportation, as well as specialized transport services. However, in practice, not all modes of public transportation are accessible or provide services specifically tailored to the needs of older persons and persons with disabilities. In certain locations, public transportation infrastructure remains burdensome for older users. Other factors that hinder the achievement of the objectives of programs aimed at improving the well-being of older persons and therefore require re-evaluation include long travel distances, which often pose significant challenges for older persons due to their physical vulnerability. Another contributing factor is the limited access to information among older persons who are digitally illiterate, making it difficult for them to learn about the programs or to open bank accounts required for receiving assistance (Baskara, 2023).

Implementation of social protection for older persons in Indonesia goes beyond direct cash transfers and encompasses broader programs designed to enhance their welfare. One of the earliest initiatives was the Social Assistance Program for Neglected Older Persons (*Asistensi Sosial Lanjut Usia Terlantar - ASLUT*), launched in 2006. Initially providing direct cash assistance to neglected older persons, the program has contributed to reducing extreme poverty among elderly households and improving access to basic needs such as food and health services (Ministry of Social Affairs, 2020). Over time, ASLUT beneficiaries were also linked with other national social assistance schemes, such as the Family Hope Program (*Program Keluarga Harapan - PKH*), which offers conditional cash transfers. Evaluations of PKH show that households with elderly members benefit not only from financial assistance but also from improved access to health services, thus enhancing health outcomes and reducing vulnerability among older persons (World Bank, 2020).

In addition, the Social Rehabilitation Assistance Program (*Asistensi Rehabilitasi Sosial - ATENSI*), introduced as part of the social rehabilitation reform, has expanded services for vulnerable groups including older persons. Over the past decade, ATENSI has reached 512,261 older beneficiaries with services such as residential care, community-based rehabilitation, family support, and assistance

for independent living. These interventions are supported by 31 Ministry of Social Affairs Centers across Indonesia and have been shown to restore the social functioning of older persons, strengthen family-based care, and reduce institutionalization (Ministry of Social Affairs, 2024). As of 2024, a total 557,140 neglected older persons have also received nutritional support distributed through 2,275 community groups (*Pokmas*), further demonstrating the program's role in improving the quality of life for the elderly.

In 2024, only 11.01% of hospitals provided integrated geriatric services. The target is to increase this figure to 20% in 2025 and 50% by 2029. Meanwhile, in the aspect of social protection, although Law No. 13 of 1998 and the National Social Security System Law (SJSN) guarantee the rights of older persons, the coverage of social programs remains limited. Currently, only around 70% of older persons are registered with BPJS Health Insurance. Furthermore, the majority of older persons who are still working are employed in the informal sector (84.75%), meaning they lack adequate pension security (Srihastuti, Coordinating Ministry for Human Development and Cultural Affairs, 2025).

Findings from research conducted by The Prakarsa Welfare Initiative for Better Societies in 2020, revealed discrepancies between central government data and the actual performance of social protection services for older persons. The government's slow response has caused these data inconsistencies to take a long time to update, resulting in exclusion errors, where older persons who are targeted recipients experience delays or failure in receiving aid within a certain period (Indah, KaryaFakta.com, 2025). The Final Report on the Results of the Inspection (LAHP) by the Indonesian Ombudsman highlights four main focuses in the supervision of social assistance (Bansos): accuracy of target recipient data, equitable distribution of social assistance partners, mechanisms for social assistance delivery, and ease of public access to information regarding service standards and complaint management mechanisms. Meanwhile, despite data updating efforts, the Ombudsman still found that the target recipient data (DTKS - Integrated Social Welfare Data) is not entirely valid. The Ombudsman expressed concern over the absence of effective solutions to challenges in distributing social assistance to the outermost, remote, and disadvantaged (3T) regions. The registration process is complicated and often prolonged, budgets and the competencies of implementing human resources are deemed inadequate, and access to information regarding types and mechanisms of social assistance is limited and difficult for the public to reach (OMBUDSMAN, 2021). On the other hand, the Ministry of Social Affairs and local Social Services have not managed complaints optimally. The Ombudsman has repeatedly found that complaint management units are not only ineffective but also not publicized, leaving the public unaware of their existence (OMBUDSMAN, 2024). Based on the evaluation of government social security programs for the elderly, it can be concluded that to enhance the effectiveness and accuracy of these programs, policy transformation or updates in implementation strategies are necessary. This includes improving an online data system that is more integrated and comprehensive, as well as more accurate verification of the social and economic status of the elderly. A synergy between the government and society is also essential to ensure the social assistance reaches those who truly need it (BPS West Java Province, 2020). As Sumadi highlighted, having understood the dynamics of all social protection programs implementations, and effective targeting systems used by different institutions, it is obvious that Indonesia needs to have an integrated beneficiary data management system (Sumadi, 2023). DTKS was recently transformed into DTSEN (*Data Tunggal Kesejahteraan Sosial Nasional*), mandated by Presidential Instruction No. 4 of 2025 issued on February 5, 2025, to provide more accurate and comprehensive data for policy and program implementation.

Based on the review of data presenting issues in the implementation of social protection for the elderly, a problem tree analysis was conducted and resulted in the problem statement that social protection for the elderly in Indonesia remains inadequate due to limitations in human resources, funding, infrastructure, as well as weak governance and cross-sector coordination. The underlying issues include:

1. The low competency and capacity of personnel implementing social protection for the elderly, the absence of nationally standardized training, and the limited number of human resources familiar with a life-cycle approach hinder effective service delivery on the ground.
2. High dependence on the national budget (APBN) without the development of alternative financing schemes (such as CSR or philanthropic funds), as well as the lack of incentives for social workers in remote, frontier, and disadvantaged areas (3T), limit the sustainability of elderly protection programs.
3. Public infrastructure remains unfriendly to the elderly (accessibility, transportation, health service facilities), while gaps in access to technology and low digital literacy hinder the utilization of innovative services such as e-consultation and telemedicine.
4. Policy fragmentation among sectors, unintegrated elderly data across institutions, and weak coordination between central and regional governments in implementing the National Strategy

on Elderly (*Stranas Kelanjutusiaan*). Monitoring and evaluation of programs have yet to be conducted systematically.

