

Development of Gerontic Nursing Learning Models to Improve Students 'Skills In-Home Care Services

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ABSTRACT---- *This research is motivated by the proportion of the elderly aged 60 years and over who is the fastest-growing population globally. Besides, increasing life expectancy and decreasing birth rates have simultaneously resulted in a drastic increase in the elderly population in Indonesia to 8.6 per cent of the total population in 2015. This number is expected to increase to 14.1 per cent in 2030 and will become almost tripled in 2050. It is the beginning of the birth of a research idea to improve skills in students, with the title of developing a gerontic nursing learning model to improve student skills in-home care services. The purpose of this research is to describe the field needs of gerontic nursing model development to improve student skills in-home care services at STIKes Panrita Husada Bulukumba. This research is a quantitative study using a descriptive research method approach to the need's analysis model. The research sample was 67 nursing students in semester VI. The sampling technique in this study was simple random sampling technique with a research instrument using a questionnaire. The results showed that the category needed 43.9%, less needed 43.3%, not needed 6.0% and unnecessary 1.5%. The conclusion of this study shows that the gerontic nursing learning model to improve student skills in-home care services is needed and is beneficial for the independence of students in taking nursing actions in the elderly.*

Keywords---- Gerontic Nursing, Skills, Home Car

1. INTRODUCTION

[1] suggests that the number of older adults on average or the proportion aged 60 years and over is the fastest-growing population globally. The elderly population was 8.6 per cent of the total population in 2015. It is expected to increase to 14.1 per cent by 2030 and will triple by 2050. This particular condition places Indonesia as the eighth population the largest elderly in the world and is ranked third among 25 Asia-Pacific countries.

[2] stated that the population growth of the elderly (aged > 60 years) in the world is increasing very fast and rapidly compared to other age groups. In 2000 the number of older adults in the world was around 600 million (11%), in 2005 it increased to 1.2 billion (22%). The total number of older adults in 2009 was 179,288 of the total population. It is estimated that in 2020 it will be 11.34% of the total population, the growth of the elderly population and the increasing age of life expectancy in various societies in the world have given birth to a term that is often referred to in the literature as population ageing or ageing society. Population ageing is an increasing proportion of the number of older adults compared to young age groups so that this group categorized as elderly experiences a process called the ageing process.

[3] argues that, the growth and growth of the population in Indonesia who are elderly is increasing rapidly and rapidly in line with the increasing number of congenital diseases being experienced. Besides, it is the demographic conditions or conditions that are spread over several islands which encourage the birth of a concept of home care. The concept of home care is the best and most appropriate solution to anticipating the number of patients who are not accommodated in the hospital. The concept of home care should be the first option in health development in Indonesia. With the concept of home care, patients who are sick with specific criteria (especially those who do not need hospital equipment) no longer have to

go to the hospital, but health workers who come to the patient's house with the main focus on the independence of the patient and his family.

[4] argues that Home Care began in 2003, where HelpAge Korea in collaboration with HelpAge International has implemented a three-phase program that supports ten ASEAN countries in developing and adapting home care models that have proven successful in South Korea. The Home Care Program (2003-2012) is funded by the Republic of Korea and the ASEAN Cooperation Fund. One of its mandates is that Home Care is shared among the community, especially parent-centred and social people. The project provides facilitation and capacity building for NGOs. It engages the governments of ASEAN member countries to develop policies and support various types of home care according to their respective country contexts.

The nursing courses studied so far in the curriculum of the nursing study program have not specifically collaborated between gerontic nursing and the issue of home care services. Learning materials and the lack of literature on gerontic care in-home care services in Indonesia, including the Panrita Husada STIKes. It is higher education for health workers located in the south-south region of South Sulawesi Province who will educate excellent and religious health workers, especially in the field of home care.

