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Implementation of Elderly School Bagja Lahir Batin in Raja Manggala Kulon, Cipatat, West Bandung, West Java Province

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A B S T R A C T

An increase in the number of the elderly population becomes a problem if the elderly experience a decline in health which has an impact on increasing healthcare costs, increasing disability rates, decreasing income, lack of social support and an environment that is less friendly to the elderly. BAZNAS (National Amil Zakat Agency) of West Java Province in collaboration with Yayasan Indonesia Ramah Lansia and the West Bandung District Government of West Java Province, is committed to providing services to the elderly and providing education to the public to care for the elderly, namely the Nya'ah Ka Kolot (care for the elderly) program. One of the activities of the Nya'ah Ka Kolot extensive program to contribute to improving the quality of life of the elderly is an informal school for the elderly called "Sekolah Lansia Bagja Lahir Batin". This activity is carried out once a month for ten months. Elderly who attends elderly schools experience an increase in knowledge and skills regarding physical, psychological, social and spiritual health problems so that the quality of life of the elderly has increased. The satisfaction index of the elderly attending senior school is above 80%.

INTRODUCTION

The elderly population needs attention because the elderly population continues to increase. The percentage of the elderly population over 65 years worldwide in 2019 will be 9.1 % of the entire population, and it is predicted that in 2030 it will be 11.7%, and in 2050 it will be 15.9%. All countries guarantee the welfare of the elderly by protecting human rights, the economy, access to health services, life-long learning and providing support, both formal and informal, according to the SDGs (Nations, 2019).

The elderly population in Indonesia has also increased. The percentage of the elderly population in Indonesia in 2019 reached 9.6% or 25.64 million people. The elderly population in Indonesia goes to a country with an ageing population structure if it reaches more than 10% (Central Bureau of Statistics, 2019). The number of older people in West Java in 2021 is 4.72 million or 9.67% of the entire population in West Java (Biro Pusat Statistik Jawa Barat, 2022).

An increase in the number of the elderly population becomes a problem if the elderly experience a decline in health which has an impact on increasing healthcare costs, increasing disability rates, decreasing income, lack of social support and an environment that is less friendly to the elderly. Various parties have made various efforts to provide the best service for the elderly through activities according to needs to

support efforts to improve the quality of life of the elderly. BAZNAS (National Amil Zakat Agency) of West Java Province in collaboration with Yayasan Indonesia Ramah Lansia and the West Bandung District Government of West Java Province is committed to providing services to the elderly and providing education to the public to care for the elderly, namely the Nya'ah Ka Kolot (care for the elderly) program. One of the activities of the Nya'ah Ka Kolot extensive program to contribute to improving the quality of life of the elderly is an informal school for the elderly called "Sekolah Lansia Bagja Lahir Batin".

The establishment of this school for the elderly was carried out in RW 01 Rajamandala Kulon Village, Cipatat District, West Bandung Regency, due to the absence of activities to empower the elderly in the village. This activity lasted ten months, from October 2021 to July 2022. In addition, the community still needs to improve health, education, and the economy. However, they have high enthusiasm and willingness to carry out the program if given a health or education program. There are still many elderly and families who do not know the dangers and complications due to diseases experienced by the elderly. The elderly and their families consider that elderly diseases are a normal thing to happen to the elderly and do not need to be treated immediately.

This activity aims to increase knowledge and skills and improve the quality of life of the elderly. Elderly schools address not only physical or health problems but also psychosocial, social and spiritual problems in the elderly (Erwanto et al., 2018a). Elderly who attends senior school experience an increase in their quality of life. This is also influenced by health status, sleep patterns and depression (Chang et al., 2012). In addition to improving their quality of life, the elderly who attend seniors schools can increase their self-esteem and life satisfaction (Chang, 2014).