As a result of the accumulation of these issues, social protection services remain suboptimal, policies are not fully responsive to the needs of the elderly. From the perspective of the elderly, these needs include greater access to affordable and continuous health care, availability of home and community-based long-term care services, adequate income security to meet daily living costs, and age-friendly public infrastructure that supports mobility and independence. Older persons also emphasize the importance of social inclusion, opportunities for productive engagement, and protection from neglect and abuse. The lack of responsiveness to these multidimensional needs, combined with the fact that public literacy regarding elderly issues is still low, contributes to persistent service delivery gaps and undermines the quality of life of older persons in Indonesia.

Collectively, these factors highlight the urgency of formulating policies that enable the optimal implementation of social protection for older persons, so that they may attain independence, well-being, and dignity. Achieving this goal requires an appropriate strategy that is grounded in a clear understanding of both the strengths and weaknesses of the current system, thereby providing a solid foundation for the development of effective alternative policy strategies.

Strategic Alternatives

Based on several alternative solutions formulated through the SWOT matrix, a clustering of similar alternatives was conducted, resulting in the identification of five main strategies aimed at achieving the stated objective:

1. Enhancing the competence of geriatric human resources and raising public awareness through the development of standardized training programs, large-scale awareness campaigns, and collaboration with educational institutions and professional organizations.
2. Optimizing financial management and diversifying funding sources through the implementation of performance-based budgeting systems, partnerships with the private sector and philanthropic organization, and the development of innovative financing models.
3. Improving the efficiency of elderly services by optimizing the use of technology and developing inclusive infrastructure, including the utilization of public spaces, mobile services, telemedicine, and partnerships with the private sector.
4. Promoting innovation in elderly services through collaboration and adaptation by establishing cross-disciplinary innovation teams, developing flexible digital platforms, conducting policy advocacy, and adopting best practices through benchmarking.
5. Strengthening the participation of older persons and cross-sector coordination through the establishment of participation forums, development of education and advocacy programs, and enhancing inter-agency coordination through integrated data platforms and regular meetings.

Based on the grouping of several similar alternative solutions, a selection was made to prioritize them into key strategic issues using the USG (Urgency, Seriousness, and Growth), continued with weighted ranking results, the most prioritized key strategy identified as having the highest overall score across all dimensions is the enhancement of human resource competencies and public awareness through the development of standardized training programs, widespread socialization campaigns, and collaboration with educational institutions and professional organizations. This strategy is considered a high prioritized for integration into the Ministry of Social Affairs' Strategic Plan 2025-2029.

Discussion

Implementation of the strategy and Its alignment with the National Strategy on Aging and the Ministry of Social Affairs Strategic Plan 2025–2029

The National Strategy on Aging serves as the primary reference for the formulation of inclusive and sustainable social protection policies. This strategy should also guide the Strategic Plan of the Ministry of Social Affairs 2025–2029, which is currently in the finalization process and propose “the realization of an inclusive Social Welfare System for Poor and Vulnerable Communities” as one of its strategic objectives.

Before 2025, the Ministry of Social Affairs' Strategic Plan (Renstra) 2020–2024 had already identified older persons as a vulnerable group in need of empowerment and long-term care services. The Renstra emphasized improving the social functioning index of older persons through rehabilitation programs, community-based services, and the gradual development of long-term care for non-independent elderly (Ministry of Social Affairs, 2020). These efforts contributed to laying the foundation for current policy directions by promoting rehabilitation-based and community-driven interventions. However, challenges persisted, including fragmented coordination, limited resources, and gaps in

service delivery, which underscored the need for more systematic and rights-based approaches in the next planning cycle.

Refer to these earlier experiences, the forthcoming Strategic Plan (Renstra) 2025–2029 places the issue of older persons as a strategic priority in addressing the challenges of an ageing population. The selected and highest priority strategy for the implementation of social protection programs for older persons is the strengthening of human resources and the development of an integrated information system.

The selected and highest priority strategy for the implementation of social protection program for older persons is the Strengthening of Human Resources and Integrated Information System.

This core strategy is elaborated through three key components derived from relevant strategies outlined in the National Strategy on Ageing, particularly those under the responsibility of the Ministry of Social Affairs. These three components are: (1) the development of standardized training programs. (2) large-scale public awareness campaign and (3) collaboration with educational institutional and professional organization, based on the following considerations:

a. Development of Standardized Training Programs

Strengthening human resource competencies supports the implementation of quality social protection for the elderly. The National Strategy on Aging (Strategies 4 and 5) emphasizes the importance of enhancing professionalism among social workers and elderly service institutions. The draft of the 2025–2029 Ministry of Social Affairs Strategic Plan, Policy Direction 5: Strengthening Competencies and Welfare of Social Pillars, includes strategies such as: (1) promoting adaptive HR competency development policies for social welfare workers, (2) improving the quality of social welfare human resources through the development of functional positions and ongoing education and training to achieve standardized professionalism, (3) enhancing the quality of social welfare higher education graduates so that they work in their fields, (4) community assistance to access social welfare services (TBD), and (5) increasing incentives for social pillars and appointments as government employees with work agreements.

Both references affirm that HR strengthening must be conducted through nationally standardized training based on the Indonesian National Work Competency Standards (SKKNI), with a modular and flexible curriculum that is regularly updated. The primary training targets include social workers, social assistants, elderly *posyandu* cadres, informal caregivers, and community volunteers. Training is designed to equip participants with technical skills, understanding of service ethics, human rights perspectives, gender sensitivity, and knowledge of long-term care principles. The curriculum should also cover aspects of gerontology, geriatrics, empathetic communication, handling special conditions such as dementia and disabilities, and the use of social service technologies such as digital assistance and telemedicine. Training methods include both online and offline formats, maximizing cross-sector collaboration, provision of training facilities, and strengthening local capacity to build a more adaptive and sustainable elderly social protection ecosystem. Synergy with INGOs and development partners that have been ongoing need to be enhanced to optimize resources, capacity building, and expand the coverage of social welfare programs. Budget efficiency policies also affect the scope of capacity building the Ministry of Social Affairs can undertake. In line with these conditions, partnerships with the private sector can encourage innovation and alternative funding through Corporate Social Responsibility (CSR) programs, with community participation as the main actors on the ground, strengthening program sustainability through a community-based approach.

