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Family Support And Elderly's Participation In Posyandu Manggis In Biting Village Arjasa Jember

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ABSTRACT: Introduction/Main Objectives: Posyandu for the elderly is one of the Ministry of Health's policies as a health service in the form of providing elderly-friendly health service facilities to improve the health status and quality of life of elderly. Many elderly ignore the activities. Family support plays an important role in ensuring the elderly receive optimal care and attention. This study aims to analyze correlational between family support and elderly participation to the posyandu. Research Methods: It is a correlational study conducted with cross sectional approach. There were 76 respondents taken by purposive sampling technicque from 318 elderly in Posyandu Manggis Arjasa. The data taken by using Family Support Scale questionnaire and observational sheet to assess the frequency of elderly's visit to the posyandu. The data analyzed by using Spearman Rank test. Finding/Results: the results show that 55% of respondents have low family support and 68% respondents are not actively coming to the posyandu and statistical analysis show p value of 0.0001 less than p value 0f 0,05 Conclusion: It can be stated that family support is significantly correlate with elderly's participation to the posyandu. So that the the family need to provide good support to the elderly to motivate them to come to the posyandu.

Keywords: Family Support, Posyandu, Elderly

INTRODUCTION

Posyandu for the elderly is one of the Ministry of Health's policies as a health service in the form of providing elderly – friendly health service facilities to improve the health status and quality of life of elderly(Fridnolin et al., 2021). This posyandu activity focuses on promotive and preventive health services. The elderly's visit to the posyandu is important to monitor and maintain their health status. However, there are still many elderly prople who ignore the activities of posyandu. Low participation from the elderly can have a negative impact on the health and quality of life of the elderly. This will have an impact on the emergence of undetectable disease. The disease that arise will cause problems if they are not treated immediately and prevention is not carried out because they will become chronic and multipathological disease (Aprilla et al., 2019).

Elderly's participation in posyandu in 2022 is about 80,1% with the average of male are 75,5% and female are 84,1%. These percentage is increasing for about 12,4% compared to 2021. However, this has not yet reached the target for elderly health services, which is 100%. Therefore, more efforts are still needed to achieve the target (Jatim, 2022). Based on the data from Jember Health Service, in 2022 there are 391,932 elderly in Jember. There were 205,954 (52.5%) elderly who participated in posyandu. And it still below the target and the lowest attainment of elderly's poyandu visit is in Arjasa sub-district.

Based on a preliminary study, it was found that the number of Posyandu participation in the Arjasa Community Health Center is only 1,088 while the target was 12,600 number of visits. The posyandu are spread over 15 locations throughout the village. One of them is in Biting village which has 2 posyandu namely Posyandu Manggis and Posyandu Mangga. And the percentage of elderly visit is about 10.37% in other words the number of participation obtained in September 2023 was 33 visits from the target 318 of elderly visit.

The low level of elderly participation to posyandu is influenced by many factors, one of which is family support (Juniardi, 2021). Elderly who have family support will gain self-confidence, motivation to face problems and increase their life satisfaction. Stated that family support is a concept that refers to efforts and positive interaction between family members to help, support and care for each other (Wiraini et al., 2021).

Family support has an important role in ensuring the elderly receive optimal care and attention. Families can help the elderly attend the posyandu by reminding them of visit's schedules and provide physical and emotional support during visits(Atalo et al., 2023a). Family support is important since the family will taking a part in monitoring the elderly's health status (Harahap, 2021). Based on the results of study conducted by (Yogi, 2023), it is stated family support plays a big role in motivating the elderly to attending the posyandu. The decline in vision, memory and hearing experienced by the elderly means that they need help from other to help and fulfill their needs in attending the posyandu.

According to the Thepry of Planned Behavior, elderly's participation in posyandu begin with the motivation that came out from themselves. This motivation affected by three main factors which is the attitude in responding to their presence in posyandu, the subjective norm possesses by the elderly about family support in attending the posyandu, and the controlling perception in thinking about the convenience and difficulties that will be experienced when carrying out the posyandu. These three factors will improve their motivation in attending posyandu. This study aimed to identify the correlation between family support and elderly's visit to posyandu.

