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Needs and Problems of Posbindu Program: Community Health Volunteers Perspective

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Abstract. Posbindu is a form of public participation to conduct early detection and monitoring of risk factors for non-communicable diseases(NCD), and where it was carried out in as an integrated manner, routine and periodic event. This paper aims to investigate the needs and problems on Posbindu Program based on community health volunteers(CHVs) perspective. This study used descriptive qualitative method by open ended questions. Content analysis using to explicate the result. There are 3 theme finding about elderly needs in Posbindu; medical care, support group community, and health education. We found four theme problems which in Posbindu program: low motivation from elderly, Inadequate of facilities, physical disability, failed communication. To be effective in Posbindu program, all the stakeholders have reached consensus on the Posbindu program as elderly need. CHVs need given wide knowledge about early detection, daily care, control disease continuously so that the elderly keep feeling the advantages of coming to the Posbindu.

1. Introduction

Posbindu as routine activity has encouraged by the government in order to improve quality of life of elderly. This program has run for last decade as by increasing number of elderly in Indonesia. In addition, the transformation of new health paradigm has change which are curative to preventive and promotive services. Health promotion is included in one of new agenda of 17 sustainable Development Goals with 169 associated targets which are integrated and indivisible [1]. Posbindu is a form of public participation to conduct early detection and monitoring of risk factors for non-communicable diseases (NCD), and where it was carried out in as an integrated-manner, routine and periodic event. As a community participation, Posbindu program has been announced by the government through Ministry of Health to be done in *Puskesmas* (Primary Health Care). They have provided the needs of Posbindu and some regulations, but there must be another effort, for example periodically training for those in the fields, and clear guidance to maintain the sustainability of program. As describe above, and from another experience, community participation/community base program is an effective program to control risk factors of major NCDs, and it has significant contribute to global health [2,3]. Only as much as 25 % of elderly was using Posbindu service in Indonesia [2].

A community health volunteers (CHVs) is frontline from Posbindu who has close understanding of community served. CHVs have unique opportunity and ability to facilitate culturally appropriate care and service to help bridge the gap between Primary health care and community. CHVs as community health worker can give support emotional and informal psychological provides is often as meaningful to individuals as that received from clinician. The social support can also reduce feelings of isolation client may have and may create a space for client to safely disclose an untreated illness or trauma [4].

2. Methods

This is Descriptive qualitative study with a survey approach. Data taken from questioner which given to community health volunteers at the symposium and workshop management of Posbindu in Bandung, Augustus 2017. Total sampling using on this study is 45 community health volunteers who representative from 38 Posbindu in Bandung. Instrument is open-ended questioners which including 2



part, part I is about respondent data, part II is about their perspective about Posbindu program with 4 questions, (i). Based on your experience, what the elderly needs in Posbindu program. (ii) What the problems from Posbindu program. (iii) What is solutions your taken to carry out the problems; (iv). What is the results.

Data analysis for open-ended questions do with some step, firstly, read carefully the responses, secondly; develop coding categories, third; Label each response with one or more coding. Fourth; Look at what you have and do sub coding. Fifth; think about what the responses mean and identify the patterns and trends. Sixth; write up analysis [5,6].

3. Results and discussion

3.1. Elderly needs in Posbindu program

The theme and subthemes identified are detailed below. Finding originating from research question “Based on your experience, what the elderly needs in Posbindu program” are illustrated by three categories and 9 subtheme explicating the theme.

Table 1. CHVs perspective about elderly needs in Posbindu

Theme	Subtheme
Medical care	Screening for general health
	Laboratories blood examinations
	Free medication
	Find the doctors to direct consultation
Support groups community	Spiritual needs
	Mental health consultant
	Elderly Exercise
Health care education	Home care for chronic diseases
	Daily care guidance

3.1.1 Medical care. Health care for elderly will need a holistic approach with evaluation of physical, mental, functional socio-economic health [7]. Health professionals at all levels (doctor, nurses, community health workers) will have to contribute to this system. The goal of organizing health service for older people is to maintain their autonomy with due concern for their self-respect and welfare caregiver. The ideal health system for older people should be affordable, accessible, comprehensive, maintaining continuity in content and time. The health care service for elderly should include, (i) health promotion and disease prevention service like education(exercise, nutrition), screening (ii) curative services like early diagnosis and treatment of day-today ill-health in primary health care facilities, diagnosis and treatment of serious health problems in secondary health care facilities (district hospitals, general hospitals) and tertiary care institutions (medical schools) and chronic care in long-term care institutions and/or home health care programs (iii) rehabilitative services like physiotherapy, restorative surgery, prosthesis, occupational therapy and long-term care for cognitive impairment (iv) mental health services like counseling for adjustment (ageing, retirement, relocation, widowhood and bereavement), drug and substance abuse and ambulatory treatment for mental diseases [7,8].