b. Massive and Participatory Socialization Campaigns

The National Strategy on Aging Strategy 3 underscores the importance of socialization efforts to strengthen intergenerational solidarity, eliminate stigma, and enhance community participation. The Ministry of Social Affairs needs to increase synergy with development partners, including INGOs/NGOs and the private sector. Utilizing NGO networks can expand service outreach to vulnerable groups, while partnerships with the private sector can drive innovation and alternative funding through Corporate Social Responsibility (CSR) programs. Active community participation through community groups (*pokmas*) currently plays a crucial role in strengthening program sustainability by adopting community-based approaches. Cross-sector collaboration, especially among ministries/agencies involved in the National Strategy on Aging, forms the foundation for expanding coverage, improving effectiveness, and ensuring the sustainability of social welfare programs for the elderly in Indonesia.

c. Strategic Partnerships with Educational Institutions and Professional Organizations

Policy implementation cannot succeed without the involvement of external supporting actors beyond the government. Collaboration between Ministry of Social Affairs and educational institutions as well as professional associations, both social work and other professions, constitutes a critical component. This collaboration may include developing higher education curricula responsive to aging issues, establishing research centers focused on elderly policy, and organizing profession-based

training programs. Such partnerships create a sustainable capacity-building ecosystem grounded in evidence-based policy. The goal is to support the formulation of evidence-based policies to address the challenges of an increasing elderly population, as aligned with the national social protection system reform framework. This cooperation can encompass developing vocational and academic curricula based on aging issues, conducting policy research and service innovation using technology, and strengthening professional forums as advocacy partners and quality improvement agents in service delivery. Given the strategic importance of this collaboration, MoSA may initiate the establishment of a Center of Excellence for Elderly Services, which will coordinate education, training, and policy development aligned with evidence-based policymaking as promoted in the National Medium-Term Development Plan.

The National Strategy on Aging Strategy 4: Institutional and Governance Strengthening of Services, emphasizes the importance of standardization and institutionalization of elderly service providers (Policy Direction 4.7). This collaboration is further reinforced by Strategy 5: Respect, Protection, and Fulfillment of Elderly Rights, specifically Policy Direction 5.8, which promotes community participation and strategic partnerships in advancing elderly rights. Through these collaborations, sustainable capacity enhancement of human resources is expected to be realized, grounded in scientific knowledge relevant to the needs of the elderly.

2. Approaches in Policy Strategy Implementation

The implementation of elderly policy strategies cannot be conducted partially; it requires a comprehensive and directed approach to address the complex and multidimensional challenges faced by Indonesia's aging population. These approaches serve as the foundation to ensure the effectiveness of the formulated strategies by referring to the National Strategy on Aging and maintaining relevance to both the national and global development frameworks.

a. Life-cycle Approach

The World Health Organization (WHO), in its World Report on Ageing and Health (2015), emphasizes that the health and well-being of older persons are significantly influenced by access to education, decent employment, nutrition, and a healthy environment throughout their early life and adulthood. The life-cycle approach implies that, in designing social protection strategies for older persons, one of the key approaches to be adopted is the life-cycle approach. This approach is based on the understanding that an individual's well-being in old age does not stand alone but is the result of accumulated experiences, interventions, and conditions throughout their life stages. The Madrid International Plan of Action on Ageing (MIPAA) stresses the importance of investing in early life stages as preparation for old age. Interventions starting from childhood and young adulthood, such as inclusive education, preventive health services, and promotion of healthy lifestyles, have long-term impacts on the quality of life of the elderly. The life-cycle approach within the National Strategy on Aging-Strategy 1 highlights the importance of cross-life-phase investment to ensure protection and quality of life for older adults. Thus, social protection for the elderly cannot be separated from investments across all life stages.

b. Improving the Quality of Life of elderly

WHO emphasized that the quality of life for elderly is determined by a combination of multiple factors, not merely by longevity. WHO promotes the concept of healthy ageing, defined as the process of maintaining and enhancing functional abilities that enable well-being in older age. *Healthy ageing* is not solely about extending life expectancy but about improving the quality of life by ensuring that older persons remain active and independent. Additionally, functional ability encompasses all health attributes that enable older individuals to do things they value, such as mobility, social relationships, and participation in society (Thiagarajan et al., 2022). This approach encourages the fulfillment of older adults' rights to access healthcare, supportive environments, and adequate social services to sustain their daily living.

The Madrid International Plan of Action on Ageing (MIPAA, 2002) emphasizes that social participation is a vital component in enhancing the quality of life of older persons. Older persons must be provided with opportunities to remain engaged in social, cultural, economic, and spiritual activities, which in turn can prevent social isolation, improve psychological well-being, and strengthen intergenerational solidarity. The National Strategy on Ageing emphasizes policies aimed at improving the quality of life for older persons through access to basic services, long-term care, the provision of age-friendly environments, and the promotion of participation and empowerment of older persons. The strategy also advocates older persons to be recognized as active contributors to development, rather than merely as recipients of assistance. The Draft Strategic Plan of the Ministry of Social Affairs 2025–2029 aims to improve the quality of life of older persons by enhancing their social functioning, which is identified as one of the key indicators of overall social functioning. This approach aligns with the concepts of healthy ageing and functional ability.

References from WHO, MIPAA, and National Strategy on Ageing indicate that policies focused solely on protection or assistance are no longer sufficient. A comprehensive and sustainable approach is required to ensure that older persons opportunities to remain active, independent, and valued in all aspects of life.

c. **Urgent Social Protection Needs**

The need for social protection for older persons becoming increasingly critical in light of demographic shifts and the growing number of older people in Indonesia. Older persons represent a population with high vulnerability across economic, health, social, and environmental dimensions. According to the National Team for the Acceleration of Poverty Reduction (TNP2K, 2020), this multidimensional vulnerability necessitates special attention in the formulation of rights-based, inclusive, and sustainable social protection policies.

The Madrid International Plan of Action on Ageing (MIPAA, 2002) emphasizes that every older person has the right to social protection as an integral part of human rights. This includes access to healthcare services, basic income security, long-term care, and protection from violence and discrimination. Social protection should not be viewed as an act of charity but as an inherent right that must be guaranteed by the state. The National Strategy on Ageing in its Strategy 1 - on enhancing social protection, income security, and individual capacity, underscores the importance of integrated social assistance, decent livelihood guarantees, and comprehensive social care services. Social protection for older adults must focus on the following three key aspects: Health Protection, Economic Protection, and Social Protection. The social protection approach must be grounded in the fulfillment of older adults' fundamental rights in the domains of health, economy, and social inclusion. Drawing from the National Strategy on Ageing, MIPAA, and TNP2K's findings, interventions must be equitable, systematic, and comprehensive to enable older adults to live healthy, independent lives and continue contributing to society. It is important to underscore that social protection for older adults constitutes a long-term investment toward building an inclusive society with intergenerational justice.