METHOD

This activity was attended by the elderly, elderly health cadres and community leaders. The following is a description of the methods or steps for implementing elderly school activities based on partner problems, which are shown in the image below:

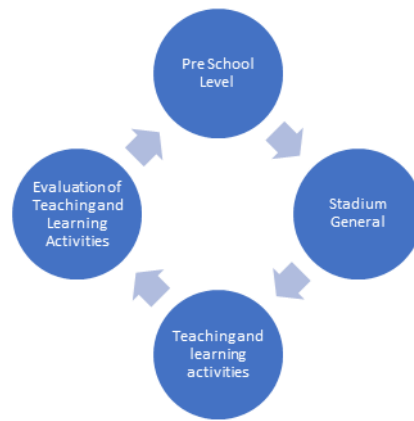


Diagram 1. Stages of implementing an elderly school

1. Pre School-Level

This stage is carried out before the senior school program is implemented. This activity includes:

- 1) Brainstorming for the West Java BAZNAS team and Yayasan Indonesia Ramah Lansia with the local village government and Primary Health Centre to convey one of the contributions that can be made for the health and independence of the elderly at the community level.
- 2) Dissemination of activities to community members to obtain support.
- 3) Data collection for elderly people in the surrounding area and data collection on the needs of the elderly. Proposers distribute questionnaires to the elderly and families. The results of filling out the questionnaire were analysed and concluded, so that they could find out the health conditions of the elderly before the elderly school activities were carried out.

2. Stadium General

- 1) Inauguration of an elderly school by local government figures
- 2) This activity was carried out after the number of students attending the senior school had been collected. The inauguration was attended by the West Java Baznas Team, Yayasan Indonesia Ramah Lansia, the local village government, and Primary Health Centre
- 3) General explanation of the technical implementation of the school for the elderly. The team will explain the material for the elderly school that will be taught.

3. Teaching and learning activities.

Implementation of an elderly school is carried out once a month for 10 months with a duration of 60 minutes each meeting (10 minutes theory, 40 practice and 10 minutes question and answer).

4. Evaluation of Teaching and Learning Activities

The evaluation is carried out by:

- 1) Attendance participation. Evaluation of attendance is carried out in attendance at each meeting or face to face.

- 2) Absorption of lessons of each material. At each meeting, students will be given a pre-test and post-test as well as an evaluation of the actions that have been taught.

RESULT AND DISCUSSION

This activity involved a team of partners from West Java BAZNAS, Elderly Friendly Indonesia, Primary Health Centre, Rajamandala Kulon village government and other BAZNAS partners.

Coordination was carried out for 2 months before the launching of the senior school. Furthermore, the launching of an elderly school was carried out as well as carrying out health examination activities.



Figure 1. Launching of Elderly School Activities and joint commitment to implementing an elderly school

After the launching activity, an elderly school activity was held for ten months which 75 older people attended. In lifelong learning in this pandemic era, we must be able to create a new era in learning, to be able to develop the potential and contribution of the elderly in society so that the elderly feel happy (Xia & Yu, 2020).

The material in implementing the elderly school includes problems that often occur in the elderly, namely physical, psychological, social, and spiritual problems in the elderly. The author makes a curriculum adapted to the health, socio-economic conditions, and education of the elderly. Based on this, the learning method given to elderly school participants is practice and demonstrations that can be easily applied at home independently with family assistance. Health education is an essential aspect of promoting health among the elderly. Family participation is needed to be able to provide this education because they have plenty of time to meet the elderly and teach them directly (Mallmann et al., 2015).

The participants could also share and practice in front of other friends during the implementation. This method is expected to provide increase the ability of the elderly to care for themselves. This can also be

referred to as a collaborative and cooperative method, which can increase knowledge and maintain a memory of the knowledge learned (Hariyanti et al., 2014). Elderly groups living in the community need to be taught health promotion directly with easy prevention steps to be applied practically (Defri Mulyana, Juhrodin, 2019).



Figure 2. Provision of school materials for the elderly by presenters

After implementing an elderly school, the authors evaluated the success rate of implementing an elderly school by giving questionnaires to elderly school participants. The author measures the knowledge and actions of the elderly before and after attending an elderly school. The average score before learning activities is 65.1, and the average value after learning activities is 88.7, with an average increase of 37%. The provision of information carried out in schools for the elderly can increase students' knowledge. This is because knowledge after being given periodic counselling significantly increases knowledge (Damayanti et al., 2019). Elderly school activities are carried out not only once, but there are several face-to-face meetings, namely once a month which is carried out for one year of learning with the method of giving assignments that students at home can do as an effort to repeat learning material. Increased knowledge can also be influenced by continuous and long-term exposure to information and education (Opadeyi, 2019).

