

HUBUNGAN ANTARA PENGETAHUAN DAN DUKUNGAN KELUARGA  
DENGAN KEAKTIFAN LANSIA MENGIKUTIKEGIATAN POSYANDU  
LANSIADI DESA REKSOSARI KECAMATAN SURUH KABUPATEN  
SEMARANG

Naskah Publikasi

Diajukan sebagai salah satu syarat  
untuk meraih gelar Sarjana Keperawatan



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NIM : J 210.102.007

FAKULTAS ILMU KESEHATAN  
UNIVERSITAS MUHAMMADIYAH SURAKARTA

2014



**UNIVERSITAS MUHAMMADIYAH SURAKARTA**  
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KELUARGA DENGAN KEAKTIFAN LANSIA MENGIKUTIKEGIATAN  
POSYANDU LANSIADI DESA REKSOSARI KECAMATAN SURUH  
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**RELATION BETWEEN KNOWLEDGE AND FAMILY SUPPORT WITH  
FOLLOWING ACTIVITIES ELDERLY HEALTH CARE IN THE VILLAGE  
REKSOSARI SURUH SEMARANG CITY**

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**ABSTRACT**

*Health care system at the community level is elderly health care. Health care has a function in the elderly increases the role of the community for elderly health care sector in the region. Elderly health care is the development of government policy through health care for the elderly health centers which operate through programs involving community participation in the elderly, families, community leaders, and organizations in its implementation. The purpose of this study was to determine the relationship between knowledge and support families with elderly liveliness follow health care elderly setya budi Reksosari Tell cultivation in the village. This study uses descriptive correlative with cross sectional approach. The population in this study were all recorded in the elderly neighborhood health center in the village of Tell Reksosari totaling 110 elderly people. Samples taken are recorded in the entire elderly neighborhood health center in the village of Reksosari Tell elderly. The instrument used for data collection in this study was a questionnaire. The data were analyzed with the test spearman rho between the liveliness of the elderly knowledge obtained values 0.227 and  $p = 0.020$ . Therefore concluded that the knowledge about elderly neighborhood health seniors including both categories. Spearman rho test results between the activity of the elderly family support following the elderly health care values obtained 0.250 and  $p = 0.010$ . Therefore concluded that the activity of family support for the elderly, including both categories. Conclusion is relationship between knowledge and support families with elderly liveliness follow health care elderly setya Reksosari Tell in the village.*

*Keywords: Knowledge, Family Support, Motivation For Elderly*

**INTRODUCTION**

The number of elderly in Indonesia, according to the Central Bureau of Statistics (BPS) in 2005-2010 is equal to the number of infants that is 8.5% of the total population

of 19.9 million people. The number of elderly in 2020 will be 28.8 million people, or 11.34% of the entire population. Treading in 2025 later a fifth of Indonesia's population is elderly. Many people are aware that the number of elderly in

Indonesia has increased and will bring a great impact in the management of problems, especially in health, like physical health problems and mental health. Based on a survey conducted by researchers at the date of 25 November 2013, which took place in the village of Reksosari, 7 of 10 elderly say that lazy left for posyandu if no friend is approached, nobody reminds schedule a visit to the neighborhood health center. There also were told not to leave for posyandu if no escort. For those posyandu it is not so important because only weigh and blood pressure checks, they do not understand about the existing activities in posyandu. Therefore, researchers interested in conducting research on the relationship between knowledge of family support to the elderly and the activity of the elderly in the village posyandu Reksosari (Herath, 2009).

## **THEORY**

### **1. Knowledge**

Knowledge is the things that happens when a person has committed a specific sensing of objects. In common sensing through the 5 senses is the sense of sight, hearing, smell, taste and touch. Knowledge can be obtained through individual experience or others (Notoatmodjo, 2007).

Knowledge levels according Notoatmodjo (2007), as follows: Tahu (*know*)

- a. Know  
Know can be interpreted as a recall previously learned material. Included in this level of knowledge is the call (recall) something specific of all the materials studied or stimuli that have been received.
- b. Comprehension  
Understanding is defined as an ability to explain properly about the object known, and can correctly

interpret the material. People who have understood the object must be able to explain, cite examples, infer, predict, and so the object being studied.

- c. Application  
This application is defined as the ability to use a material that has been acquired, learned and understood the actual situation and conditions.
- d. Analysis  
Analysis is the ability to describe a material or an object into the components but still within the organizational structure of something and still there kaitanya each other.
- e. Synthesis  
Synthesis refers to the ability to place or connect the parts in a whole new form. In other words, the synthesis is the ability to compose new formulations and formulations that have been there.
- f. Evaluation  
Evaluation of a person's ability to carry out an assessment of a particular object. This assessment is based on the prevailing values in society.

### **2. Family Support**

The family is a bond or fellowship on the basis of marital life between adults of the opposite sex that they are living together or a man or woman who sudah alone with or without children, either their own or adoption and living in a household (Tamher, 2009).