The 2025–2029 National Medium-Term Development Plan has positioned older persons as a priority group within the transformation of the national social protection system. This commitment was initiated during the 2019–2024 Strategic Plan period through the strengthening of community-based services, including the development of home visit and community care models under the Social Rehabilitation Services for Older Persons (RSLU), as well as the provision of basic needs for poor and vulnerable elderly individuals through the ATENSI scheme, food assistance, and income support mechanisms. In the 2025–2029 RPJMN, this policy is reinforced through the development of social infrastructure that promotes interaction and social integration for older persons, aligned with the national direction of the Care Economy. These efforts are further supported by capacity building for social workers, community facilitators, and community groups (kelompok masyarakat, or pokmas). However, implementation continues to face challenges, particularly in the area of responsive reporting systems that are crucial for ensuring accountability, tracking program outcomes, and effectively addressing and mapping the specific service needs of older persons, especially in cases of violence and neglect.

d. **Empowering Older Persons**

The empowerment of older persons is an approach grounded in the paradigm that older people are not merely passive recipients of protection or assistance, but active agents who possess rights, capacities, and life experiences that enable them to continue contributing to social, economic, cultural, and political life. The World Health Organization (WHO), through the Decade of Healthy Ageing 2021–2030, emphasizes that “meaningful engagement with older people themselves will be critical to each of the Decade's action areas, as they are agents of change as well as service beneficiaries.” This underscores the necessity of viewing older persons as agents of change, individuals capable of inspiring younger generations, leading communities, and sharing their experience in public decision-making processes. As such, the empowerment approach must create inclusive spaces that support active participation of older persons across various sectors of life, based on their capacities and preferences.

The Madrid International Plan of Action on Ageing (MIPAA), under Objective 4 (Involvement of older persons in the development and strengthening of primary and long-term care services), explicitly calls for the inclusion of older persons in the planning, implementation, and evaluation of social, health, and rehabilitation programmes. This right to participation is not only essential for policy relevance, but also for ensuring that those directly affected by policies are empowered to shape them. Such engagement promotes social justice and reinforces civic involvement among older populations.

The Kuala Lumpur Declaration on Ageing (2019) highlights the importance of establishing forums, networks, and associations of older persons at community to national levels as platforms for social empowerment and intergenerational solidarity. Community-based approaches are considered effective in reducing social isolation, enhancing self-esteem, and strengthening the roles of older persons in local development. In Indonesia's National Strategy on Ageing, this approach is reflected in

Strategy 3: Development of Age-Friendly Communities and Environments and Strategy 5: Respect, Protection, and Fulfilment of the Rights of Older Persons. These strategies underscore the importance of transitioning from assistance-based social protection to a more participatory and empowerment-based model.

Through rights-based and inclusive policies, older persons are not only protected but also recognized as part of the solution to development challenges. This empowerment-oriented approach restores the meaning of an active, healthy, and productive life. With strong intersectoral collaboration and support from families and communities, empowering older persons can become a key pillar of a just and sustainable national development agenda.

e. An Integrated Policy Framework

In the effort to build an inclusive and sustainable social protection system for the ageing population, it is essential to adopt an integrated policy framework approach, which emphasizes that the challenges of ageing cannot be addressed by a single sector alone. Instead, it requires cross-sectoral coordination, program integration, and policy synchronization at both national and subnational levels. The Madrid International Plan of Action on Ageing (MIPAA, 2002) encourages countries to develop coordinated and cross-sectoral policies to avoid fragmentation of programmes and services for older persons. Policy fragmentation has long been a barrier to effective social protection interventions, making institutional collaboration essential in ensuring the comprehensive fulfillment of older persons' rights.

Indonesia's National Strategy on Ageing addresses this through Strategy 4: Strengthening Institutions for Ageing Program Implementation. This strategy highlights the importance of developing institutional standards, accreditation and certification guidelines for eldercare service providers, and the establishment of local Social Welfare Institutions for Older Persons (LKSLU). These measures aim to build a strong, standardized, and responsive service delivery system that meets the diverse needs of older people in an integrated manner. Integrated policy in practice is the ATENSI program (Assistance for Social Rehabilitation), which combines services tailored to individual needs across medical, economic, and psychosocial dimensions. The implementation of the Minimum Service Standards (SPM), strengthening of accreditation for older-person social institutions (LKS Lansia), and integration of service recipient data into the Unified Social Welfare Database (DTKS) are all efforts to improve the accuracy and effectiveness of interventions.

The implementation of the Human Resources Strengthening and Integrated Information System Strategy is expected to significantly contribute to the development of a more adaptive, inclusive, and sustainable social protection system for older persons. This strategy enhances human resource capacity, particularly in the provision of social services and assistance for older persons, through standardized training and competency development. Concurrently, improvements in information systems and the updating of ageing-related data will enable more precise and responsive policymaking. Furthermore, this strategy is pivotal in accelerating the transition from a charity-based approach to a rights-based, dignity-oriented, and participatory model of social protection. As such, resulting policies will not only address basic needs but also create opportunities for the active engagement of older persons in social, economic, and community life. Effective implementation of this strategy is anticipated to support the realization of older persons who are healthier, more empowered, and fully involved in comprehensive social development.

Policy Option

Based on the analysis using the USG (Urgency, Seriousness, Growth) approach, several priority issues in social protection for older persons have been identified. Subsequently, a logic model framework is employed to formulate structured policy options by mapping the linkages between inputs, activities, outputs, outcomes, and the expected impacts. This framework also outlines the theory of change anticipated through the implementation of specific strategies. Each policy alternative is designed to address strategic issues and structured to be measurable and continuously evaluated within the context of social protection for older persons. Each strategy is developed based on the identification of root causes and potential solutions, while also referencing national, global, and regional policy frameworks. These considerations include efficiency, effectiveness, and long-term impact. The process has involved stakeholder participation to ensure the policies are effective, widely accepted, and flexible enough to adapt to future changes. Moreover, it provides a foundation for continuous evaluation to improve policy quality over time. Based on the findings, five policy alternatives have been formulated and proposed for a five-year implementation period, with phased execution as illustrated in figure as follows:

Policy Alternative 1: Standardization of Training for Human Resources in Elderly Care Services

This policy alternative underscores the critical need to establish standardized training for professionals involved in elderly care, adopting a life-course perspective. The strategy entails the development and dissemination of a nationally accredited curriculum for social workers, caregivers, community facilitators, and volunteers, supported by subject-matter experts, structured training modules, and adequate budgetary allocations. The immediate output of this initiative includes the availability of standardized training materials and the certification of care personnel. In the medium term, it is expected to enhance the competence and professionalism of service providers, while fostering a deeper understanding and empathy toward the physical, cognitive, and psychosocial needs of older persons. Ultimately, the long-term impact of this strategy is the establishment of a more human-centered, equitable, and sustainable elderly care system nationwide, ensuring quality service delivery across diverse regions.

