

Family support, the role of cadres and the activeness of the elderly in participating in posyandu in Pattan Ulusalu Village, Saluputti District, Tana Toraja Regency

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ABSTRACT

Family support is a person's attitude towards family members in the form of emotional support, while the role of a cadre is someone whose duty is to volunteer to help and ensure the smooth implementation of the integrated elderly service post. This research aimed to analyze the relationship between family support and the role of cadres and the activeness of elderly people in participating in integrated elderly service posts. This research implemented a cross-sectional design, involving 46 respondents selected in Pattan Ulusalu Village, Tana Toraja. Data about family support, the role of cadres and the activeness of the elderly were measured through filling out questionnaires. Data were analyzed descriptively and continued with the Chi-square test. The analysis result for the first objective was p value = 0.338, while for the second objective, p value = 0.249. It was concluded that there was no correlation between cadre support and the role of cadres and the activeness of the elderly in the integrated elderly service center.

Keywords: elderly; integrated service center; family support; the role of cadres; elderly activeness

INTRODUCTION

The elderly population is currently increasing, therefore the Indonesian government has formulated a health service policy for the elderly aimed at improving the health status and quality of life of families and communities in accordance with their existence. The government has launched services for the elderly at several levels, one of which is health services at the community level, namely integrated service posts (posyandu) for the elderly. Being healthy in old age is a choice for many people in the world, but not everyone can do it easily, depending on a person's lifestyle in managing their activities so that they can be active and healthy in old age.⁽¹⁾

Various elderly posyandu activities have provided many benefits for the elderly. The aim of using posyandu for the elderly is so that the health of the elderly can be maintained and monitored optimally. Elderly people who do not actively use health services at the elderly posyandu cannot monitor their health well, so if they experience the risk of disease due to decline in body condition and the aging process, it is feared that it could have fatal consequences and threaten their lives.⁽¹⁾

According to WHO (World Health Organization), the elderly population is growing very quickly, even faster than other age groups. The world population in 2019 was around 7.6 billion people and will increase to 9.9 billion in 2022. The percentage of the world population aged over 60 years was 15% in 2015, increasing to 22% in 2018. Globally, the elderly population will increase in 2020, surpassing the number of children under five years of age and by 2050, it is estimated that 8% of elderly people will be in developing countries.⁽²⁾

Based on the 2018 Indonesian population census, the number of elderly people reached 24.7 people (9.3% of the total population). Judging from the population projections for 2018-2022, it is predicted that there will be an increase in the number of elderly people. The three provinces that will experience the largest increase in 2035 are Central Java at 14.9%, East Java at 14.1% and the Special Region of Yogyakarta at 14.0%. Likewise, the number of people aged over 65 years in this province has reached more than 10%. So in 2022 these three provinces can be categorized as provinces with the oldest population (aging population).⁽³⁾ As the elderly population continues to increase, the government has formulated various health service policies for the elderly.⁽⁴⁾

Indonesia is one of the developing countries which has a number of elderly people in 2018 of 22.4 million people or 9.3%.⁽⁵⁾ The number of elderly people is estimated at 27.08 million people in 2020, 33.69 million people in 2025, 48.19 million people in 2035, and in 2050 Indonesia will experience a high increase in the number of elderly people compared to other countries in the region Asia.⁽³⁾

Meanwhile, South Sulawesi has a higher proportion of elderly people than the national figure, namely 10.20% or 0.92 million people in 2020. Increasing life expectancy has an impact on increasing the number of elderly



people. In South Sulawesi Province, the percentage of the elderly population continues to increase. The higher the number and percentage of the elderly population, the higher the impact on the various problems faced, both in social, economic and health aspects.

As the elderly population continues to increase, the government has formulated various health service policies for the elderly, which are aimed at improving the health status and quality of life of the elderly so that they can achieve a happy and efficient old age in family and community life, in accordance with their existence. As a concrete manifestation of social services for the elderly, the government has planned services for the elderly through several levels, one of which is health services in the community in the form of posyandu for the elderly.⁽⁴⁾

Elderly people who do not actively participate in elderly posyandu are at greater risk of suffering from chronic health problems. This is because elderly people cannot have their health status monitored continuously. Chronic diseases that are often experienced by the elderly are diabetes mellitus, coronary heart disease and lung disease. In 2000, an estimated 57 million people in the United States suffered from various chronic diseases and this increased to 81 million elderly people in 2020. This is because the elderly do not want to attend posyandu for the elderly on the grounds that they are busy and consider it unimportant.⁽⁶⁾ The implementation of posyandu activities often faces obstacles to the activeness of the elderly due to several factors such as perception, attitude, and activeness of cadres.⁽⁷⁾

Family support is important to foster interest in elderly people in participating in the elderly posyandu program.⁽⁸⁾ The family is the main driver for the elderly to take part in elderly posyandu activities. The presence of the family is important as a companion or to organize and remind the elderly to go to the posyandu if they forget the activity schedule.⁽⁹⁾ Family is a strong motivator for the elderly. Families can increase the elderly's activeness in going to the posyandu by reminding them of the posyandu schedule and taking the elderly to the posyandu.