Based on the preliminary study conducted, namely, the public awareness of the importance of elderly care in the family as part of home care is deficient, the need for home care nurses will increase. Homecare needs strategies, definitions, goals, targets/objectives, preparation, equipment, how to handle cases and others. In the future, to pursue home care nurses who handle the elderly requires special skills. The data obtained at STIKes Panrita Husada, the number of students in the Nursing Undergraduate Study Program, is 288, where most students do not understand how to learn home care in the elderly. Also, the information obtained from the management of the study program does not yet have a Learning Plan (RPS) which is specifically for gerontic nursing in services carried out at home care, there is a learning module to guide the implementation of Nurse's professional practice in general. However, the learning tools have not yet led to gerontic nursing in the services carried out in-home care. From the above phenomena, the researchers are interested in conducting research related to the development of gerontic nursing learning models to improve student skills in-home care services at STIKes Panrita Husada.

The formulation of the problem in this study, namely how to describe the field needs of the development of gerontic nursing models to improve student skills in-home care services.

2. LITERATURE REVIEW

According to [5] that Gerontology comes from Latin, namely *geros* means age and *logos* mean knowledge. Gerontology is a branch of science that studies the ageing process and the problems that occur in the elderly. Gerontology is a scientific approach to various aspects of the ageing process, such as aspects of health, psychological, socioeconomic, behaviour, environment, and others. Gerontic nursing or gerontological nursing is an elderly nursing specialist who carries out his roles and responsibilities in health care. It is setting by using science, expertise, skills, technology, and the art of caring to improve the optimal functioning of the elderly comprehensively.

The ageing process according to Constantinides (in Nurfatimah et al., 2017) is a process of gradually losing the ability of the tissue to repair itself or replace and maintain its normal function, so that it cannot survive the infection and repair the damage suffered.

According to [6] states that the ageing process is a process of decreasing the body's resistance in dealing with stimuli from inside and outside the body. At this time, a person gradually experiences a physiological, psychological and social decline, where these changes will affect all aspects of his life, including his health. The elderly will experience a decrease in physical function, which will contribute to the independence of the elderly. Independence behaviour is expressed by the ability to take the initiative, the ability to solve problems, be full of diligence, get satisfaction from their business and want to do something without the help of others.

[7] suggest that integrated home care requires close collaboration with clear goals and a shared vision among interdisciplinary professionals and needs to integrate various work cultures, procedures. Responsibility and the expected results reduce the benefits of integration. Another study found that collaboration is an essential thing in integrated services and teamwork, so have the opportunity to get to know each other and participate in conversations or discussions to gain mutual understanding.

According to [8] that Home Health Care is a system where health services and social services that provided at home to people with disabilities or people who have to stay at home because of their health conditions.

Home Care in nursing is a nursing service in the patient's home that has gone through a long history. In some developed countries, "Home Care", is not a new concept, but has been developed by William Rathbon since 1859 which he called home care in the form of visiting nursing personnel to the home to treat sick clients who are not willing to be hospitalized. Home care is a service that suits the needs of individual patients and families, planned, coordinated and provided by service

providers who are organized to provide services at home through staff or arrangements based on work agreements (contracts).

According to [9], Home Care for the elderly is a complete and useful service. It is very supportive of the government in providing services to older adults who have not received social welfare services from other service models. This service is intended for seniors who are not potential (unable) and potential (able) who are in the family environment and elderly who have lived alone.

According to [10] changes that occur in the elderly include:

Physical changes: Aging is a process of change (both in function and physical appearance) in the body which is caused by age. Specific physiological changes occur in the human body as a natural part of ageing. Physical changes in the elderly include; cells, respiratory system, nervous system, heating system, vision system, cardiovascular system, urinary Genito system, endocrine and metabolic systems, digestive system, musculoskeletal system, skin system and like tissue, reproductive system and sexual activity and body regulation.,

Psychic changes; In general, the elderly adult experience a decline in cognitive and psychomotor functions, this mental change is closely related to changes in physical health, level of knowledge and level of education and environmental situations. Intelligence is thought to generally use backward, especially the abstract rejection factor, starting to forget about new events, still well recorded past event.