Policy Alternative Two: National Campaign for Social Awareness and Intergenerational Participation

This strategy begins with the development of campaign materials, utilization of communication media, and activation of community networks. Activities include public campaigns and discussion forums involving diverse age groups. The output of this strategy is enhanced public literacy on elderly issues and increased community participation in elderly programs alongside local communities. The expected outcome is the fostering of solidarity and reduction of stigma toward older persons. The long-term impact is the creation of an inclusive social environment that values the existence and contributions of the elderly.

Policy Alternative Three: Strengthening Collaboration Between Government, Educational Institutions, and Professional Organizations as a Systemic Strategy

This strategy's goal is to build a knowledge and innovation base for social protection of the elderly. It can be implemented through three components: the development of collaborative curricula, cross-sector field practice implementation, and the establishment of centers of excellence serving as hubs for evidence-based policy learning and research. The expected outputs include more relevant curricula, contextualized learning practices, and applied research supporting evidence-based policy. The outcome of this strategy is the promotion of policy innovation and capacity enhancement within educational institutions. The long-term impact is the formation of a sustainable learning ecosystem that supports the development of an adaptive and responsive elderly care service system.

Policy Alternative Four: Modernization and Integration of a Responsive Elderly Information System

Through investment in digital infrastructure, sectoral data updating, and technical operator training, an integrated elderly data system across sectors can be developed. The output of this strategy is the availability of an accurate, up to date, and easily accessible information system for policymakers. The outcome is improved precision of interventions and accelerated responsiveness to the needs of vulnerable elderly populations. In the long term, this strategy can enhance program effectiveness and efficiency in data-driven social protection delivery.

Policy Alternative Five: Strengthening the Policy and Institutional Framework for Elderly Social Protection

This strategy emphasizes revising regulations, establishing a national coordination forum, and reinforcing implementing institutions to create more integrated policies and effective coordination mechanisms between central and regional governments. The outputs include clearer policy mandates, synergistic program governance, and the development of a non-fragmented, adaptive, and sustainable elderly social protection system.

The implementation of alternative strategies is arranged in a matrix of implementation stages that can be integrated into the Ministry of Social Affairs' 2025-2029 Strategic Plan, as follows:

Stages of Implementation of Alternative Policies Social Protection for the Elderly 2025–2029

Policy Alternative	2025	2026	2027	2028	2029
1. Standardization of Elderly Service Human Resources	<ul style="list-style-type: none"> Basic Preparation and Mapping Curriculum and Training Module Development Mapping of Human Resources Needs 	Initial training in priority areas with a high number of elderly and inadequate services	<ul style="list-style-type: none"> Human Resources Certification and Expansion of Training Areas Encouraging Allocation from Regional Budgets (APBD) 	<ul style="list-style-type: none"> Evaluation & Curriculum Improvement Evaluation Results for Module Refinement 	<ul style="list-style-type: none"> National Achievement Momentum Number of Elderly Service Human Resources Certified with National Standards
2. Social Awareness Campaign and Intergenerational Participation	<ul style="list-style-type: none"> Development of National Campaign Design; Creation of Materials & Multimedia 	<ul style="list-style-type: none"> Implementation of Phase 1 Campaign Community Engagement Monitoring and Evaluation of Impact 	<ul style="list-style-type: none"> Phase 2 Intergenerational Campaign, Formation of Intergenerational Forum 	<ul style="list-style-type: none"> Digital media campaign, Digital platform strengthening participatory networks 	<ul style="list-style-type: none"> Impact Evaluation and Policy Strengthening Social indicators, changes in solidarity behavior Policy recommendations
3. Collaboration between Government, Educational Institutions, and Professional Organizations	<ul style="list-style-type: none"> Consolidation and collaborative planning Mapping of potential and capacity of partners Establishment of curriculum working groups Preparation of master plan (road map) for cooperation 	<ul style="list-style-type: none"> Development of relevant core curricula and elective courses Development of case-study based learning modules. lecturer training and preparation of facilities from various institutions for curriculum implementation. 	<ul style="list-style-type: none"> Collaborative field trials and practices (social workers, nurses, psychologists, etc.) Workshop 	<ul style="list-style-type: none"> Collaboration deepening Center of excellence establishment Research Policy recommendations Activities centered at social welfare polytechnic Bandung 	<ul style="list-style-type: none"> Replication, standardization, institutionalization of collaborative models Preparation of national standards for learning Elderly services Utilize of the Center of excellence network Professional Associations
4. modernization and integration of responsive elderly information systems	<ul style="list-style-type: none"> Develop an integrated system for planning and auditing systems as well as mapping databases related to the Elderly in DTKS, civil registry office, Health data, BPJS, P3KE, and DTSEN preparation of a master plan for the development of a national Elderly information system, as well as consolidation between Ministries/ Institutions for data interoperability agreements 	<ul style="list-style-type: none"> initial development of technology infrastructure and architecture of a centralized and open Elderly information system for cross-sector connections, development of integration modules with existing systems at the Ministry of Social Affairs, Ministry of Health, civil registry office, and other partners, preparation of data exchange and interoperability formats with their security protocols, so that they are ready to be tested. 	<ul style="list-style-type: none"> Initial implementation of the elderly information system in pilot areas accompanied by technical training for data operators, social workers, and regional admins Socialization of the use of analytical dashboards to support data-based decision making 	<ul style="list-style-type: none"> expansion of the implementation of the elderly information system to all provinces, large districts/cities, accompanied by integration with other digital platforms such as social referral systems and health services. development of advanced features such as geo-mapping, automatic notifications for vulnerable elderly, and real-time intervention data. Access channels via mobile and web are starting to expand to facilitate use by the community and field officers. 	<ul style="list-style-type: none"> Comprehensive evaluation of the effectiveness and efficiency of the information system Policy revision Institutionalization of the information system
5. Strengthening Policies and Institutions for Social Protection of the Elderly	<ul style="list-style-type: none"> Review of existing regulations Initiation of policy formulation Formation of cross-sector formulation team Initial formulation of policy direction and structured legislative work plan (new regulations) 	<ul style="list-style-type: none"> Drafting Regulatory revision process Public consultation, substance testing, harmonization Submission of draft to formal legislation stage Preparation of academic manuscript 	<ul style="list-style-type: none"> Establishment of the National Coordination Forum for Social Protection of the Elderly Formulating coordination mechanisms for Ministries/ Institutions/ Departments and partners Preparing technical guidelines for implementing policies for the Elderly 	<ul style="list-style-type: none"> Strengthening of central and regional program implementing institutions Development of cross-sector SOPs Program management and coordination training 	<ul style="list-style-type: none"> Evaluation of the governance of social protection for the elderly From the evaluation results, prepare recommendations for institutionalizing the system and structure of the institution Prepare a roadmap for strengthening long-term institutions

