The difference the age of the elderly before and after being distributed the brochure social support techniques and socialization in the activities of posyandu seniors in Papua province and South East

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Submission date: 28-Jun-2022 08:12PM (UTC+0700)

Submission ID: 1864153246

File name: The_difference_the_age_of_the_elderly_before_and_after.pdf (361.57K)

Word count: 3200 Character count: 17322



International Journal of Advanced Psychiatric Nursing

E-ISSN: 2664-1356 P-ISSN: 2664-1348 IJAPN 2019; 1(2): 24-28 Received: 22-05-2019 Accepted: 24-06-2019

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School of Nursing, Health Polytechnic of Jayapura, Indonesian The difference the age of the elderly before and after being distributed the brochure social support techniques and socialization in the activities of posyandu seniors in Papua province and South East Sulawesi

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Abstrac

Active elderly in the activities 11 he elderly Posyandu has not fulfilled expectations in accordance with the mandate of Indonesian law number 13 year 1998 about the welfare of the elderly, because there are still less active elderly in the activities of elderly posyandu as a container Monitoring of elderly health conditions, for that need social movement of elde 2 health services, especially from the potential social support of the community by seading the brochure of social support techniques and socialization. This method of research is quantitative analytic with cross sectional approach, in population amounting to 74 elderly, Stratified Proportionate random sampling and the determination of respondents randomly systematic sampling and acquired 55 Respondents in one group for two measurements with an independent variable (X) numbering one variable and using the scale of the category about timeliness come to the elderly posyandu activities, while the dependent variable (Y) amounted to one Variables use a categorical scale on high, moderate, and low number groups (ordinal). This type of statistical test uses Wilcoxon for the purpose of knowing the average rate between two measurements (before a 4 after) in the same group as the normal undistributed data. Description Wilcoxon is the value of Wilcoxon 3 gned Ranks Test in Asymp Sig. (2-tailed) and the show sta 2 tical test results are: r count = 0.000 (a < 0.05)., meaning there is a significant difference in the active elderly before and after the technical brochure share Social support and socialization to the elderly.

Keywords: The diversity of the elderly, brochures come in elderly Posyandu

Introduction

Increasingly in life expectancy (AHH), in Indonesia since 2014 as much as 18.781 million people and estimated in 2025 will be 36 million people, the condition will cause health problems because the elderly in general Deterioration of bodily function if not in the maintenance efforts well, because it has been proved still many less active elderly in the activities of elderly posyandu.

The condition is in line with the data of the Yendidori in Papua province at the time of the initial data retrieval date of 31 August 2017 recorded number of elderly around 183 elderly people, but active 11 yranging from 74-120 elderly (65.57%). The condition is not in accordance with the health care efforts for the elderly conducted by the central government, the provincial government, the local gifernment in this case is, the health officer and or society stipulated in the 2.AW No. 36 Year 2009 About the health of Article 138 read as follows: Subsection (1) health care efforts for the elderly must be, aimed at keeping healthy and productive in social and economic accordance with the dignity of humanity., subsection (2) Governments are obliged to ensure the availability of healthcare facilities and facilitate 5 lerly groups to remain socially and economically productive.

Based on the backgro 2d, researchers are interested to do research with the title of the inactivation of senior elderly before and after in the brochure share their social sup 7rt techniques and socialization in following the activities of elderly P2yandu in Papua. The purpose of this research is to know the extent of the active level of elderly before and after the brochure social support engineering brochures and socialization in the activities of elderly Posyandu in Papua and South West Sulawesi province.

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Meth of Research

This type of research is quantitative analytic with cross sectional approach, and carried out in the elderly posyandu of the village of Yendidori in the District Health Center in Biak Numfor Regency as a representative of Papua Province and southeast Sulawesi, with time and mechanism of implementation of the research is on the activities of the elderly Posyandu in April 2018, determining the sample in the population amounted to 74 with Proportionate stratified random sampling and randomly fixing respondents systematic Sampling, obtained 55 respondents with an independent variable (X) totaled a variable (an elderly perception of the activities of elderly Posyandu conducted every month before it was completed a brochure social support and socialization) by using The scale of the categories on activation in the form of timeliness come following the activities of elderly posyandu.