Psychosocial changes; Other psychosocial changes that occur in the elderly, include feeling aware of death (sense of awareness of mortality), changes in the way of life (entering a narrower realm of motion care), economy due to dismissal (economy deprivation), increased living costs on income. Difficult, increased medical costs, chronic illness, and disability, neurological and sensory disorders (blindness and deafness arising), nutritional disorders, a series of losses (loss with friends or family), loss of strength and physical tension, and changes in self-image and change in self-concept.

Spiritual changes; There are several opinions about the spiritual changes in the elderly. According to Maslow (in [11]) that religion and belief are increasingly integrated into life, then according to Muray & Zenter (in [11]) that the religious life of the elderly is more mature. It can be seen from the way of thinking and acting daily. Spiritual development in 70 years old, among others, is the development achieved at this level so that the elderly can think and act by giving examples of ways of loving and giving justice.

3. RESEARCH METHODS

3.1. Research Design

The research design used in this research is descriptive analysis research to obtain a description of the need for developing Gerontic nursing learning models to improve student skills in-home care services.

3.2. Population, Sample and Sampling Techniques

[12] argues that population is a generalization area consisting of objects/subjects that have certain qualities and characteristics that are determined by the researcher to study and then draw conclusions. In this study, the total population was 228 students of grade III semester VI, the location of this research was carried out at STIKes Panrita Husada Bulukumba.

The sample in this study were 67 sixth semester students. The study was used simple random sampling technique. The time for conducting the research is from January to April 2020.

3.3. Instrument

[13] suggests, the research instrument is a research instrument used by researchers in writing in the form of interview guidelines, observations, and a list of questions prepared by the researcher to obtain information from respondents. This research instrument uses a questionnaire sheet to obtain an overview of the field needs of the development of gerontic nursing learning models to improve student skills in-home care services.

4. RESULTS

Based on the data obtained by distributing questionnaires to analyze the development of the gerontic nursing learning model to improve student skills in-home care services, the following data were obtained:

Table 1. Model requirements analysis

<i>NO</i>	<i>Model needs</i>	<i>Number</i>	<i>Percentage</i>
1	<i>Needed</i>	33	49,3
2	<i>Less Needed</i>	29	43,3
3	<i>Not Needed</i>	4	6,0
4	<i>Unnecessary</i>	1	1,5
	<i>Total</i>	67	100

Based on the results of the analysis shown in the table above, it can be explained that the description of the analysis of the needs of the gerontic nursing learning model to improve student skills in-home care services. Obtained a value with the categories needed as many as 33 students or 43.9%, less needed 29 or 43.3%, not needed 4 or 6.0%, unnecessary 1 or 1.5%, the results of preliminary studies that have been conducted suggests the need to design an appropriate learning model, namely a gerontic nursing learning model to improve student skills in-home care services, this model is expected to meet the criteria of validity, practicality and effectiveness.

5. DISCUSSION

Based on the results of the research, it shows that the gerontic nursing learning model to improve student skills in-home care services. It is needed at STIKes Panrita Husada Bulukumba considering that so far home care learning uses or studies gerontic nursing, in general, has not led to learning gerontic at home or home care.

There is no book specifically discusses skills in elderly care at home that examines several aspects, namely starting from the aspect of physical modality, which is a change (both in function and physical appearance) in the body caused by age or with age. The aspect of social modality is the elderly who experience changes or decline in cognitive and psychomotor functions; mental changes are near related to physical changes so that they cannot interact with the social environment in which they are located. The aspect of psychosocial modality is that individual problems and reactions to them will vary greatly, depending on the individuality of the individual concerned. Currently, people who have lived their life by working are expected to adjust themselves to retirement.

If conscientious and wise enough, a person has prepared himself for retirement, creating for himself various areas in his daily activities and asking to take advantage of the rest of his life. Furthermore, the aspect of spiritual modality is that religion and belief are closely related to each other which are integrated in daily life, the beliefs of the elderly will mature with time and a person's age or age.