In an effort to increase the activeness of the elderly in participating in posyandu, the role of cadres is very important. Cadre activity is the real action carried out by posyandu cadres, both activities before and during posyandu. The role of cadres in posyandu services for the elderly is to register the elderly, weigh the weight of the elderly, record the results of the examination into the Healthy Toward Card (KMS), assist with laboratory examinations, carry out counseling and write reports after the posyandu service is completed.⁽¹⁰⁾

Healthy posyandu activities for the elderly will make it easier for the elderly to obtain basic health services, so that the quality of life of people in old age remains well maintained and optimal. The various activities and programs at the elderly posyandu are very good and provide many benefits for the elderly in the area. The elderly should try to make the best use of the elderly posyandu, so that their health can be maintained and monitored optimally.⁽¹¹⁾

Based on the results of a preliminary study on elderly posyandu cadres in Pattan Ulusalu Subdistrict located at Pattan posyandu in 2021, the number of elderly people in the Pattan Ulusalu area is 84 elderly people. There are 19 elderly people who are not active in the elderly posyandu, and there are 65 elderly people who are active in the elderly posyandu.⁽¹²⁾

Based on the description of the problem above, research is needed which aims to analyze the relationship between family support and the role of cadres and the activeness of the elderly in attending posyandu for the elderly in Pattan Ulusalu Village, Saluputti District, Tanatoraja Regency.

METHODS

This research was an observational study with a cross-sectional design, where data on cause and effect variables were collected at the same time.⁽¹³⁾ This research was carried out at the elderly posyandu in Pattan Ulusalu Village, Saluputti District, Tana Toraja Regency from August to September 2022.

The research population was all elderly people who live in the working area of the Ulusalu Health Center, specifically in Pattan Ulusalu Village, with a population size of 84 elderly people. The sample size was determined using the Slovin formula, namely 46 elderly people. The sample was selected using purposive sampling technique.

The independent variables in this research were family support and the role of health cadres, while the dependent variable was the activeness of the elderly in participating in the elderly posyandu. Data for the three variables was measured by filling out a questionnaire. The collected data was analyzed descriptively in the form of frequencies and proportions,^(14,15) then continued with hypothesis testing using Chi-square analysis.⁽¹⁶⁾

Research was carried out by paying attention to research ethical principles such as using informed consent, anonymity, self-determination, avoiding plagiarism and so on.⁽¹⁷⁾



RESULTS

Table 1 shows that the proportion of not supportive family support was high (35.7%), the proportion of not active category of the role of health cadre was high (48.8%), while majority of elderly was active (92.9%).

Variable	Frequency	Percentage	
Family support			
Supportive	54	64.3	
Not supportive	30	35.7	
The role of health cadre			
Active	43	51.2	
Not active	41	48.8	
Elderly activeness			
Active	78	92.9	
Not active	6	7.1	

Table 1. Distribution of family support, the role of health worker and elderly activeness

The p value from the results of the correlation test between family support and the role of health workers and the activeness of the elderly in posyandu is 0.338 for family support (Table 2) and 0.249 for the role of health cadre (Table 3). So it can be interpreted that there is no correlation between family support and the role of health cadre and the elderly's activeness in posyandu.

Table 2. Correlation between knowledge with behavior

	Elderly activeness				p-value
Family support	Active		Not active		
	Frequency	Percentage	Frequency	Percentage	
Supportive	50	92.6	4	7.4	0.338
Not supportive	28	93.3	2	6.7	0.558

Table 3. Correlation between attitude with behavior

The role of health	Elderly activeness				p-value
The role of health cadre	Active		Not active		
Caule	Frequency	Percentage	Frequency	Percentage	
Active	39	90.7	4	9.3	0.249
Not active	39	95.1	2	4.9	0.249

DISCUSSION

The results of this study show that the majority of families are supportive of posyandu activities for the elderly, but the proportion of families who are not supportive is still high. In this case, there are five indicators of family support used as measures, namely emotional support, appreciation support, instrumental support, informative support and social network support. Family support can influence a person's comfort where a person feels cared for, cared for and appreciated if a person does positive things such as participating in posyandu activities. Family support can also be realized in the form of advice or just information that can help someone to be more active or more motivated to carry out an activity.⁽¹⁸⁾ Family support consists of verbal and nonverbal information or advice, real help or assistance through social familiarity or obtained through the presence of a supportive person. This is emotionally beneficial or has an effect on the recipient's behavior. Additionally, the recipient feels cared for, appreciated, or loved.

The results of the analysis show that the majority of elderly people are active in participating in elderly posyandu activities. Related to this activity, the family can be a strong motivator for the elderly to accompany or take them to the elderly posyandu, remind the elderly if they forget their schedule and try to help overcome problems with the elderly. Some elderly people who are not actively participating in elderly posyandu activities may experience obstacles due to illness, work or not knowing the importance of posyandu activities. A weak physical condition will make a person feel less free and ultimately hinder the activeness of the elderly.⁽¹⁹⁾ The



activity of the elderly is also related to the age of the elderly who take part in posyandu activities. For elderly people who are still of productive age, posyandu can actually be considered a positive activity while enjoying their age. Meanwhile, as people get older, the elderly are more susceptible to disease due to decreased body resistance, that is, they are susceptible to infections and external disturbances.

The results of the analysis show that there is no relationship between the role of cadres and the activeness of elderly people in attending posyandu. This can happen because elderly posyandu cadres are also required to provide optimal services so that their performance is good and service users can feel comfortable at the posyandu.⁽²⁰⁾ The role and duties of health cadres are to mobilize the community, assist health workers, manage monthly cadre meetings and influence the elderly to increase visits to posyandu because the service is pleasant, friendly and provides information and health education that is clear and easy for the elderly to understand, so that the elderly are aware of coming. to the posyandu (Rosyid, 2019). Several other similar studies include the findings of Ughniyatul⁽¹¹⁾, Alela⁽²¹⁾ and Miko.⁽²²⁾

The results of the analysis also show that family support is not related to elderly activity in posyandu. This happens because the activity of the elderly can be influenced by other factors such as physical condition, lack of knowledge and information.⁽¹⁹⁾ Similar previous research results include Tri⁽²³⁾, Wenny⁽²⁴⁾, Nilasari.⁽²⁵⁾

CONCLUSION

It was concluded that there was no correlation between cadre support and the role of cadres and the activeness of the elderly in the integrated elderly service center.

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