

# Healthy and Fit Package for Elderly Empowerment of Posbindu Kader in Order to Increase Kader's Productivity and Elderly Health in Palasari, Ciater, Subang Regency

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Abstract. Background: Elderly problems that occur in Palasari Village are the number of elderly people who are at risk of disease. Elderly who participated in Posbindu were 9.2%, Elderly who did not undergo clean and health living (PHBS) were 50.6%. In the previous integrated community service activity, the Bandung Ministry of Health Polytechnic Lecturer has conducted new kader training in 7 RW, posbindu activity assistance has been carried out in June-December 2017 as well as the establishment of new Posbindu kader. Continuous efforts are needed to improve the results to be achieved, through empowering Posbindu kader Based on the preliminary study, even though training was held, the Palasari kader said that they still wanted to improve their knowledge and skills about general health and elderly dental health and the productivity of kader such as kader's product creativity, greening / vegetation planting for family medicine plant (TOGA) around Posbindu area, and mentoring activities

buildings or completeness of health education. **Method**: IbW-based community service activities have been held in Palasari Village since 2016. This year is the 3rd year, where activities will be focused on increasing Pre-Elderly and Elderly independence in projections at the last the service of the servi

Posbindu in order to continue to be carried out continuously and the existence of elderly gymnastic variations. In addition, there are no posbindu infrastructure facilities, either completeness for Posbindu

independence in maintaining their health. By empowering elderly people to stay healthy and independent, by providing counseling and a guide book for healthy and independent lifestyle in maintaining their health

Result and Conclusion: The results of previous studies indicate that the elderly population in the

Result and Conclusion: The results of previous studies indicate that the elderly population in the Palasari Village Area is quite high with various health problems that they have. For this reason, it is very necessary for the application of science and technology, especially in the health sector, to help improve health and improve pre-elderly and elderly people in maintaining their health, in Palasari Village. Improvement of preelderly and elderly health status is done through community service comprehensive from the start of the health examination, blood pressure measurement, blood sugar test screening, measurement of height and weight of the counseling body, and the learning process that will be delivered to the preelderly and elderly groups adjusted to the results of the overall health examination and physical assessment by the proposing team consisting of various kinds of health professions including the Department of Nursing, Dental Nursing Midwifery Pharmacy, Health, Nutrition, and Environmental Health Analyst

## Introduction

There has been an increase in the number of the elderly population accompanied by an increase in Life Expectancy (UHH) in the world. Based on the United Nations report, in 2000 to 2005, the percentage of the world's elderly population was 7.74% with a UHH of 66.4 years. This number is predicted to increase in 2045-2050 to 28.68% and the UHH to 77.6 years (Ministry of Health, 2013). In 2020, for the first time in history, the number of

elderly is predicted to exceed the number of children under five (WHO, 2014). That phenomenon also occurred in Indonesia. In 2000, the percentage of the elderly population in Indonesia was 7.18% with a UHH of 64.5 years. In 2010, this figure increased to 7.56% with a UHH of 69.43 years. In 2011 this figure increased again to 7.58% with a UHH of 69.65 years (Ministry of Health, 2013). In 2002, the number of elderly population in Indonesia was 17.1 million and was ranked 7th in the world. This number is predicted to

increase in 2025 to 35 million and become the 5th largest in the world (WHO, 2002). The increase in the percentage of the elderly population and the increase in UHH, will be accompanied by an increase in the prevalence of health problems in the elderly population. In 2014 alone, 23% of all morbidity and mortality rates in the world occurred in the elderly population (WHO, 2014).

The purpose of human life is to grow old, but stay healthy (healthy aging) (Pranarka, Furthermore, healthy aging must be followed by active aging (Pranarka, 2006). Active aging is a process that optimizes opportunities for health, participation and well-being in the aim of improving the quality of life as a person ages (Pranarka, 2006). The word active indicates a sustainable role in the social, economic, cultural, spiritual and governance fields (Pranarka, 2006). Maintaining the continuity of autonomy and independence when someone gets old is the main goal of everyone (Pranarka, 2006). To achieve these objectives various health efforts are needed, namely: health promotion. prevention, primary secondary prevention and tertiary prevention (Anderson & McFarlane, 2007). The National Health Promotion Policy has established three basic strategies for promotion, namely empowerment, community development, and advocacy (Efendi & Makhfudli, 2009). According to the Indonesian Ministry of Health (2007), community empowerment (in the health sector) is an effort to grow the ability of the community so that they have the power or strength to live independently (in the health sector). One of the services to the elderly at the community level, which is run by the Ministry of Health of the Republic of Indonesia is the Integrated Development Post (Posbindu). Posbindu is a service center for the elderly in the community, whose formation and implementation process is carried out by the community together with nongovernmental organizations (NGOs), governmental and non-governmental sectors, the private sector, social organizations and others, by emphasizing health services in promotive and preventive efforts (Komnas Lansia, 2010).

In an effort to improve social welfare, economic, health and the ability of the elderly it is necessary to hold a program in the form of services and institutional development that addresses these problems. These efforts need to be carried out continuously in order to achieve optimal quality of life in the elderly. The service program approach is focused integrated programs through on empowerment and the active participation of the community by prioritizing promotion (maintenance) efforts. One of the efforts to empower the community is through the integrated (Posbindu) elderly.

Integrated Development Post (Posbindu) for the elderly is one of the UKBM forums aimed at the elderly in a certain area that has been agreed upon

by involving the participation of the elderly, families, community leaders and social organizations in its implementation.

According to the Ministry of Health of the Republic of Indonesia (2006), the purpose of establishing a UKBM forum for the elderly is to increase the reach of the health services of the elderly in the community, so that health services are formed in accordance with the needs of the elderly, bringing services closer and increasing the role of the community and the private sector in health services while increasing communication between the community elderly.