Summary of Priorities: Among the five policy alternatives, the most urgent to implement are human resource development and social awareness enhancement. These form the essential foundation supporting the success of other policies. By integrating standardized training for service providers, inclusive social campaigns, and strategic collaboration with educational and professional institutions, this approach not only addresses current needs but also contributes to building a resilient, rights-based, and empowering social protection system for the elderly in the long term.

Conclusion

Indonesia is currently facing a significant challenge due to a demographic transition toward an ageing society, with the elderly population projected to exceed 65 million by 2045. This demographic shift entails complex consequences across health, economic, social, and environmental domains, necessitating more adaptive, inclusive, and sustainable social protection policies. This study highlights that despite the existence of various social protection programs for older persons, implementation remains hampered by critical challenges, including limited human resource capacity, dependence on state budget (APBN) funding without alternative financing schemes, inadequately age-friendly public infrastructure, policy fragmentation across sectors, and weak data integration and inter-agency coordination.

The study identifies key strategies to strengthen the social protection system for older persons. These include enhancing human resource competence and public awareness through standardized training programs, widespread awareness campaigns, and partnerships with educational institutions and professional organizations. As the policy alternatives were identified, a logic model was developed to systematically map the relationships between inputs, activities, outputs, outcomes, and the ultimate goals of the proposed policy. The logic model serves as a structured and measurable framework for designing the implementation strategy of social protection policies of older persons and provides a foundation for formulating evidence-based policy recommendations. Such strategies are essential to support the achievement of the National Strategy on Ageing (Stranas Kelanjutuaan), reinforce the Ministry of Social Affairs' Strategic Plan 2025–2029, and contribute to the realization of Indonesia's Golden Vision 2045.

The successful implementation of these strategies requires a life-cycle approach, improved quality of life for older persons, rights-based social protection, empowerment of older persons as active agents of development, and the reinforcement of an integrated, cross-sectoral policy framework. These efforts aim to foster a generation of older Indonesians who are healthy, independent, productive, dignified, and capable of contributing to national development. Through the strong political commitment, evidence-based policy innovation, and multisectoral collaboration, the transformation of Indonesia's social protection system for older persons can be realized by building a more inclusive, equitable, and sustainable society for all generations.

Policy Recommendations

Based on the strategic options for strengthening social protection for the elderly, the Ministry of Social Affairs (MoSA) should assume a strategic role in formulating and implementing policies focused on enhancing human resource (HR) capacity and developing an integrated information system. To support effective program implementation and form the foundation of a just, inclusive, and life-course-oriented elderly social protection system, the following recommendations are proposed:

1. Strengthening the Competence of Human Resources in Elderly Social Protection. MoSA is advised to undertake the following actions:
 - a. Design a standardized national training program for all personnel involved in elderly care services, including social workers, community caregivers, volunteers, and home-based caregivers.
 - b. Integrate training curricula based on the Indonesian National Work Competency Standards (SKKNI), incorporating gerontology modules with a life-course approach, digital literacy, and community-based service delivery.
 - c. Develop a national certification scheme for elderly care professionals to ensure professionalism and standardized service quality.
 - d. Propose regulations to provide incentives and labor protection for care workers, particularly in underdeveloped, frontier, and outermost (3T) regions, to enhance motivation and ensure service continuity. This process should be coordinated with the National Professional Certification Agency (BNSP).
 - e. Coordinate with the Ministry of Manpower (for SKKNI and training), the Ministry of Education and Culture (for curriculum development), and BNSP (for certification). Regional governments and local social service offices are also key partners in delivering training and mentoring at the local level.
2. Developing an Integrated Elderly Information System as the Foundation for Adaptive and Evidence-Based Social Protection. MoSA should:
 - a. Lead the development of an integrated platform that links data from DTKS, the Civil Registry (Dukcapil), BPJS Health, and local social service systems, leveraging ongoing data integration efforts through the DTSEN platform. This system should feature a national digital dashboard that enables real-time monitoring of vulnerable elderly individuals and supports decision-making and program evaluation. The system must incorporate inclusive and user-friendly technologies, especially for older adults and rural care workers.
 - b. Coordinate with the Ministry of Home Affairs (for population data access), the Ministry of Communication and Informatics (for digital infrastructure), Bappenas (for planning system alignment), and the Ministry of Health (for elderly health data integration). Technical support may also be sourced from the National Research and Innovation Agency (BRIN) and social tech developers.
3. Transforming Social Assistance (Bansos) and ATENSI Services for the Elderly. MoSA is encouraged to:
 - a. Reform elderly social assistance delivery mechanisms to improve accessibility for vulnerable seniors, particularly those facing mobility or digital barriers. One possible innovation is a home-delivery service for those unable to collect benefits or use digital wallets or bank accounts.
 - b. Develop a Digital ATENSI Program to consolidate various social services such as meal assistance, homecare, psychosocial support, and economic empowerment into a single data-driven and online-reporting system.
 - c. Partner with state-owned service providers (e. g., PT Pos Indonesia, Himbara), community leaders (RT/RW), and local volunteer groups (Pokmas) currently involved in the Food Assistance Program. Local cadres may also serve as facilitators of distribution and service literacy. Oversight and beneficiary verification should involve the Coordinating Ministry for Human Development and Cultural Affairs (Kemenko PMK), the Financial and Development Supervisory Agency (BPKP), and local governments.
4. Empowering Older Persons through Community-Based Programs. MoSA should promote the establishment of Elderly Forums at the village/ward level as centers for educational, social, and productive activities. Active and healthy older adults can participate in social entrepreneurship initiatives, light skills training, and local volunteerism. Partnerships with the Ministry of Villages, Development of Disadvantaged Regions, and Transmigration (Kemendes PDTT), the Ministry of

Cooperatives and SMEs, educational institutions, and civil society organizations are necessary to provide mentoring and access to appropriate capital.