METHOD

This is correlational study conducted by using cross sectional approach. It involves 76 respondents taken by purposive sampling from 318 elderly live in Biting Village. The data was taken using Family Support Scale Questionnaire which is consist of 20 questions about family support emotionally, instrumentally, informationally and award support. The validity test of the

questionnaire shows that the questionnaire is valid and statistical analysis using alpha Cronbach test shows R value was 0.94 means that the questionnaire is reliable. While the elderly's visit is gained through observational sheet to record their attendance during the last six months. The correlationship of the two variables were assessed using Spearman rank test where if the p value shows less than α 0.05 means that the hypothesis is accepted.

RESULT AND DISCUSSION

This study involved 76 respondents, which is the elderly in Posyandu Manggis. The description of the respondents is stated as follows.

Table. 1 Respondent's Characteristic of Elderly in Posyandu Manggis

Characteristic	Frequency	Percentage
Age		
60 – 75 years old	59	78
76 – 90 years old	17	22
Gender		
Male	41	54
Female	35	46
Education		
Elementary	59	78
Junior High School	1	1
Senior high school	16	21
Occupation		
Entrepreneur	26	34
Farmer	32	42
Pension	6	8
Housewife	12	16
Living arrangement		
Spouse	12	16
Three generation family	64	84
Income		
< Rp. 500.000	42	55
500.000 – 1.000.000	24	32
1.001.000 – 1.500.000	3	4
History of Disease		
Hypertension	27	35
Hyperuricemia	28	37
Diabetes mellitus	19	25
Others	2	3
Total	76	100

From table 1 it can be stated that from 76 respondents, 78% respondents is 60 – 75 years old, 54% are male, 78% respondents are graduated from elementary school, 42% respondents work as farmer, 84% are living with three generation family, 55% are having income under Rp. 500,000.00 and 37% of respondents are having hyperuricemia.

The support that accepted from the family is shown below.

Table 2. Family Support to The Elderly in Posyandu Manggis Biting Arjasa

Family Support	Frequency	Percentage
Low	42	55
Medium	15	20
High	19	25
Total	76	100

From the table 2 it can be stated that 55% of respondents are receiving low family support from their families. This result are in line with the study conducted by Daniel Ginting and Netti Etalia (2019) where the results of the study shows that majority of respondents received low support form their families since the family did not provide transportation, the family did not take the elderly to the posyandu, did not provide advice to the elderly to attending posyandu, did not share the information about the benefit of coming to posyandu and does not ask about the elderly's problem when participating in posyandu and the family does not encourage the elderly to take a part in elderly(Narsih et al., 2023; Suharto et al., 2021).

Low level family support is related to some factors. From table 1 it can be stated that 84% of respondents are living with three generation family. It means that the family has more members so that they need to work harder to fulfill their family needs. So that the elderly's health status or elderly's need is not a top priority. This is proven by filling in the questionnaire where respondents said they have conflict with family members, they are not taken to posyandu at scheduled time, and the family does not provide a transportation for elderly to attending posyandu(Maghfiroh & Wulandari, 2022). Health care team members never provide any accessible information about the benefit of family support for elderly to attending posyandu (Nurcahyani et al., 2023; Utomo et al., 2020).

Family support is a support given from the family member that affect behavior and attitude toward an action. Family support plays an important roles to motivate someone in doing an activity, including emotional and material support(Efliani et al., 2023). It also has a big role in decreasing or preventing mental health impact to the individual, this support will provide positive benefit emotionally and practically.

Family support is still less than optimal since the family is busy with work and does not realize the importance of family support for the elderly. When a family needs to work harder to fulfill the family needs other needs such as health status are not a priority. To provide appropriate support, families must have trust and recognize that elderly people need the support and providing time to implementing the support. Health workers should actively involve the family in elderly participation in Posyandu.