Translated in terms of support large dictionary of science (2006) as being in support or support assistance. Support can mean help or support received from the person or another person (Dagun, 2006)

#### **Forms of Family Support**

- a. Informational Support  
Family functioning as a collector and disseminator of information about the world. The information can be used to solve a problem. The benefits of this are informational support to spur the emergence of a stressor, because the information provided contains a suggestion to the concerned. Usually in the form of advice, suggestions, proposals, instructions and information
- b. Assessment Support  
The family will act as guidance, guiding, and mediating problems. as well as the source of identity validator among which family members provide support, appreciation and attention.
- c. Instrumental Support  
The family is the source of practical help and concrete or tangible, such as health, schools regularity, attention to the need to eat and drink, avoiding fatigue and br
- d. Emotional Support  
Family as a safe and peaceful place to rest and recovery as well as helping the mastery of emotion. This support usually contains about empathy, love, honesty, health care. The benefits of this support is able to keep a secret between men and women from other people's curiosity. Aspects of emotional support include forms of affection, lack of trust, attention, listen, and be heard.

### 3. Activity

Activity is doing things constantly with enterprising, industrious, always tried, to work or study, and only one is active, which could be accomplished, which can mean for others who need it, so that only they can achieve satisfaction and happiness (Demartoto, 2006).

According to Lawrance theory (1980) Characteristics of Motivation There are three characteristics, namely:

- a. Predisposing characteristic  
These characteristics are used to describe the fact that each individual has a tendency to use health services vary.
- b. Enabling characteristic  
This characteristic reflects that despite having predisposition to use health services, he will not act to use it unless he is able to use it.
- c. Reinforcement characteristic  
This characteristic contains about laws, regulations, supervision and so on. (Notoatmodjo, 2003)

## RESEARCH METHODOLOGY

This study uses descriptive correlative with cross sectional approach, populsi contained in elderly posyandu setya cultivation amounted to 110 seniors. Methods of data collection using questionnaires.

## RESULT AND DISCUSSION

### 1. Knowledge

Knowledge of respondents to the neighborhood health center based on the collection and processing of data presented in the table as follows :

Tabel 1. Knowledge of the frequency distribution of respondents.

Knowledge	Number (n)	Presentase (%)
Good	73	69.5
Moderate	31	29.5
Less	1	1.0
Total	105	100

Results of univariate analysis showed that the level of knowledge of the elderly in the village of Tell Reksosari including both categories. This means that the respondents' awareness of elderly neighborhood health has been good. Knowledge itself can be influenced from a variety of ways. This is consistent with the theory of Ayla (2012) Can education through meaningful way to provide a knowledge resulting in increasing positive behavioral changes. Can also through information means a person who has a lot more resources it will provide a clear knowledge. Then the experience, which means something that is experienced by a person will add to the knowledge that is non-formal.

## 2. Family Support

Results of univariate analysis showed that family support for the elderly in following the growth monitoring sessions in the medium category as shown in the table.

Tabel 2. Frequency distribution of respondents' family support.

<b>Family support</b>	<b>Number (n)</b>	<b>Presentase (%)</b>
Good	54	51.4
Moderate	50	47.6
Less	1	1.0
Total	105	100

This means that the elderly in the village Reksosari enough to get the support of the family in following posyandu elderly. We know that family support can be made from a variety of ways. Either through the informational support is to stimulate the emergence of a stressor, because the information

provided can affect the person who got the information. Usually in the form of advice, suggestions, proposals, instructions and information. Can also through the support of family assessment that will guide and give you a way out if there is a problem in the elderly. Families also as a person who always give attention and support. Then the instrumental support itself means a very paraktis relief and real, such as health, the need to eat, drink, and also his health. Then the last emotional support, which means as a place that is very safe and peaceful to dampen an emotion. This support usually contains about empathy, love, honesty, health care. The benefits of this support is able to keep a secret between men and women from other people's curiosity. Aspects of emotional support beliefs, attention, listening, and heard (Safarino, 2006).

## 3. Activity

Liveliness of the elderly in the village follow posyandu Reksosari Tell the District based on the results of data collection and processing, as presented in the following table :

Tabel 3. Frequency distribution follows the liveliness elderly posyandu.

<b>Activity</b>	<b>Number (n)</b>	<b>Presentase (%)</b>
Active	33	31.4
Less active	73	68.6
Total	105	100

From the univariate results indicate that the activity of the elderly in following posyandu Reksosari majority of elderly in the village including the inactive category. Elderly are lacking in liveliness follow posyandu elderly

affected by the lack of information about the activity of the neighborhood health center as implementation and execution place. Liveliness of the elderly in the elderly posyandu actually increased social welfare for the elderly. Through activities in IHC, the elderly can play an active role in the activities that can maintain functionality, liveliness, knowledge, skills, and experience. Posyandu elderly also have a goal to extend the life expectancy and productive life, and achieve self-sufficiency and kesejahteraan, maintaining culture and kinship systems and get closer to God (Hairi, 2012). Liveliness of the elderly in the elderly is very good growth monitoring sessions. Because of the presence of such activity can be controlled with the health of the elderly clearly. Elderly also gain knowledge related to health. Terutama about healthy lifestyles elderly.

#### 4. Relation Between Knowledge and Family Support

Tabel 4. The relationship between knowledge of family support.