The author also uses language that elderly school participants easily understand. This is the result of the dedication that other volunteers have carried out; the assistance program given to the elderly group has increased knowledge about foot exercises, the elderly can do stress management properly and can do leg exercises independently so that the health of the elderly becomes more optimal (Frisca et al., 2020). Elderly who attend elderly schools (lifelong education) affect life satisfaction and self-acceptance of the changes that occur (Jeon & Song, 2012).

Elderly health cadres, PKK mothers and village youths also supported the implementation of this activity. There is participation from across generations to learn and teach each other (*intergenerational learning*) in society. With this generational difference, it is hoped that the seniors (elderly) will also be able to impart their knowledge to the next generation under them (grandchildren). Differences in knowledge,

practice, social and metacognitive in these two generations can be used as opportunities and challenges for intergenerational learning in human resource development (Gerpott et al., 2017).



Figure 3. Support by various parties in the community

The involvement of youth in elderly activities and the implementation of an elderly school is an indicator of the realization of the Nya'ah Ka Kolot (care for the elderly) area. in Raja Mandala Kulon Village. These indicators include (1) open space for the elderly; (2) Ease of transportation; (3) Safe homes; (4) Social participation for the elderly; (5) Respect for the elderly; (6) Elderly friendly jobs; (7) Communication and Information; (8) Health services and long-term care (Kurniasih, 2018).

This is by other research that the existence of volunteers is an essential aspect of promoting the welfare of the elderly in society. The support from various parties, including volunteers, is an indicator of achieving an age-friendly community (McKernan, 2013; Erwanto et al., 2020). The convenience of health services, service proximity, safety, affordability and significant attention are essential characteristics in implementing elderly-friendly cities (Plouffe & Kalache, 2010).

The team also measured the satisfaction of the elderly school participants after attending the elderly school.

Table 1. Description of Elderly Satisfaction after attending an elderly school

No	Item	Score	Percentage
1	Teachers provide accurate information	120	92,31
2	The teacher answers the questions correctly	110	84,62
3	Teachers are friendly and polite in providing information	118	90,77
4	comfortable room	104	80
5	Teachers have extensive knowledge	116	89,23
6	The material delivered by the teacher is in accordance with the problem	114	87,69
7	The knowledge conveyed is very useful	116	89,23
8	Happy to attend senior school	118	90,77
9	The material given is more practical	104	80
10	The material provided can be applied at home	112	86,15

Based on the questionnaire results, the highest answer was obtained from the respondent that the respondent was satisfied with the teacher in providing precise and accurate information according to the problems experienced by the elderly so far, namely 92.31%. Yayasan Indonesia Ramah Lansia conducted

a study before creating the curriculum. The curriculum is adapted to the health conditions, education levels, and socio-economic conditions of elderly school participants. The teacher provides a material with an andragogical learning approach that can be easily understood by elderly school participants (Erwanto et al., 2018).

CONCLUSION

Elderly who attends elderly schools experience an increase in knowledge and skills regarding physical, psychological, social, and spiritual health problems so that the quality of life of the elderly has increased. The satisfaction index of the elderly attending senior school is above 80%. In addition, there is support, participation and learning from across generations (intergenerational learning) from youth and elderly health cadres can be a strengthening indicator to achieve an elderly-friendly area.