Table 3. Elderly Participation in Posyandu Manggis Biting Arjasa

Elderly's Participation	Frequency	Percentage
Not active	52	68
Quite active	9	12
Active	15	20
Total	75	100

From table 3 it can be stated that 68% elderly are not actively participating in posyandu. The inactivity oof elderly in attending posyandu because of they often forget the schedules of posyandu's activities. Most of the respondents are 60 – 75 years old (78%). Stated that when individuals get older, they will face the decreased organ function. As the brain cells get older, they will shrink and the ability to memorize will decrease(Husmiati, 2016).

Most of respondents also have a history of hyperuricemia. This can make elderly people are getting tired easily so that they will get difficult to walk to posyandu due to the swelling and pain experienced by the elderly. Another factor affecting the elderly's participation is the level of education. Most of the respondents (78%) graduated from elementary school. This will cause the elderly to have inadequate knowledge about the benefit of posyandu. (Hidayah et al., 2021)stated that inadequate knowledge will affect their accessibility to health facilities and so does health activities, including posyandu. Elderly with high education has better quality of life compared to elderly with lower education. Elderly with high education will have better awareness about their health status so that they have better motivation to participate in posyandu activities. To improve the knowledge the health workers are tryimg to give health education to the elderly about the benefit of posyandu (Sumartini et al., 2021).

Other factor related to elderly participation in posyandu is occupation. Most of respondents (42%) are still working as farmers. By working as farmers make the elderly should working from early to the noon so that they cannot participate in posyandu's activity. Elderly people generally do not have free time. The more activities there are, the more difficult it will be for them to participate in Posyandu.

Table 4 Correlation of Family Support and Elderly Praticipation to Posyandu

Family Support	Elderly Participation to Posyandu			Total
	Not Active	Quite Active	Active	
Low	37(49%)	4(5%)	42(55%)	42(55%)
Medium	9 (12%)	3(4%)	3(4%)	15(20%)
High	6(8%)	2(3%)	11(14%)	19(25%)
Total	52(68%)	9(12%)	15(20%)	76(100%)
P value 0,0001 Coef. Correlation 0,471				

Based on the data show in table 4 we can see that respondent with low family support is 42 respondents (55%) consist of 37 respondents who are not actively participating in posyandu, 4 respondents quite actively participating in posyandu and 1 respondent who are actively participating in posyandu. While respondents with high family support is 19 respondents (25%), consist of 11 respondents (14%) are actively participating to posyandu, 6 respondents (8%) are not actively participating in posyandu and 2 respondents (3%) are quite actively participating in posyandu. Statistical analysis shows p value 0.0001 less than α 0,05 means that the hypothesis accepted. There is a significant correlation between family support and elderly participation in posyandu. Coefficient correlation describing the power of relationship and the value of coefficient relationship show 0.471 means that the correlation is fair enough and positive. In other words we can tated that the higher family support the more active elderly to participate in posyandu activities.

Respondents who actively participated in posyandu is the one who took part at least once a month at posyandu asn an effort and enhance community health. Elderly people are said to actively participate in posyandu if they attend more than 5 times for 6 months. Most elderly people receive low levels of family support instrumentally, informationally, and emotionally(Atalo et al., 2023b; Puspitasari et al., 2022; Suzana & Ridho, 2020).

As people get older, they will face so many health problems due to the aging process. The closest people, in this case family, are really needed by the elderly to help them adapt to the aging process and the health problems that follow. Helping elderly to participate in posyandu can be done by reminding them about the schedule, providing proper transportation, or help them to seek information about the benefit. Supporting the elderly to participate in posyandu will make it easy for the senior to come and be more active in participate in all activities to maintain their quality of life(Binoriang & Pramesti, 2021; Rinawan et al., 2021).

CONCLUSION

From the result above it can be conclude that most of elderly in Posyandu Manggis are receiving lack of family support and they are not actively participating in posyandu activites(Faza et al., 2022; Purnama Dewi et al., 2024). And there is a significant correlation between family support and elderly participation in posyandu activities. From this results it is important for the health workers to involving the family to improve elderly participation in any of activities to maintain elderly's health status and quality of life(Kim et al., 2023).

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