3.1.2. Support group community. Needs of the elderly are so comprehensive involve social, economic, psychological and physical needs. Several study about support group treatment for elderly showed positive impact from groups activity. Such as study by Beryl showed majority of respondent decreased anxiety about the aging process, become more effective in problem solving and began to make use of community resource, older people who receive social support may be less likely to experience cognitive decline, and more likely to maintain their social relationships over time [7]. Support group can be on variety program such as Stepping On (multifaceted community-based program using a

small-group learning environment), social club, groups discussions. Support groups can play a vital role in establishing social networks by building an identity based on social ties with others [9]

3.1.3 Health care education. The learning program for the elderly is strongly facilitated by peer support which is experienced during informal club-based activities, as well as having a jointly planned content which is tailored to their needs, motivation and ability. The health care service for elderly should include, health promotion, daily care, prevention education, exercise, and nutrition. Health education must concern based their needs and cognitive level.

3.2. Problems, solutions and the result in Posbindu program

Table 2. Analysis problem, solutions and the result in Posbindu program

Problems	Solutions	Results
Low Motivation of Elderly.		
Elderly motivation to coming on Posbindu activity is low, some reason; feeling healthy, feeling fear to check up.	- Taken home visit - Provide motivation to elderly and their family to continuing and following Posbindu approach to their family	- The elderly comes for next schedule. - Control Health Elderly.
Inadequate of Facilities.		
Place for Posbindu Event it's not satisfy. Few equipment's for health assessment	Try to get support from Primary Health Care Service and community.	
Physical Disability		
The elderly not attending to Posbindu event, because paraplegia, stroke, with chronic disease. The elderly needs support family for daily care.	Do home visit/home care	
Communication		
Miss communication. Poor socialization.	Good communication with simple language	

There are some problems often finding on Posbindu program which is need considering from all health care provider to maintain sustainability Posbindu program. First, most of elderly not come to Posbindu because they feel it's not important, feel healthy, more than concerned with their work. This behavior such as affected by some factors. The behavior of a person to visiting health care facilities is determined by three factors; predisposing factors (knowledge, attitudes, beliefs, values, individual characteristics), enabling factors (including the availability of health facilities, distance, government law, health-related skills) and strengthening factors (family, peers, teachers, community leaders) [10]. The study about showed there were correlation between family support and community leader support with actively in habitats to Posbindu NCD in Semarang City [11,12]. Relationship between jobs respondent, status of the treatment of the respondent, support CHVs, support health care personnel, peers, and family support. Second, Inadequate of facilities [12]. Some respondents note about a limited facility to perform Posbindu program, especially assessment tools, furthermore they feel don't know how to using instrument. Third, a lot of elderly getting physical disability (chronic disease) that because they can't go anywhere. CHVs do home visit to maintaining and controlling disease. Caring for the elderly in a way that addresses disability and maintains good quality of life has become a global challenge. Considering this there is an urgent need to train more professional caregivers to

focus on elderly care in order to meet current and future demand [13,14] According to Health Belief Model theorized that people's beliefs about whether or not disease or health problems, and their perceptions of the benefits of taking action to avoid it, affect their readiness to take action [12]. Quality of life of elderly its related to physical health, psychology, social relation and environment. To maintain good physical health and psychology elderly it should be doing social activities for their life. This includes the type of social support such as Posbindu to allows the elderly to share interests, attention and share their problem [15]. All the stakeholders have reached consensus on the need to educate and train healthcare providers in geriatrics to address issues of provider shortages, distribution, education, and quality as well as training in elderly care [13]. Stakeholders need to develop strategies to provide insight and understanding to the public about the activities and benefit of Posbindu [12].

4. Conclusion

CHVs have the unique role and opportunity to improve the quality of life of elderly in the community. To be effective in Posbindu program, all the stakeholders have reached consensus on the Posbindu program as elderly need. CHVs need given wide knowledge about early detection, daily care, control disease continuously so that the elderly keep feeling the advantages of coming to the Posbindu.

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