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THE ROLE OF EDUCATIONAL PROGRAM FOR THE HEALTH OF THE ELDERLY

Doni Darmasetiadi*

Universitas Respati Yogyakarta *corresponding author: darma.mahasin@gmail.com

Abstract

Based on Law No. 13 of 1998 concerning Elderly Welfare, it has been confirmed that the need to fulfill their rights, including health services. This health care effort targets on an individual and community scale. Health services for the wider community are carried out through existing health institutions in each region. One of the public health services is an education program for the elderly. This program is a form of external communication from related health institutions that is useful for realizing awareness to better understand the importance of maintaining health in old age. In addition, this education program must also fulfill various basic requirements. In this context, the education program is one form of health services to the community, including the elderly.

Keyword: Elderly, health services, community scale, health institution, educational program, external communication.

1. INTRODUCTION

This effort is also a follow-up to Law Number 13 of 1998 (Undang-Undang No. 13 Tahun 1998) concerning Elderly Welfare. In article 5, eight rights of the elderly have been mentioned which must be fulfilled with their welfare, including health services. Along with the increasing number of elderly population in Indonesia, the government needs to formulate various policies and programs aimed at improving the health and quality of life of the elderly to enjoy happy and efficient days in family life. According to this law in article 52 paragraph 1 (pasal 52 ayat 1). This proves the need for communication about transaction information relating to health. The way to communicate in community and community-based health services will not be the same. This has reminded the importance of communication in health services, including the elderly.

Communication conducted by the elderly with health workers (nurse doctors, pharmacists, and midwives) at the personal level is assumed to have been carried out by all patients from all walks of life. That means everyone must have had the experience to ask with a health worker. But this is different from health services at the community level. Public health services organized by groups and communities that support and improve health supported by promotion and prevention. Community service efforts are carried out in certain public health centers, such as health centers (Puskesmas), hospitals and so on. Health services to the community must also be carried out for all patients from all walks of life. This becomes important to do for the community which can be done in various ways, such as conducting events that provide education and training to the community. It happened because community service also considers the problem of the community aware of the importance of things in daily health care, including in the elderly. Health services for the elderly that are collected are one way of service to increase awareness of various diseases that might attack them. This service practiced through institutions means that there is a personal service in it. However, each health institution can also provide programs that contain meetings with the elderly to discuss certain health topics that have something to do with them. This program can be educational and motivate the elderly. This is because they can stay in touch with each other so that there is an effort to encourage one another. Implementation of programs that can take advantage of elderly associations in every health institution. This condition indicates that every educational program can take advantage of every opportunity where it is possible to meet many elderly people so that it is expected to have an extraordinary impact later. The link between efforts to implement various educational programs for the elderly through public health services seems to need a separate discussion from the communication science perspective. Meetings carried out to the elderly collectively to the elderly have many things to consider starting from the communicator to the achievements that he wants to achieve. Therefore, through this paper, I want to deepen the importance of educational events that can help increase the awareness of the elderly to be more concerned about their health.

2. RESULT AND DISCUSSION

Educational Program as Organizational External Communication

As explained above, the programs that educate the elderly as the target are one of the health service efforts that include the community where there must be health institutions that shelter them. Thus, organizational communication here has been practiced. Health services for the elderly can be provided through an educational program. Service in the form of a program will involve a wide range of participants. In this case, the program can be understood as a statement containing conclusions from several expectations or goals that are interdependent and interrelated, to achieve a common goal [1]. A program includes all activities that are under the same administrative unit or targets that are interdependent and complementary, all of which must be carried out simultaneously or sequentially. A program usually has a series of activities arranged based on the objectives to be achieved. This achievement occurs with the process of delivering information that can run in one direction or two directions. All messages delivered are also carried out in accordance with the existing set of activities. This is adjusted to the topic of activities and participants. This is the focus of the program so that all messages can be received for all participants. In this discussion the implementation of the program on education in the health sector was an important part of the health service activities to the community. The education program in the health sector is a series of delivering all specific knowledge and can be implemented for educational program participants. A series of information within the knowledge delivered includes instructions or explanations about health related. Health information also includes education related to potential health and how health potential can be achieved or related to how to avoid certain disease problems [2].

The implementation of educational programs in the field of health has goals that are in accordance with Law No. 23 of 1992 (Undang-Undang No. 23 Tahun 1992) and World Health Organization (WHO), namely increasing the ability of the community to maintain and improve their health, physical, mental and social status so that they are economically and socially productive in health education in all health programs both eradicating infectious diseases, environmental sanitation, community health care nutrition and other health programs. The purpose above explains that the implementation of education in the health sector through the program will be able to improve one's health status by increasing the ability of program participants and the public to create quality health. In addition, the implementation of an education program in the health sector can also be seen as a health counseling which not only disseminates information but also seeks health education to increase knowledge, awareness, willingness and ability of the community to live healthy and actively participate in health efforts. This is according to the mandate of Law No. 36 of 2009 [3].