5. Cross-Sectoral Regulatory Advocacy and Inclusive Budget Strengthening. MoSA may take the lead in:

- Formulating cross-sectoral regulations on elderly social protection, such as through Presidential or Ministerial Regulations, to serve as binding national references for all ministries/agencies and local governments. This is essential to ensure consistent program implementation and prevent institutional overlaps.
- Advocating for increased inclusive spending for the elderly by integrating elderly-related program nomenclature into the Regional Government Information System (SIPD) and local planning and budgeting documents. The Ministry of Home Affairs, Ministry of Finance, and Bappenas are key partners in securing fiscal space for aging-related priorities.

These policy recommendations emphasize the urgency of transforming elderly social protection through a holistic approach, with HR development and integrated information systems as its two main pillars. By implementing standardized training, professional certification, and a unified DTSEN-based data system, MoSA can improve service quality and ensure more efficient and targeted delivery of assistance and ATENSI services. Strengthened cross-sectoral coordination and stakeholder support are expected to contribute to building an adaptive social protection ecosystem that meets the challenges of population aging and ensures that older adults live healthy, independent, and dignified lives.

Acknowledgement

The author extends appreciation to the Ministry of Social Affairs of the Republic of Indonesia particularly the Planning Bureau, the Directorate General of Social Rehabilitation, and Pusat Pendidikan, Pelatihan, dan Pengembangan Profesi (Pusdiklatbanprof), as well as to Bappenas, especially Pusat Pembinaan, Pendidikan, dan Pelatihan Sumber Daya Manusia Perencanaan Pembangunan (Pusbindiklatren) for providing data and insights that supported this study. The author also thanks colleagues and stakeholders who contributed through discussions and feedback.

Author Brief Bio

Yanti Damayanti is an Associate Planner at the Planning Bureau of the Ministry of Social Affairs of the Republic of Indonesia. She holds a Doctorate in Educational Technology with a specialization in Early Childhood Education. Her expertise covers disability rights, early childhood education, social protection policy, and international cooperation. She is actively engaged in the planning, evaluation, and development of international cooperation initiatives, as well as in policy design and interministerial coordination to advance evidence-based strategies for vulnerable populations.

References

Ainistikmalia, N. (2019). Determinants of the elderly female population with low economic status in Indonesia. *Jurnal Ilmu Ekonomi Terapan*, 4(2), 85–100. <https://doi.org/10.20473/jiet.v4i2.14033>

Alifia, H. P., et al. (2020). Rencana pelaksanaan kegiatan program lansia. <https://www.scribd.com/document/580147473>

ASEAN. (2019). *Kuala Lumpur declaration on ageing: Empowering older persons in ASEAN*. ASEAN Secretariat. <https://asean.org>

Badan Pusat Statistik. (2014). *Statistik penduduk lanjut usia Indonesia*. BPS.

Badan Pusat Statistik. (2023). *Statistik penduduk lanjut usia Indonesia*. BPS.

Badan Pusat Statistik. (2024). *Statistik penduduk lanjut usia Indonesia*. BPS.

Baskara, V. A. (2023). Analisis kinerja pelayanan publik dalam studi kasus pelayanan program perlindungan sosial pada lansia. *KAIS*, 4(1), 13–18. <https://doi.org/10.24853/kais.4.1.13-18>

Benzaghta, M. A., Elwalda, A., Mousa, M. M., Erkan, I., & Rahman, M. (2021). SWOT analysis applications: An integrative literature review. *Journal of Global Business Insights*, 6(1), 54–72.

Boyton, N., Jackson, C., & Chen, E. (2019). *Ipsos global advisor: Views on aging*. Ipsos. <https://www.ipsos.com>

Djamhari, E. A., Ramdlaningrum, H., Layyinah, A., Chrisnahutama, A., & Prasetya, D. (2021). *Kondisi kesejahteraan lansia dan perlindungan sosial lansia di Indonesia*. Perkumpulan PRAKARSA.

Farihin, A., & Fitria, F. (2024). Pembinaan kesejahteraan berkelanjutan bagi masyarakat lansia melalui peran tokoh agama di Kabupaten Subang. *Jurnal Ekonomi Utama*, 3(3), 289–303.

Geriatri.id. (2024). Pentingnya perlindungan sosial bagi lansia dalam transformasi ekonomi 2045. <https://www.geriatri.co.id/artikel/2675/pentingnya-perlindungan-sosial-bagi-lansia-dalam-transformasi-ekonomi-2045>

Hayes, A. (2023). Ishikawa diagram. *Investopedia*. <https://www.investopedia.com/terms/i/ishikawa-diagram.asp>

Herdiyanti, P. A., & Hanani, R. (2023). Partisipasi lansia dalam program Posyandu Lansia di wilayah kerja Puskesmas Limbangan. *Journal of Public Policy and Management Review*, 13(1), 1–16.

Hill, T., & Westbrook, R. (1997). SWOT analysis: It's time for a product recall. *Long Range Planning*, 30(1), 46–52.

Indah, D. P. (2025). *Evaluasi dan transformasi kebijakan perlindungan sosial lansia prasejahtera di Indonesia*. <https://karyafakta.com/evaluasi-dan-transformasi-kebijakan-perlindungan-sosial-lansia-prasejahtera-di-indonesia/>

Kementerian Kesehatan Republik Indonesia. (2014). *Peraturan Menteri Kesehatan No. 79 Tahun 2014 tentang Pelayanan Geriatri di Rumah Sakit*. Kemenkes RI.

