

Demographic Profiles , Medical History, and Recreation Activity of Elderly Patients in Central Java

Profil Demografi, Riwayat Kesehatan, dan Rekreasi Aktifitas Pasien Lansia di Jawa Tengah

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Abstract

The research aims to describe the demographic profile, medical history, and recreation activity of elderly patients. This research is a descriptive study conducted in elderly patients whose outpatient and inpatient in hospital in Central Java. Samples recruited by purposive sampling during September to November. Number of study subjects obtained during data collection amounted to 128 elderly. Research instrument uses Elderly Demographic Questionnaire. Data were analysed with descriptive statistic. Most of the elderly are male (64%), aged between 60-65 (27%), the type of the funding is using universal coverage (63%), mostly the past education is primary school (41%). Based on the medical history of elderly, 53% have the disease disorder, a diagnosis that often arises is respiratory disorders (19%) and cardiovascular (17%). For operating experience in the past 12 months, most are due to cancer (15%). The TV becomes the main source of information (79%), and TV becomes recreational activity and rest (56%), and 62% of elderly participated in religious activities. The need for activities that support the income of elderly or increase it. The need for social activities that also give benefit recreation and exchange of information.

Keywords: demographic, profile, health, activity, elderly

Abstrak

Tujuan penelitian adalah menggambarkan profil demografi, riwayat kesehatan, dan rekreasi aktifitas pasien lansia. Penelitian ini adalah Studi deskriptif dilaksanakan pada pasien lansia yang rawat jalan dan rawat inap di RS. Sample pada penelitian ini adalah pasien lansia yang berobat di klinik dan bangsal RS. Dr. Adhyatma, RSUD Kota, RSUD Dr. Moewardi, dan RS. Margono Soekarjo. Sampel direkrut dengan cara purposive sampling selama bulan September sampai dengan November. Jumlah subyek penelitian yang didapat selama pengumpulan data berjumlah 128 lansia. Instrument penelitian menggunakan Kuesioner Demografi Lansia. Data dianalisa menggunakan statistik deskripsi. Kebanyakan responden adalah laki-laki (64%), umur antara 60-65 (27%), kebanyakan lansia menggunakan asuransi (63%), mayoritas berpendidikan Sekolah Dasar (41%). Berdasarkan pemeriksaan kesehatan, 53% mempunyai permasalahan kesehatan, kebanyakan mempunyai masalah dengan respiratory disorders (19%) dan cardiovascular (17%). Pengalaman operasi selama 12

bulan, didapatkan karena kanker (15). Televisi merupakan sumber informasi (79%), dan TV merupakan rekreasi (56%), dan 62% mengikuti kegiatan keagamaan. Perlu adanya kegiatan lansia yang menunjang penghasilan ataupun menambah penghasilannya. Perlu adanya kegiatan sosial yang juga memberikan manfaat rekreasi dan pertukaran informasi.

Kata kunci: demografi, profil, kesehatan, aktivitas, lansia

1. Background

The elderly population is increasing rapidly. The number of elderly is growing faster than in other age groups. Between the years 2000 and 2050, the proportion of the elderly population aged over 60 years the world experiencing 2 times as much from 11% to 22%. The absolute number of elderly is predicted to rise from 605 million until 2 billion in the same time (WHO, 2012). The number of elderly who needs special care like need a help for taking care of themselves in developing countries become 4-fold by the year 2050.

In Indonesia, the population structure has been formed substantially into elderly population since 1950. Life expectancy has increased from 37.5 to 68.6 years in the same time. National Socio-Economic Survey Indonesia in 2004 shows the proportion of the elderly population variation across the provinces in Indonesia ranged from 2% in Papua to 12.8% in the elderly population in Central Java Yogyakarta. The Proportion of the elderly population in Central Java is 9.5%. The survey results also showed that one-third of the elderly population living in villages and towns suffering from non-communicable diseases. The consequence, the number of elderly population increased from 6.2% in 1950 to 8.4% in 2005 (Abikusno, 2013). Furthermore, the number of elderly reached 18.96 million and increase until 20.55 million in 2009 (CBS, 2010). In 2012, Indonesia is the 3rd of the largest country of the elderly population in the Asian countries with a total of 25 million after India amounted to 100

million and China amounted to 200 million. The elderly population in Indonesia is projected to increase to 23.7% by 2050 (United Nations Department of Economic and Social Affairs PD 2007).

