



INTRODUCTION

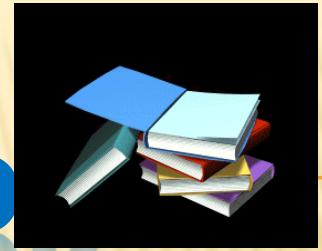
- ❖ Increase number of older people >>>



burden experienced of family carer's

- ❖ The majority of family structures in Indonesia → extended Family
- ❖ From culture and religious point of views, caring for older person → a form of filial piety, respect, sacrifice

INTEGRATED MODEL ON CARING FOR OLDER PEOPLE IN THE COMMUNITY GOAL



To provide a better and culturally sensitive of nursing care and services to older people, family and community



OBJECTIVES



- To enhance the ability of families in caring for older people in the community
- Improve the health status of older people

FRAMEWORK

Reach:

Older people:

1. Demographic variables: age, gender, education, marital status, etc
2. Health status: physical & psychological

Adoption::

Family carer's

1. Knowledge & skills to provide care at home
2. Perceived burden

Health Cadre's:

1. Knowledge & skills to support older person

Implementation:

1. Trainer for health cadre and family caregiver
2. Cadre to family and older people as facilitator in **support group**
3. Family to family as **self help group**
4. Family to older person at family home

1. Training Programmes
 - Eight interactive lectures
 - Demonstration
 - Home visits
 - Supervision & follow up support
2. Support group programs
3. Self health group
4. Older health post visits

Efficacy:

Family:

- Ability to provide care
- Burden

Health Cadre:

- Knowledge & skills

Efficacy:

Older person

- Physical health
- Psycho-social health

Maintenance:
6 Months follows
the training
program

METHODS

Research Study → Quasi Experiment

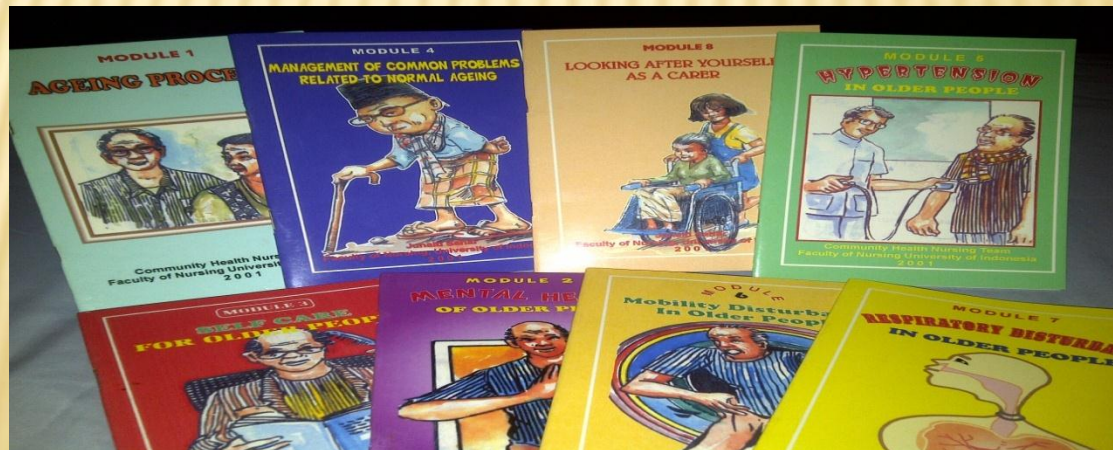


240 of family carer's →
120 for intervention and 120 for control
Group

Community Services: purposeful sampling

INTERVENTION PROGRAM

- ✖ The intervention group undertook the FCTP, which consisted of a three-day workshop followed by two home visits for guided practice and follow-up support.
- ✖ The training package for the workshop consisted of the trainees' and trainers' guide, and 8 education booklets or modules



RESULTS

No	Variables	p-value
1.	Family carer's: <ul style="list-style-type: none">- Knowledge- Skills- Attitudes	p < 0.005
2.	Cadres (health volunteer): <ul style="list-style-type: none">- Knowledge-- Skills	
3.	The health status of Older people	

RESULTS....

Older persons who participated in Self help group were:

- ❖ Enhanced their knowledge
- ❖ Improve adaptive coping
- ❖ Reduce blood pressure with the average 20 mmhg



Working group: Older people



Self help group of older people



Support group of
Family carer

CONT....

Physical exercise



Family Carer's training

INNOVATION...



Early detection

Older Health Post



Nursing consultation

CONCLUSION

- The integrated model on caring for older person in the community had positive impact on the health status of older people
- Increase family capabilities in caring for older people and reduce family burden
- Increase health cadre's knowledge and skills to support an older people self help group.



The integrated model was found acceptable by population and visible to be implementing



Thank you