Through this research, it will create an appropriate learning model to give birth to a research product which includes research instruments or skill observation sheets that can evaluate students' skill abilities after carrying out the learning process. The skills that students can learn in caring for the elderly can be implemented in the community in general, and the learning tools produced from this research include; Learning Plans (RPS), Lecture Unit (SAP), Lecturer books as a guide for lecturers in providing the learning process, Student books as a guide for each student in learning, and Student Worksheets (LKM), as student training materials in the theoretical learning process and practice student skills.

With the achievement of nursing student skills improvement, it is expected that they can take action at home for older adults who do not want to check themselves in health services such as hospitals and health centres considering their current health conditions or conditions. People have negative perceptions about health services during the Covid-19 pandemic, so they are afraid to go to health service places so to answer these problems during the Covid-19 pandemic, home health services are the best solution or way to maintain health for the community. Especially the elderly who are very vulnerable to disease attacks.

[14] suggest that the general public also still thinks that the program costs for using home care services are expensive because someone who wants to take medication is visited directly at his house and this will cost a lot, so that only certain groups of people who can use home care services, namely community groups with middle to upper socioeconomic groups.

[15] suggests that the age used as a benchmark for older adults varies, generally ranging from 60-65 years, according to the World Health Organization (WHO), there are four stages, namely: a), middle-age 45 -59 years, b), elderly age 60-74 years, c), old age 75-90 years, d), very old age > 90 years, The problems faced by the elderly in the ageing process make them need services from various parties. Therefore, comprehensive handling is needed as an effort to improve social welfare for the elderly.

Efforts to improve the social welfare of the elderly according to Government Regulation Number 43 of 2004 are a

series of activities carried out in a coordinated manner between the government and the community to empower the elderly, so that the elderly can continue to carry out their social functions and play an active role naturally in the life of the community, nation and state. And in line with [4] arguing that in reality there are still families who do not understand the needs of the elderly, given that the needs of the elderly are not only fulfilled by eating, drinking, and maintaining physical health, but more than that care is needed. Family in meeting their daily needs. Therefore, the elderly need to get special attention from the family so that they do not feel lonely and the needs of the elderly can be fulfilled so that the elderly can live happily and feel that they are still useful for the community.

[16] stated that the quality of nursing home services requires treatment because the residents of the nursing home are very susceptible to disease, most of the residents of nursing homes are old and frail, they have complex health problems. They are very dependent on continued individual care, with increasing numbers. The elderly population, people who need home care will increase, a review found that the quality of services for the elderly is still low despite the many efforts to improve care. Several studies have shown that most clients receive good primary care in nursing homes, but the quality of care still varies with the daily activities of the population.

[17] suggests that home-based health services are a component of a continuous and comprehensive range of health nursing provided to individuals and families in their places of residence, which aims to improve, maintain or restore.

6. CONCLUSION

This article is a phase of field needs analysis in developing gerontic nursing learning models to improve student skills in-home care services. By using a needs analysis, it will provide an accurate and real description of the level of needs for the learning model resulting from this research. This learning is expected to achieve an increase in the skills of nursing students globally in the service of older adults in the community and support the realization of the Vision and Mission of STIKes Panrita Husada, the results obtained from the percentage with the category needed 43.9%. Based on the needs analysis in this study, nursing students need to improve skills competency in elderly services at home (Home Care), one of which is designing a gerontic nursing learning model to improve student skills in-home care services.