The elderly decreased physical health, mental, social, and functional ability. Decreased ability of elderly to indulge their own, because of physical decline, movement, sight, and hearing. Elderly patients also decreased cognitive ability, dementia, and depression. Social activities are limited to elderly after retirement, when they do not join the social community, a little family lived in the house, a bit of social activities, and do not join in religious activities. A decrease in the ability of elderly patients muscles affect the appearance of the elderly in daily activities. The elderly commonly slowed in daily activities with the help of family or family caregivers, such as walking, eating, clothing, bathing, going to the toilet, and sleeping. Therefore, some elderly patients requiring long-term care in the hospital. In general, public hospitals have not allocate space proportionally to elderly patients suffering from non-communicable diseases such as: heart disease, stroke, diabetes, cancer, and hypertension (N Ng, 2006). This study will describe the the demographic profile, medical history, and recreation activity of elderly patients who seek treatment in clinics and hospital wards.

2. Method

This research is a descriptive study conducted in elderly patients

whose outpatient and inpatient in hospital at the Adhyatma Hospital, Kota Hospital, Moewardi Hospital, and Margono Soekarjo Hospital in Central Java. The population of this study are elderly patients who seek treatment at the clinic or inpatients at the wards in Adhyatma Hospital, Kota Hospital, Moewardi Hospital, Margono Soekarjo Hospital with inclusion criteria more than 60 years of age, conscious and able to communicate. Samples are recruited by purposive sampling during September to November. Number of study subjects are obtained during data collection amounted to 128 elderly from the clinic and in wards. Data collection have done by interview and observation to patients by using Demographic Data of Elderly Questionnaire. Data analyze used descriptive statistic.

3. Results and Discussion

Table 1. Characteristics of the elderly based on gender, age, nationality, religion, marital status, type of financing, contact person, how to contact, recent education and literacy.

| Characteristics / Demographics | Frequency | Percentage |
|--------------------------------|-----------|------------|
| Gender | | |
| Male | 82 | 64.1 |
| Female | 46 | 35.9 |
| Age | | |
| 60-65 | 54 | 42.2 |
| 66-70 | 35 | 27.3 |
| 71-75 | 23 | 18 |
| 76-80 | 9 | 7.0 |
| 81-85 | 2 | 1.6 |
| 86-90 | 5 | 3.9 |
| Nationality | | |
| Indonesia | 128 | 100 |
| Religion | | |
| Islam | 126 | 98.4 |
| Katolik | 1 | 0.8 |
| Kristen | 1 | 0.8 |
| Marital Status | | |
| Single | 1 | 0.8 |
| Widow | 45 | 35.2 |
| Marriage | 82 | 64.1 |
| Payment Types | | |

| | | |
|----------------------------------|-----|------|
| The Cost of Universal Coverage | 81 | 63.3 |
| National Health Insurance | 29 | 22.7 |
| Health Fund of Civil Servant | 13 | 10.2 |
| Health Fund Donors | 1 | 0.8 |
| No Grants | 4 | 3.1 |
| Contact Person | | |
| Son/daughter-in law | 110 | 85.9 |
| Sister/Brother | 18 | 14.1 |
| How to contact | | |
| Own | 63 | 49.2 |
| Ask for assistance | 65 | 50.8 |
| Last Education | | |
| No school | 25 | 19.5 |
| Elementary School | 53 | 41.4 |
| Junior High School | 21 | 16.4 |
| Senior High School | 16 | 12.5 |
| College | 10 | 7.8 |
| Others | 3 | 2.3 |
| Read dan Write | | |
| Able to read | 2 | 1.6 |
| Able to write | 2 | 1.6 |
| Able to read and write | 99 | 77.3 |
| Not being able to read and write | 25 | 19.5 |

Based on Table 1, it can be seen that most of male respondents as much as 82 (64.1) and female respondents as much as 46 (35.9%). According to Rustam, the data is not in accordance with the opinion of Bustan (2007) which says that the characteristics of the gender are more female than male. This difference may be due to the limited data that can be collected by researchers. Therefore, in future studies it is advisable to increase the number of respondents in order to prove the statement Bustan (2007) is. If according to the results of Anna (2007) the number of elderly who are sick more men than women. This is consistent with the results of research in the hospital that more number of male

respondents who get sick than woman.

According to WHO, the elderly limits are divided into middle age between 45-59 years of age, Elderly aged are between 60-74 years, the age group 75-90 years old and the very old are aged above 90 years. The age of elderly respondents in this study is the age of 60-65 years the number of respondents 54 (42.2%), aged 66-70 years by 35 (27.30%), aged 71-75 years by 35 (27.3%) of respondents. From these data it can be seen that the average elderly in Central Java were hospitalized within the range of age Elderly.

Most elderly are still married with the number of elderly who were married as many as 82 (64.1%), elderly who have become widows / widowers were 45 (35.1%) and only one (.0.8%) of elderly who are still single and had never married. Elderly mostly cared for by his wife and aided by a child or in-law. Most wives of elderly men are not working or just being a housewife alone. According to the study Fitri (2008) in Simanulang (2011) mentions that complaints of chronic pain and acute pain is experienced by many elderly who are married than unmarried elderly status. This is consistent with research data which the average number of elderly who are hospitalized either inpatient or outpatient more elderly who still have a couple rather than the elderly who do not have a partner.