The target of Posbindu Elderly consists of. Direct targets and indirect targets are the elderly group (45-59 years), the elderly group (60 years and above), the elderly group with high risk (70 years and over). Indirect targets are families where elderly are located, social organizations engaged in coaching elderly, the wider community.

The services provided in the elderly Posbindu depend on the mechanism and policy of health services in a regency or municipal area. Something is sipping.

### Methods

IbW-based community service activities have been held in Palasari Village in 2016 and 2017. This year is the 3rd year, where activities will be focused on increasing Pre-Elderly and Elderly independence in maintaining their health. By empowering elderly people to stay healthy and independent, by providing counseling and a guide book for healthy and independent lifestyle in maintaining their health.

Program Material are:

- 1. Elderly's health and illness
- 2. Food / drink / Medicine made from pineapple and TOGA for elderly health and manufacturing
- Making the creativity of Posbindu infrastructure, health
- 4. Making TOGA
- 5. Salsa gymnastics
- 6. Kegel exercises

The program is designed in the form of community empowerment in the Palasari Village area so that it has independence in solving its own problems in the case of elderly problems.

Procedur of this activity are:

- 1. Preparation
  - a. Compilation of proposals
  - b. Compilation of material includes: booklet.
  - c. Preparation of tools and materials
- 2. Implementation
  - a. Field survey of 2 activities.
  - b. Coordination with the head of the Puskesmas, community leaders and health cadres

- Socialization of the IbW 2 program activity.
- d. Implementation of socialization.
- e. Implementation of assistance to partners 1 and partner 2

#### 3. Evaluation

 a. Monitoring and evaluation of partners 1 and 2 are conducted on each partner 1 time (number: 2 activities)

# 4. Report

- a. Report on results between semesters 1 and 2
- b. Report on results
- c. Publication

# **Results and Discussion**

Ther result of this activity are mplementation of empowerment of posbindu cadres, Increased knowledge and skills of posbindu cadres about elderly health, disease, Increased knowledge and skills of Posbindu cadres about healthy foods and drinks made from pineapple and soy, a simple medicine for the elderly, Establishment of TOGA in Posbindu, The availability of infrastructure for elderly Posbindu activities is assisted by the creativity of Posbindu cadres. knowledge and skills of posbindu lader cadres and the elderly community about Kegel exercises and salsa, The implementation of postbindu elderly activities every month, health education is carried out on the elderly, giving the productivity of cadres.

Availability of leaflets on elderly health.

More result are an increase in the coverage of the post -indu visit, a reduction in the morbidity rate for the elderly, an increase in the quality of life of the elderly in the village of Palasari through community empowerment in the post-elderly container,

Community service activities have been socialized in 2 RW namely RW 6 and 7 with permission from the Head of the Palasari Village and the Palasari Village Midwife. The palasari village welcomed the activity. Elderly health socialization is socialization conducted for cadres of posbindu rw 6 and 7. The socialization material is about the importance of maintaining health in the elderly. Posbindu cadres are expected to have good knowledge about elderly health.

The socialization of Kegel exercises is carried out with the provision of explanatory material about the Kegel exercises concept, after that the cadre of Posbindu is taught the practice of Kegel exercises. At the end of the Posbindu cadre activities can do Kegel exercises well. It is hoped that the next activity will be cadres who can provide explanations and teach the elderly in Posbindu for Kegel exercises.

#### Conclusion

The results of previous studies indicate that the elderly population in the Palasari Village Area is quite high with various health problems that they have. For this reason, it is very necessary for the application of science and technology, especially in the health sector, to help improve health and pre-elderly elderly improve and people in maintaining their health, in Palasari Village. Improvement of preelderly and elderly health status is done through community service comprehensive from the start of the health examination, blood pressure measurement, blood sugar test screening, measurement of height and weight of the counseling body, and the learning process that will be delivered to the preelderly and elderly groups adjusted to the results of the overall health examination and physical assessment by the proposing team consisting of various kinds of health professions including the Department of Nursing, Dental Nursing Midwifery Pharmacy, Health, Nutrition, and Environmental Health Analyst

# **Competing Interest**

The authors of this paper have no competing interest to report.

# **Acknowledgement**

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#### References

Iryanti & Susy, H. (2014). Pengaruh Senam Kegel Terhadap Dispareunia pada Perempuan Menopause di Kelurahan Pamoyanan Wilayah Kerja Puskesmas Pasirkaliki Bandung. Jurnal Riset Kesehatan. 2014;7(1): 39-45.

Kemenkes R.I, (2014), Pedoman pengembangan Pengabdian Masyarakat Politeknik Kesehatan kemenkes, Bdan PPSDM Kes, Jakarta

Law G.B. (2001). Dyspareunia: eliciting the source of the pain. Canada.

Larasati, T. (2012). Jurnal Kualitas Hidup Pada Wanita Yang Sudah Memasuki Masa Menopause. Updated 9 May 2012. <a href="http://hdl.handle.net/123456789/1940">http://hdl.handle.net/123456789/1940</a>. Diunduh tanggal 11 Agustus 2012.

- Lowdermilk,D.L., Perry, S.E., Bobak, I.M. (2004). *Maternity & Women's Health Care.* 8<sup>th</sup> edition. St. Louis: Mosby.
- McNagny SE. (1999). Prescribing Hormone Replacement Therapy for Menopausal Symptoms. Annals of Internal Medicine 1999 Oct; 131(8): 605-615.
- Puspasari D. (2011). Efektifitas Latihan Kegel Dalam Mengatasi Keluhan Dispareunia dan Kesulitan Orgasme Pada Perempuan Pasca Terapi Kanker Serviks. FK UI: Tesis.