Variable	r arithmetic	Probabilitas (p)
Knowledge with activity	0.227	0.020
Family support with activity	0.250	0.010

From the results of the bivariate analysis that uses the knowledge of the activity of the formula obtained Spearman Rank  $r$  count = 0.227 and  $p = 0.020$ . Because  $p < 0.05$ , so the null hypothesis failed to be rejected as such it can be concluded that the knowledge of the activity of the elderly there is a significant relationship.

The results showed that knowledge about the elderly posyandu either category. Elderly active elderly usually have a good knowledge of the elderly neighborhood health center. The knowledge gained is an attempt to find out who passed from sensing. Sensing can be passed by means of the senses but most of the knowledge acquired through sight and hearing. Knowledge is something that is very important weeks to the formation of a person's actions (Notoatmodjo, 2003). In fact the behavior is not based on the knowledge will be more lasting than the behavior without the knowledge based.

Then the family support the liveliness of the results of the bivariate analysis with Spearman Rank formula obtained value count  $r = 0.250$  with  $p = 0.010$ . Because  $p < 0.05$  so the null hypothesis is rejected failure can thus be concluded that the activity of the elderly family support with follow posyandu significant relationship exists.

The results of this study indicate that family support is very important for the elderly. The family itself means a collection of human persons who are bound to each other emotionally, as well as the same residence in the adjacent area. Due to the presence of the family, the elderly will get the support and it will affect the activity of the elderly in the elderly follows the neighborhood health center (Dagun, 2006).

As for other forms of family support in this regard are:

##### a. Informational Support

Family functioning as a collector and disseminator of information about the world. The information can be used to solve a problem. The benefits of this are informational support to spur the emergence of a stressor,

because the information provided contains a suggestion to the concerned. Usually in the form of advice, suggestions, proposals, instructions and information

- b. **Assessment Support**  
The family will act as guidance, guiding, and mediating problems. as well as the source of identity validator among which family members provide support, appreciation and attention.
- c. **Instrumental Support**  
The family is the source of practical help and concrete or tangible, such as health, schools regularity, attention to the need to eat and drink, avoiding fatigue and br
- d. **Emotional Support**  
Family as a safe and peaceful place to rest and recovery as well as helping the mastery of emotion. This support usually contains about empathy, love, honesty, health care. The benefits of this support is able to keep a secret between men and women from other people's curiosity. Aspects of emotional support include forms of affection, lack of trust, attention, listen, and be heard (Safarino, 2006).

## CONCLUSION

Based on the analysis of research data, it can be concluded as many as 72 (68.6%) were less active elderly and 33 (31.4%) active elderly. With knowledge about the elderly posyandu good and sufficient family support but the majority of the activity of the elderly are less active. Inactivity posyandu the elderly in the elderly due to the lazy, no time to leave for taking care of her grandchildren and the distance from

home to a place that is quite far posyandu.

## SUGGESTION

Based on the results described in the underlying analysis it can be concluded as :

1. Should be enhanced and maintained the knowledge about elderly neighborhood health seniors. Due to lack of knowledge can lead to inactivity in the elderly following the posyandu elderly.
2. Those governments are expected to provide support in an effort to socialize elderly neighborhood health benefits by providing the necessary infrastructure and facilities such as meeting rooms, counseling materials, and the provision of health education.
3. Those local health department, the results of this study can provide input in the planning and development of health services in the elderly in health care quality improvement in the delivery of health education especially in the elderly.

For the next study, the results of this study could be a reference to conduct similar research because basically there are other factors related to the activity of the elderly in the neighborhood health center activities, such as motivation, education level, or economic conditions of the family.

## REFERENCE

- Ayla Kececi, Serap Bulduk. 2012. Health Education For Elderly. Journal Of Geriatric.ID 978-953-51-0080-5.
- Dagun, M, Save. 2006. *Kamus Besar Ilmu Pengetahuan*. Jakarta :GoloRiwi



Demartoto, Argyo. 2006. *Pelayanan Sosial non Panti bagi Lansia Suatu Kajian Sosiologis*. Surakarta : Sebelas maret University Press.

Hairi, Noran N, Tee GuatHiong, AwangBulgiba, IzzunaMutla. 2012. Physical Function In Older People. *Journal Of Geriatric*. ID 978-953-51-0080-5

Herawati, VD. 2012. *Hubungan Tingkat Activity Of Daily Living (ADL) Dengan Kejadian Insomnia Pada Lansia DidesaPucangan Kecamatan Kartasura Kabupaten Sukoharjo*. Surakarta. UMS.

Notoatmodjo, S. 2003. *Pendidikan dan Perilaku Kesehatan*. Jakarta :Rineka Cipta.

Notoatmodjo, S. 2007. *Promosi Kesehatan, Teori dan Aplikasi*. Jakarta :Rineka Cipta.

Safarino, E.P. 2006. *Health psychology. Biopsychosocial interaction*. New York : John Willey & Sons, Inc.

Tamher, S dan Norkasiani. 2009. *Kesehatan Usia Lanjut dengan Pendekatan Asuhan Keperawatan*. Jakarta. SalembaMedika.

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