The cost of universal coverage 81 (63.3%) Social Health Insurance 29 (22.7%) Health Fund of Civil Servant 13 (10.2%) Donor Health Fund 1 (0.8%) No funds 4 (3.1%). Based on the table can be seen that respondents who do research are all Indonesian national numbering 128 people. The highest percentage of respondents who embraced Islam with the amount of 98.4% (126 persons), while Catholics just as much as 0.8 % (1) and Christian

also just as much as 0.8 % (1).

In terms of education is the highest known percentage of elderly with elementary school education past numbering 53 people (41.4 %). Elderly with last education junior totaled 21 people (16.4%), high school amounted to 16 (12.5), college 10 people (7.8%) as well as the elderly who are not enrolled as many as 25 people (19.5%). The study found that elderly who are able to read and write occupy the highest percentage of the number of 99 people (77.3%), but the percentage of elderly people who are unable to read and write is still quite a lot with a percentage of 25 people (19.5%), elderly which is only able to read as much as 2 (1.6%) and the elderly are only able to write a number 2 (1.6%) .

Based on Table 1 shows that most of the elderly are able to read and write the number of respondents were 99 (77.3), not being able to read and write as much as 25 (19.5%) of respondents, only able to read and only be able to write each only two (1.6%) of respondents. The inability to read and write is because the low level of education of the respondents, mostly primary school graduates.

Table 2 Characteristics of the Elderly by the current job , other jobs , jobs before age 60 and the amount of monthly income.

| Characteristic | Frequency | Percentage |
|----------------------------|-----------|------------|
| Now Working | | |
| Does not work | 81 | 63.3 |
| House wife | 9 | 7.0 |
| Farmer | 15 | 11.7 |
| Entrepreneurs / private | 7 | 5.5 |
| Civil Servant | 3 | 2.3 |
| Others | 13 | 10.2 |
| Other Job Types | | |
| Retired | 16 | 12.5 |
| Trader | 6 | 4.7 |
| Farmer | 22 | 17.2 |
| Private | 11 | 8.6 |
| Does not work | 52 | 40.6 |
| Others | 21 | 16.4 |
| Job before Age : 60 | | |
| Does not work | 33 | 25.8 |

| | | |
|---------------------------------------|----|------|
| House wife | 14 | 10.9 |
| Farmer | 25 | 19.5 |
| Entrepreneurs / private | 20 | 15.6 |
| Civil Servant | 14 | 10.9 |
| Others | 22 | 17.2 |
| The amount of income per month | | |
| No Income | 61 | 47.7 |
| <1 million rupiah | 18 | 14.1 |
| 1-< 3 million | 46 | 35.9 |
| 3-< 5 million | 3 | 2.3 |

Based on data regarding the current job (Table 2) shows that most of the elderly no longer work with a number of respondents 81 (63.3%), 15 (11.7%) of respondents still work as farmers, 13 (10.2%) of respondents have any kind of job outside the category, as many as 9 (7%) are housewives, 7 (5.5%) of respondents have private jobs and only 3 (2.3%) work as civil servants. As for the work before the age of 60 years, a total of 33 (25.8%) of respondents said that before the age of 60 years he has not worked, as many as 25 (19.5%) of respondents worked as a farmer, a total of 22 (17.2%) of respondents work outside the category, as 20 (15.6%) elderly people working in the private sector, respectively of 14 (10.9%) of respondents who worked as housewives and civil servants before the age of 60 years. From these studies prove that increasing the age, will affect the increasing number of respondents who are not working.

The income received in every month by elderly are different, as many as 61 (47.7%) of respondents did not earn income per month, as many as 46 (14.1%) of respondents earning less than 1 million, a total of 18 (35.9%) earn 1 -3 million rupiah each month and only three (2.3%) of respondents are still earning between 3-5 million per month. According to Dian (2008), the elderly and families in danger of experiencing a gap because of the incompatibility of income and expenditure. It can also occur in the

elderly in Central Java, where in sight of the research data, more elderly people who do not have jobs and are not earning a while, the needs of the elderly is also very much and requires no small amount of economic support.