The education program is also understood as an effort for health institutions to organizational communication. Organizational communication that occurs is a manifestation of health services to the community that are preached through an educational program with specific topics and specific targets (which in this case are the elderly). Organizational communication here can be understood according to Hans and friends' opinions (2014) as sending and receiving messages among interrelated individuals within a particular environment or setting to achieve individual and common goals [4]. This definition discusses the matter of exchanging messages that contain information conveyed in operational organizations. Every information that has been transacted is successful in order to achieve the organization's agreed objectives. This definition refers to the goals of organizational communication, including: (a). An organizational action, Communication in the operational organization aims to coordinate all tasks from the organizational parts into the organization's vision and mission. Each part has its own functions so that they are interrelated with synchronization and harmonization. Organizations without communication are just a collection of people with

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their respective activities without displaying cooperation aspect. (2). Sharing information, The second purpose of communication is to share information with all organizational officials to achieve organizational goals. Every communication process exchanges information during the organization's operations All information directs the task, how to carry out the tasks, and making a decision. (3). Expressing various emotions of feeling, Engaging with many people in an organization will affect the feelings of each individuals. This makes the organization an infrastructure to express various emotions that it has as a form of passion to realize organizational goals. In this study the definition and purpose of the above organizational communication can be implemented through educational programs from each health institution.

In this context organizational communication that occurs is external communication. Suranto AW (2005) describes organizational external communication as a dimension of communication by establishing relations with the public outside the organization. This communication runs in two directions between the organization and from the public [5]. External communication from the organization explains the interaction between the organization and the environment around the organization. This happens because the organization definitely needs help, participation, and cooperation with parties outside the organization to achieve organizational goals. External communication is carried out to build positive relationships with the parties who assist the operations of organizations from outside the environment, such as work partners, the government, the press, and so on. Relationships outside of the organization are also understood as external publics or parties that have direct and indirect interests. These parties are spread into large and small groups that can get to know each other and vice versa. In this context, health institutions also communicate externally with their external public. All external public here are parties related to health services owned by the institution. These parties started from those who helped provide the needs in the health service to those who were targeted by the health service, namely the patients.

The concept of external communication carried out by health institutions through educational programs related to planning. Program planning here relates to the description of several activities, who is responsible for doing so and supporting factors in the form of funds and time, the more clearly the work is achieved because there are instructions and implementation tools that make it easier to implement and become a barometer of achievement in a certain time [6]. This plan can be a success factor of a program. Health institutions as communicators who plan the concept of educational programs with the Communication, Information and Education (IEC) approach. The IEC Approach is an effort to understand the design of concepts in programs in the health sector where attention is given to the target group. Each target group cannot receive the same message. Each target group will consider the extent to which efforts to change knowledge to change attitudes, mentality, and skills are carried out during the program. Slamet in BPOM (2012) to change knowledge can only provide information, but to change attitudes, mentality, and skills in a continuous, planned, and systematic communication process. The approach to this goal is considered important because it emphasizes the character of the program participants. The extent to which health messages delivered can be received by the participants. Therefore the character of the participants can also determine the form of health messages that will be delivered or transacted during the activity, such as the age groups of children, adolescents, adults and the elderly [7].

Independence for the Health of the Elderly

Someone being elderly is something that is natural. According to Guntur (2006) said that the aging process is a process of slowly disappearing the ability of the network to repair itself or replace and maintain its normal function, so it cannot survive the infection and repair the damage suffered [8]. The aging process is something that must be experienced by all living things, including humans. Elderly is considered as a unit that also requires independence in maintaining life, health and well-being [9]. Kemadirian and the elderly are in fact inseparable. Physical change does not make these old people live far from independence. On the contrary, they do not want to depend on others, including their families. Independence is freedom to act, not dependent on others, not affected by others and free to self-regulate or one's activities both individuals and groups from various health or illnesses [10]. This condition makes the elderly able to be independent of existing health decision-making. Support from the closest people is also important, but as long as the elderly can make the desired decision, they can determine what health they want to enjoy in old age. Ediawati (2012) explains that factors that affect the level of independence of the elderly in carrying out daily activities such as age, immobility and easy fall. This shows that the independence of the elderly is more physical and not psychological. Although every elderly person also starts to have different ways of thinking than when he was young, they still have basic qualities that can lead them to be independent in every decision making related to their physical condition [10].

Education Program and the Ederly Health

The education program can help the elderly realize their independence in making every decision on their physical condition. Every information obtained from an individual program can determine the lifestyle lived by the elderly. This also happens if the elderly participate in health information transactions when the education program takes place. In addition, motivation from fellow elderly people who are at risk can increase the willingness of each individual to play an active role in realizing independence. However, several things need to be considered from the education program for the elderly, including: how health institutions can be responsible for planning and implementing an educational program, how to access costs, location and time that is thought to be appropriate for the elderly. Health messages that are in accordance with the needs of the elderly so that they can be implemented properly by the elderly. In addition, individual consultations are outside of the implementation of individual programs with experts, such as doctors and nutritionists who will improve the decision making taken by the elderly. This consultation does not only occur when sick but how to prevent an illness or realize a healthy lifestyle. The elderly really need a two-way communication process to help them realize that independence by taking choices that are there to create prosperity in old age.

3. CONCLUSION

The role of the education program turns out to be able to realize the independence of the elderly to make choices about their health. Each choice is very much related to receiving information from the elderly from the program and their participation. The factors that determine the effort to realize the independence of the elderly are based on physical factors (Ediawati, 2012). In addition, health institutions also determine the realization of an educational program targeting the elderly. Every health institution needs to understand that the education program is one form of the type of health service to the community. This later can also be a form of external communication among health institutions to communicate with one of the public, namely the elderly.

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