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REFERENCES

- Biro Pusat Statistik Jawa Barat. (2022). *PROVINSI JAWA BARAT DALAM ANGKA*.
- Central Bureau of Statistics. (2019). 2019 Elderly Population Statistics. In *Central Bureau of Statistics*.
- Chang, K.-O. (2014). Effect of Self-esteem and Life satisfaction on Quality of life of Elderly School Program Participants. *Journal of the Korea Academia-Industrial Cooperation Society*, 15(8), 5078–5087. <https://doi.org/10.5762/kais.2014.15.8.5078>
- Chang, K.-O., Bae, D.-Y., & Park, S.-G. (2012). Effect of Perceived Health Status, Sleep and Depression on Quality of Life of Elderly School Participants. *Journal of Muscle and Joint Health*, 19(3), 329–339. <https://doi.org/10.5953/jmjh.2012.19.3.329>
- Damayanti, C. N., Hannan, M., Fatoni, A. F., & Suprayitno, E. (2019). Efektifitas pendidikan kesehatan terhadap tekanan darah pada lansia. *Wiraraja Medika: Jurnal Kesehatan*, 9(2), 46–51.
- Defri Mulyana, Juhrodim, D. Y. N. M. (2019). Pemberdayaan Lansia Produktif, Aktif, dan Sehat, Program Peningkatan Kualitas Hidup Lansia Melalui Pelatihan Senam Yoga di Dusun Sindang Kalangon dan Dusun Lengkongsari Kec. Sukamantri Kab. Ciamis. *Jurnal Pengabdian Siliwangi*, 5, 16–18.
- Erwanto, R., Kurniasih, D. E., & Amigo, T. A. E. (2018a). *Elderly schools: Non-Formal Education Model for the Elderly*. Indonesia Ramah Lansia Foundation.
- Erwanto, R., Kurniasih, D. E., & Amigo, T. A. E. (2018b). Sekolah lansia: Model Pendidikan Non Formal untuk Lanjut Usia. *Yayasan Indonesia Ramah Lansia*.
- Erwanto, R., Kurniasih, D. E., Aquino, T., & Amigo, E. (2020). *PENGEMBANGAN DUSUN RAMAH LANSIA MELALUI PELAKSANAAN SEKOLAH LANSIA DI KARET KABUPATEN BANTUL*. 4(6). <https://doi.org/10.31764/jmm.v4i6.3170>
- Frisca, S., Daeli, N. E., Aeni, M. N., & Sukistini, A. S. (2020). Pendampingan dan Peningkatan Kesehatan Lansia Dengan Senam Kaki dan Pendekatan Spiritualitas Charitas di Gereja Protestan di

- Indonesia Bagian Barat Immanuel Palembang. *JMM (Jurnal Masyarakat Mandiri)*, 4(1), 63–69.
- Gerpott, F. H., Lehmann-Willenbrock, N., & Voelpel, S. C. (2017). A phase model of intergenerational learning in organizations. *Academy of Management Learning and Education*, 16(2), 193–216. <https://doi.org/10.5465/amle.2015.0185>
- Hariyanti, T., Prabandari, Y. S., Kedokteran, F., Brawijaya, U., Kedokteran, F., & Gadjah, U. (2014). Efektivitas Metode Kolaboratif Learning dan Kooperatif dalam Pendidikan Kesehatan Berbasis Komunitas. *Jurnal Pendidikan Kedokteran Indonesia*, 3(1), 9–17. <https://doi.org/10.22146/jpki.25192>
- Jeon, M.-S., & Song, S.-H. (2012). Effects that the Type of Participation Motivation of Lifelong Education for the Elderly Influences in the Satisfaction of Education and Life-changing. *The Journal of The Korea Contents*, 438–448.
- Kurniasih, D. E. (2018). *DUSUN RAMAH LANSIA*. Yayasan Indonesia Ramah Lansia.
- Mallmann, D. G., Galindo Neto, N. M., De Carvalho Sousa, J., & Vasconcelos, E. M. R. (2015). Health education as the main alternative to promote the health of the elderly. *Ciencia e Saude Coletiva*, 20(6), 1763–1772. <https://doi.org/10.1590/1413-81232015206.02382014>
- McKernan, J. (2013). Vulnerability, Voluntarism, and Age-Friendly Communities: Placing Rural Northern Communities into Context. *Journal of Rural and Community Development*, 8(1), 62–76.
- Nations, U. (2019). World Population Prospects 2019. In *Department of Economic and Social Affairs* (Issue 141). United Nations.
- Plouffe, L., & Kalache, A. (2010). Towards global Age-Friendly cities: Determining urban features that promote active aging. *Journal of Urban Health*, 87(5), 733–739. <https://doi.org/10.1007/s11524-010-9466-0>
- Xia, X., & Yu, H. (2020). Research on the Elderly Education Model Based on Autonomous Learning Groups under the Regular Situation of COVID-19 Epidemic Prevention and Control. *Open Access Library Journal*, 7, 1–10. <https://doi.org/10.4236/oalib.1106861>