Table 3. Characteristics of the Elderly based on medical history

| Health History | Frequency | Percentage |
|--|-----------|------------|
| Kind of Disease | | |
| Surgery | 11 | 8.6 |
| Internal | 68 | 53.1 |
| Orthopedic | 6 | 4.7 |
| Treatment (chemotherapy) | 3 | 2.3 |
| Eye | 8 | 6.2 |
| Rehabilitation | 1 | 0.8 |
| Others | 31 | 24.2 |
| Diagnosis | | |
| Cardiovascular | 22 | 17.2 |
| Respiratory | 24 | 18.8 |
| Nerve | 9 | 7.0 |
| Digestive | 18 | 14.1 |
| Musculoskeletal | 6 | 4.7 |
| Degenerative | 14 | 10.9 |
| Cancer | 4 | 3.1 |
| Others | 31 | 24.2 |
| Operation in the last 12 months | | |
| No Operation | 64 | 50.0 |
| Cardiovascular | 12 | 9.4 |
| Urinal | 7 | 5.5 |
| Respiratory | 16 | 12.5 |
| musculoskeletal | 7 | 5.5 |
| Cancer | 19 | 14.8 |
| Others | 3 | 2.3 |

Based on research data (Table 3) shows that the types of illness the elderly most is the kind of disease in the 68 (53.1%) respondents, 31 (24.2%) of respondents suffer from diseases outside the category, a total of 11 (8.6 %) of respondents suffer diseases surgery, 8 (6.2%) of the respondents suffered from eye disease, as many as 6 (4.7%) of respondents suffer from orthopedic, 3 (2.3%) of the respondents come to the hospital for treatment or chemotherapy, and only 1 (0.8%) respondents come for rehabilitation.

Diagnoses the most common respondents, 31 (24.2%) is diagnosed outside the category, a total of 24 (18.8%) of respondents diagnosed with respiratory system disorders, 22 (17.2%) of respondents diagnosed with

disorders of the cardiovascular system, as many as 18 (14.1%) respondents diagnosed with a degenerative disease, 9 (7%) of respondents diagnosed persyarafan system disorders, 6 (4.7%) of respondents diagnosed with disorders of the musculoskeletal system and only four (3.1%) of respondents diagnosed with cancer .

In the last 12 months is 64 (50%) of respondents does not perform the operation, a total of 19 (14.8%) of respondents had cancer surgery, 16 (12.5%) of respondents surgery on the respiratory system, as many as 12 (9.4%) had surgery cardiovascular system, respectively each 7 (5.5%) respondents had surgery on urinary and musculoskeletal systems, and only 3 (2.3%) respondents who had operations in other systems.

Table 4 Characteristics of the Elderly based recreation and activities and types

| Recreation and Activities | Frequency | Percentage |
|---|-----------|------------|
| Resources Obtained | | |
| TV | 101 | 78.9 |
| Newspaper | 5 | 3.9 |
| Radio | 3 | 2.3 |
| Others | 19 | 14.8 |
| Recreation and Rest | | |
| Travelling | 10 | 7.8 |
| Listening music | 8 | 6.2 |
| Watching TV/cinema | 71 | 55.5 |
| Religious Activities | 9 | 7.0 |
| Others | 30 | 23.4 |
| Social Activity Types/joined religious | | |
| No Religious Activity | 55 | 43.0 |
| Recitation | 66 | 61.6 |
| Others | 7 | 5.5 |

Based on Table 4 shows that most respondents received information from TV a number of 101 (78.9%), as many as 19 (14.8%) of respondents get the information from other sources, as many as 5 (3.9%) of respondents get information from newspapers and only 3 (2.3%) of respondents who received information from the radio.

Based on Table 4 shows that for the elderly spends recreational time or

rest by watching TV/cinema 71 (55.5%), 30 (23.4%) of respondents spent resting with other activities, as many as 10 (7.8%) of the respondents to fill breaks with traveling 9 (7%) of respondents use it for religious activity and as many as 8 (6.2%) of respondents spent their time listening to music.

Types of social activities which followed the elderly based on the data of this research is 66 (61.6%) of respondents filled with lectures/meetings, as many as 55 (43%) of respondents do not take part in social and religious activities on the environment and 7 (5.5%) of respondents chose to follow social or other religious activities.

4. Conclusion and Suggestion

Conclusion

Most of the elderly are male (64%), aged between 60-65 (27%), still have a husband/wife (64%), the type of the funding is using universal coverage (63%), education past primary school (41%) and 100% could read and write. most older now does not work (63%), and most do not earn (48%) .

Based on the medical history of elderly, 53% have the disease disorder, a diagnosis that often arises is respiratory disorders (19%) and cardiovascular (17%). For operating experience in the past 12 months, most are due to cancer (15%) and not have the operating experience (50%) .

Leisure activities and the activities and types of activities of religious/social that followed the elderly is the TV becomes the main source of information (79%), and TV becomes recreational activity and rest (56%), and 62% of elderly participated in the study/service to religious activities.

Suggestion

The need for activities that

support the income of elderly or increase the income. The need for social activities that also get benefit recreation and exchange of information.

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