While the dependent variable (Y) is a variable (the level of the elderly to follow the activities of elderly Posyandu after the social support brochure is distributed) uses a categorical scale of timeliness coming to the elderly Posyandu in the group of numbers High, moderate, and low (ordinal), then the next step is to record elderly families of elderly peers

and elderly Posyandu cadres close to sample or support respondents. Assess the presence of elderly as respondents of research samples and distribute brochures of social support techniques to the elderly, elderly families, elderly peers, as well clederly Posyandu cadres while socializing the benefits of the brochure social support techniques, Then on the implementation of the elderly Posyandu in July and August 2018, collecting data on the elderly by using data collection instruments is a checklist or format the list of elderly present and watches/HP/Wall clocks. This type of statistical test uses Wilcoxon test for the purpose of knowing the average rate between two measurements (before and after) in the same group with undistributed data.

Result of the Study

Writing results using the Times New Roman 11, regularly, created paragraphs with indentation 1 cm. The results section outlines the results of data analysis that includes data presentation and data underperformance. Authors may use sub-headings for each research variable, sub-headings in Bold and at the beginning OF the word capitalized, Bullet or Number Use Is Not Allowed.

Tabel 1: Frequency distribution and the percentage of elderly people active.

No	Eldowly optima		Casanina	Before intervention		After Intervention		Sum	
No	Elderly active	Hours	Scooring	F	%	F	%	F	%
1	Very active	08.30-09.30	80	24	21,81%	28	25,48%	52	47,26%
2	Active	09.31-10.00	70	15	13,64%	26	23,64%	41	37,26%
3	Average	10.01-10.30	60	2	1,81%	1	0,90%	3	2,71%
4	Low	10.31-11.00	50	14	12,72%	0	0%	14	12,72%
Total			55	49,89%	55	50,02%	110	100%	

Source: Primary data

Based on the results of data processing on table 1 characteristics of the intervention group shows that the attendance rate is less as much as 14 respondents (12.72%), after the Division of Social Support technical brochure and socialization of the brochure benefits, the level Presence less does not exist or be 0 (0%)., then the respondent who had the attendance level was very active previously 24 respondents (21.81%) After the share of brochures and

socialization of brochure benefits, the elderly attendance increased 28 respondents (25.48% This Data shows the increase in the age of the elderly, which means there is a positive influence the existence of social support techniques brochures in the elderly, elderly families, elderly peers, and elderly Posyandu cadres in an effort to improve elderly activity the activities of elderly posyandu.

Tabel 2: Descriptive Distribution statistics of Elderly People active

Initial Name	Before Intervention	After Intervention	Add
IV.01	70	70	
IV.02	80	80	
IV.03	80	80	
IV.04	60	70	
IV.05	80	80	
IV.06	70	70	
IV.07	70	70	
IV.08	50	70	
IV.09	50	70	
IV.10	50	70	
IV.11	80	80	P = 0,000).
IV.12	80	80	
IV.13	80	80	
IV.14	80	80	
IV.15	80	80	
IV.16	70	70	
IV.17	70	70	
IV.18	60	60	
IV.19	70	70	
IV.20	80	80	

IV.21	80	80				
IV.22	80	80	1			
IV.23	80	80	1			
IV.24	80	80	1			
IV.25	50	70	1			
IV.26	50	70	1			
IV.27	70	70	1			
IV.28	50	70	1			
IV.29	50	70	1			
IV.30	80	80	1			
IV.31	70	70	1			
IV.32	50	70				
IV.33	50	70	1			
IV.34	80	80	1			
IV.35	80	80	1			
IV.36	80	80	1			
IV.37	80	80	1			
IV.38	80	80	1			
IV.39	80	80				
IV.40	80	80	1			
IV.41	80	80				
IV.42	70	70				
IV.43	70	70				
IV.44	70	70				
IV.45	50	70]			
IV.46	70	70]			
IV.47	50	80]			
IV.48	50	80				
IV.49	50	80]			
IV.50	70	80]			
IV.51	50	70				
IV.52	80	80]			
IV.53	70	70				
IV.54	80	80]			
IV.55	70	70]			
TOTAL	3.790	4.120]			
Mean	68,91	74,91]			
SD	12,274	5,400]			
Minimum	50	60]			
Maximum	80	80				
Cest Statistics Wilcoxon Signed Ranks Test : Pre dan Post						

Test Statistics Wilcoxon Signed Ranks Test: Pre dan Post

Based on the distribution of the above descriptive statistics, shows an average of the previous active 68.91 and the average increase after the intervention of 74.91, the previous standard deviation of 12.274 and down after the intervention of 5.400, the previous drinking value is 50, after the intervention rises 60, the previous maximum value is 80 and after the 80 intervention. A4 a result, non-parametric tie test results were obtained by Wilcoxon Signed Ranks 3 est at Asymp. Sig. (2-tailed) is $p = 0.000 \, (a < 0.05)$. Then it can be concluded that there is a significant difference in the active elderly before and after the intervention of the Division of Social support techniques brochures and socialization of brochure benefits.