Kementerian Koordinator Bidang Pembangunan Manusia dan Kebudayaan. (2025). *Kolaborasi lintas sektor untuk memperkuat mobilitas penduduk lanjut usia*. <https://www.kemenkopmk.go.id/kolaborasi-lintas-sektor-untuk-memperkuat-mobilitas-penduduk-lanjut-usia>

Kementerian Pemberdayaan Perempuan dan Perlindungan Anak. (2024). *Care economy roadmap 2025–2045*. <https://www.kemenppa.go.id>

Kementerian Sosial Republik Indonesia. (n.d.). *Program ATENSI*. <https://kemensos.go.id/page/Program-ATENSI>

Kementerian Sosial Republik Indonesia. (2022). Sudahkah transportasi publik kita ramah lansia? <https://kemensos.go.id/berita-terkini/direktorat-jenderal-rehabilitasi-sosial/sudahkah-transportasi-publik-kita-ramah-lansia>

Kementerian Sosial Republik Indonesia. (2023). Kemensos lanjutkan program permakaman jangkau 100 ribu lansia tunggal dan 33 ribu disabilitas. <https://kemensos.go.id/berita-terkini/direktorat-jenderal-rehabilitasi-sosial/kemensos-lanjutkan-program-permakaman-jangkau-100-ribu-lansia-tunggal-dan-33-ribu-disabilitas>

Kepner, C. H., & Tregoe, B. B. (1981). *The new rational manager: An updated edition for a new world*. Princeton Research Press.

Larasati, D. (2020). *Menilai perlindungan sosial bagi semua: Kerentanan lansia dan perlindungan sosial selama pandemi Covid-19*. Sekretariat TNP2K.

Madrid International Plan of Action on Ageing. (2002). *United Nations Second World Assembly on Ageing*. United Nations.

Manurung, G. A. (2025). Pemerintah percepat pemenuhan layanan lansia melalui koordinasi lintas sektor. <https://www.kemenkopmk.go.id/pemerintah-percepat-pemenuhan-layanan-lansia-melalui-koordinasi-lintas-sektor>

Marzuki, R. I. (2024). Penyaluran bansos kerap bermasalah, Ombudsman berikan saran tindakan korektif kepada Kemensos. Ombudsman RI. <https://www.ombudsman.go.id/news/r/penyaluran-bansos-kerap-bermasalah--ombudsman-berikan-saran-tindakan-korektif-kepada-kemensos>

Newcomer, K. E., Hatry, H. P., & Wholey, J. S. (Eds.). (2015). *Handbook of practical program evaluation* (Vol. 864). John Wiley & Sons.

Ombudsman Republik Indonesia. (2024). Problematika bantuan sosial dan DTKS. <https://www.ombudsman.go.id/news/r/penyaluran-bansos-kerap-bermasalah--ombudsman-berikan-saran-tindakan-korektif-kepada-kemensos>

Osman, Z., Mohamad, N., & Hamzah, N. H. (2012). Vulnerability of older people living alone: Case study of Malaysia. *International Journal of Humanities and Social Science*, 2(1), 110–119.

Rahmawati, E., & Kisworo, B. (2017). Peran pendamping dalam pemberdayaan masyarakat miskin melalui Program Keluarga Harapan. *Journal of Nonformal Education and Community Empowerment*, 161–169.

Santika, A., Djamhari, E. A., & Ramdlaningrum, H. (2020). *Pemenuhan hak-hak lansia untuk hidup setara, sejahtera, dan bermartabat*. The PRAKARSA.

Selalu.id. (2025, Januari). Efisiensi anggaran Kemensos tak pengaruhi bansos dan PKH. <https://selalu.id/news-9145-efisiensi-anggaran-kemensos-tak-pengaruhi-bansos-dan-pkh>

Setiati, S. (2017, Mei 19). Pemerintah dinilai kurang memperhatikan lansia. Mengapa? *Suara.com*. <https://www.suara.com/health/2017/05/19/165851/pemerintah-dinilai-kurang-memperhatikan-lansia-mengapa>

Sugiyanto, S., & Suradi, S. (2020). Kinerja penyuluh sosial masyarakat dalam pengembangan masyarakat lokal di Banjarmasin. *Sosio Konsepsia*, 9(2), 185–197.

Sulistyaningrum, W. S. (2025). Kolaborasi lintas sektor untuk memperkuat mobilitas penduduk lanjut usia. <https://www.kemenkopmk.go.id/index.php/kolaborasi-lintas-sektor-untuk-memperkuat-mobilitas-penduduk-lanjut-usia>

Sumadi, P. (2023). Social protection in Indonesia: Reforming opportunities during Covid-19 pandemic. *ASEAN Social Work Journal*, 11(1), 49–60. <https://doi.org/10.58671/aswj.v11i1.41>

The PRAKARSA. (2020). *White paper pemenuhan hak-hak lansia untuk hidup setara, sejahtera, dan bermartabat*. The PRAKARSA.

The SMERU Research Institute & TNP2K. (2020). *Situasi lansia di Indonesia dan akses terhadap program perlindungan sosial: Analisis data sekunder*. TNP2K.

Undang-Undang No. 11 Tahun 2009 tentang Kesejahteraan Sosial. (2009).

Undang-Undang No. 13 Tahun 1998 tentang Kesejahteraan Lanjut Usia. (1998).

Undang-Undang No. 23 Tahun 2014 tentang Pemerintahan Daerah. (2014).

Undang-Undang No. 36 Tahun 2009 tentang Kesehatan. (2009).

UNFPA. (2020). Older persons in Indonesia most vulnerable during the COVID-19 pandemic. <https://indonesia.unfpa.org/en/news/older-persons-indonesia-most-vulnerable-during-covid-19-pandemic>

Peraturan Pemerintah (PP) Nomor 43 Tahun 2004 tentang Pelaksanaan Upaya Peningkatan Kesejahteraan Sosial Lanjut Usia (Lansia) (2004)

Peraturan Presiden No. 75 Tahun 2015 tentang Rencana Aksi Nasional Hak Asasi Manusia. (2015).

Peraturan Presiden No. 88 Tahun 2021 tentang Strategi Nasional Kelanjutusiaan. (2021).

Peraturan Menteri Sosial No. 5 Tahun 2018 tentang Standar Nasional Rehabilitasi Sosial Lansia. (2018).

Peraturan Menteri Sosial No. 7 Tahun 2021 juncto No. 7 Tahun 2022 tentang Asistensi Rehabilitasi Sosial. (2021/2022).

University of Kansas. (n.d.). *Community Tool Box: SWOT analysis*. <https://ctb.ku.edu>

World Health Organization. (2015). *World report on ageing and health*. WHO.