7. REFERENCES

1. Pramesona BA, Taneepanichskul S. Factors influencing the quality of life among Indonesian elderly: A nursing home-based cross-sectional survey. *J Health Res.* 2018 Sep 10;32(5):326–33.
2. Nurfatimah R, Sulastri MS, Jubaedah Y. Perancangan Program Pendampingan Lanjut Usia Berbasis Home Care Di Posbindu Kelurahan Geger Kalong. *FamilyEdu: Jurnal Pendidikan Kesejahteraan Keluarga.* 2017 Nov 12;3(2):101–9.
3. Azis IK, Palu B, Ahri RA. The Influence The Influence Of Quality Of Home Care Service To Satisfaction And Patient Trust In Districs Panakkukang, City Of Makassar. *Window of Health : Jurnal Kesehatan.* 2018 Jul 25;1(3):304–10.
4. Widyakusuma N. PERAN PENDAMPING DALAM PROGRAM PENDAMPINGAN DAN PERAWATAN SOSIAL LANJUT USIA DI LINGKUNGAN KELUARGA (Home care): STUDI TENTANG PENDAMPING DI YAYASAN PITRAH SEJAHTERA, KELURAHAN CILINCING, KECAMATAN CILINCING JAKARTA UTARA. *Sosio Informa [Internet].* 2013 Dec 23 [cited 2020 Sep 21];18(3). Available from: <https://ejournal.kemsos.go.id/index.php/Sosioinforma/article/view/59>
5. Wibawa S, Purwaningsih E, Hastutin S. Fungsi Kognitif Yang Optimal Akan Meningkatkan Kemandirian Pada Lansia. *Jurnal Keperawatan Respati Yogyakarta.* 2018 Feb 6;5(1):309–14.
6. Alfiantino R. HUBUNGAN KONSEP DIRI TERHADAP TINGKAT KEMANDIRIAN LANSIA DALAM MELAKUKAN AKTIVITAS KEHIDUPAN SEHARI-HARI DI POSYANDU DESA SEPANJANG KECAMATAN GONDANGLEGI [Internet] [other]. [Malang]: University of Muhammadiyah Malang; 2016 [cited 2020 Sep 21]. Available from: <http://eprints.umm.ac.id/23443/>
7. Gudnadottir M, Bjornsdottir K, Jonsdottir S. Perception of integrated practice in home care services. *Journal of Integrated Care.* 2019 Jan 1;27(1):73–82.
8. Tristingdyah D. PENGARUH PERAWATAN LUKA DI RUMAH TERHADAP KECEMASAN PADA PASIEN ULKUS DIABETES MELITUS DI WILAYAH PUSKESMAS TOROH I. *THE SHINE CAHAYA DUNIA D-III KEPERAWATAN.* 2016 Apr 20;1(1):39–50.
9. Tati T, Rinekasari NR, Jubaedah Y. Model Pendampingan Lanjut Usia Berbasis Home Care dalam Implementasi Pendidikan Vokasional. *TEKNOBUGA: Jurnal Teknologi Busana dan Boga.* 2017 Dec 10;5(2):74–86.
10. Wahyudi N. *Perawatan Genetik dan Geriatrik.* 3rd Edition. Jakarta: EGC; 2008.
11. Mubarak WI. *Buku Ajar Keperawatan Komunis 2.* Jakarta: CV. Sagung Seto; 2006.
12. Sugiyono. *Metode Penelitian dan Pengembangan (Research and Development): Untuk Bidang Pendidikan, Manajemen, Sosial, dan Teknik.* 1st Edition. Bandung: Alfabeta; 2017.
13. Sugiyono. *Metode Penelitian Kombinasi (Mixed Methods).* Bandung: Alfabeta; 2017.

14. Perwitasari DA, Muttaqien A. POTENSI PERAN FARMASIS DALAM MENINGKATKAN KUALITAS HIDUP PASIEN LANJUT USIA: PERSPEKTIF RAWAT RUMAH. *Pharmaciana* [Internet]. 2012 May 1 [cited 2020 Sep 21];2(1). Available from: <http://journal.uad.ac.id/index.php/PHARMACIANA/article/view/657>
15. Padila. *Buku Ajar Keperawatan Gerontik : Dilengkapi aplikasi kasus asuhan Keperawatan gerontik terapi Modalitas, dan sesuai kompetensi standar Padila*. Yogyakarta: Nuha Medika; 2013.
16. Grøndahl VA, Fagerli LB. Nursing home care quality: a cluster analysis. *Int J Health Care Qual Assur*. 2017 Feb 13;30(1):25–36.
17. Kholifah SN. HOME CARE. *JURNAL KEPERAWATAN*. 2017 Jun 16;5(1):44–8.