Discussion

Based on the results of the percentage of senior level of the elderly following the activities of elderly Posyandu in the intervention group showed that the level of activity with the category is very active before as much as 24 elderly respondents (21.81%) And after the distribution of social support brochures and socialization of the brochure benefits rose to 28 respondents (25.48%), active (13.64% to 26 respondents (23.64%), previously moderate 2 respondents and after 1 respondent's intervening intervention, The

attendance of the category was less declining from 14 respondents (12.72%), down to 0 (0%). The Total percentage of the previous elderly was 49.89%, and after the intervention increased to 50.02%. The results of the descriptive statistics show an average previous active rate of 68.91 and after an increased intervention of 74.91, the previous deviation standard amounted to 12.274 and dropped after the intervention of 5.400, the previously drinking value of 50, after 60 up intervention, the previous maximum value of 80 and after intervention.

Non parametric paired test results are obtained $\ 3\$ Wilcoxon Signed Ranks Test at Asymp. Sig. (2-tailed) is $\rho=0.000$ (P Value < 0.05). Then it can be concluded that there is a significant difference in the active elderly before and after the intervention of the Division of Social support techniques brochures and socialization of brochure benefits. The results of this research has not been exactly the same, especially about the title as well as the tools and how to implement the research, except the research object, so that conformity with previous researchers only if reviewed from the inactivity factor of the elderly come to Elderly Posyandu is influenced by lack of knowledge, the negative attitude of the elderly and the negative attitude of health officers with significant results (P = 0,045) namely the research results.

Megawati with the title "Factors affecting the inactivity of elderly come to the elderly Posyandu Melati village Megarsari Kota Mojokerto" in the journal Respiratory. Poltekkes mojopahit. ac. i., data Download 2-11-2018., then this research with I looxon test Results (Z count) =-3,656 as well as Asymp. Sig. (2-tailed) $\rho=0.000$), can be said to strengthen the previous research in the field of knowledge that establishes attitudes with the counseling of healthy living behavior, while the novelty of this research is the formation of attitudes through the nature and benefits of brochure techniques Social support and that motivates the elderly from social support sources i.e. elderly families, elderly peers, elderly Posyandu cadres to support each other's fellow human beings in realizing a primed health especially elderly health.

The degree of inactivation of the elderly, because of encouragement or support from within the elderly and the support from outside the family support, social support elderly peers, social support POSYANDU cadres elderly health personnel support in line With the theory of exchange, the assumption of The impetus or propel proposition (The Stimulus Proposition) is very possible to create a repetition of behavior that reads: If in any event past a particular impulse or set of urges has Cause the actions of people to be reward. It the more similar the boost is now with encouragement in the past, the more likely people do similar actions (Homans, 1974:23, source, George Ritzar, Douglas J. Goodman, 2002.364).

This means that if the urge or support is correlated with the activity of elderly posyandu, the elderly motivation will increase in following the activities of the elderly Posyandu, furthermore if the support, the more encouraging, the fun, the more Increased also 11e activation of the elderly come to the elderly posyandu. In line with the core of exchange theory reads: It is that Manuisa is a 1 reature that seeks benefit (benefit) and avoids cost (cost); Man, in the perspective of the exchange theorists, is a reward-seeking animal, (Turner, 1978:201-215, Source, Sunarto, 2004:220). This means that the condition according to researchers, is the activation of the elderly, the elderly come to posyandu is heavily influenced by the approach of Humanist fellow human beings by using tools that can be assisted by elderly in prolonged periods, and conditions is suitable with the use of brochure social support techniques.

Summary

Conclusion there is a significant difference in the citive the elderly to follow the obesity of elderly Posyandu before and after distributed social support brochures and socialization of the benefits, with value (Z count, $\rho = 0.000$) smaller than (Z table $\rho > 0.05$).

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