

Changes in Social Interaction in Elderly People with Chronic Diseases at the Muara Fajar Riau Community Health Center

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ABSTRACT

Abstract: Elderly or old age is a closing period in a person's life span, namely a period where a person has moved away from previous periods that were enjoyable, or moved away from times that were full of benefits. As age progresses, health problems begin to experience problems, especially chronic diseases. In this case, the emergence of chronic disease will affect the elderly in their social interactions with other people. This research aims to identify changes in the social interactions of elderly people with chronic diseases using a descriptive design, using purposive side as many as 43 respondents. Data was collected using a questionnaire. The data that has been collected is analyzed. From the results of the analysis it was obtained (88, 4%) of respondents experienced changes in social interactions or elderly social interactions were categorized as bad. The results of this study recommend that nurses improve nursing care for elderly people with chronic diseases regarding changes in their social interactions.

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1. INTRODUCTION

The aging process is a collection of changes in biology, physiology, environment, psychology, behavior and society. Another opinion says that aging is a gradual and continuous process of natural change that begins in early adulthood, during early middle age, many body functions begin to gradually decline (Shilpa, 2018). In the elderly there are many relevant changes from normal aging, diseases, and syndromes that commonly occur, where cognitive and psychological changes, social and environmental changes occur, and then review the general discussions that doctors routinely have with these patients and their families. Some hearing and vision impairments are part of normal aging such as decreased immune function (Jaul, E., & Barron, 2017).

Demographically, based on the 2020 population census, there was an increase in the percentage of elderly or senior citizens (60 years and over) to 9.78 percent in 2020 from 7.59 percent in 2010. The highest number of seniors aged 60-64 years was 10.3 million resident. Meanwhile, the population aged 75+ years is 5 million, more than the population aged 70-74 years (BPS, 2020). The number and proportion of people aged 60 years and over in the population is increasing. In 2019, the number of people aged 60 years and over was 1 billion. This number will increase to 1.4 billion in 2030 and 2.1 billion in 2050.

Chronic disease is a disease that lasts a long time and usually causes death. According to SKRT (Household Health Survey) data, chronic diseases are still high, the 2015 SKRT showed the morbidity rate for those aged 55 years and over was 25.7%. Based on the 2016 SKRT, the morbidity rate for those aged 55 years was 15.1% and according to the 1995 SKRT, the morbidity rate for those aged 49-60 years was 11.6% (Kuntjoro, 2021). In research on the Profile of the Elderly Population in Kodya Ujung Pandang, it was found that the elderly suffer from various diseases related to aging, including diabetes mellitus, hypertension, coronary heart disease, rheumatism and asthma, causing disruption to work activities (Mardiatnoko, 2021). Likewise, the findings of a study conducted by the Demographic Institute of the University of Indonesia in Bogor Regency in 2017 were that around 72% of elderly people suffer from chronic diseases. High blood pressure is a chronic disease that most elderly people suffer from, so they

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are unable to carry out daily life activities (Nugroho, 2019). It is very important to recognize the nature of disease in the elderly so that we do not make a mistake or be late in making a diagnosis, so that therapy and other actions that follow can be carried out immediately. Because diseases in elderly people are more endogenous than exogenous. This may be due to the decline in the function of various body organs due to the process of aging. When an elderly person experiences chronic illness due to physical changes as they get older, these changes will greatly influence their role and relationship with their environment. As a result, socialization has experienced a setback. In general, the social relations carried out by the elderly are because they refer to social exchange theory. This relationship brings satisfaction that arises from the behavior of other people (Ratna, 2021).

According to an initial survey conducted at the Muara Fajar Riau Public Health Center, almost half of the elderly population suffers from chronic diseases, and the number of the elderly population in these homes is 160 people and those suffering from chronic diseases and suffering from chronic diseases reaches 135, and according to the administrators of the elderly homes suffering from chronic diseases is rare. mingle with his friends. Because of this, the author is interested in researchers regarding changes in social interactions in elderly people with chronic diseases. This research will be carried out at the Community Health Center

2. METHOD

used in this research is an exploratory descriptive approach. In this study, researchers wanted to identify changes in social interactions in elderly people with chronic illnesses. The population in this study were elderly people suffering from chronic diseases at the Muara Fajar Riau Community Health Center. The research was carried out in April - August 2023. The determination of the sample size in this study was based on the Arikunto formula, namely the number of subjects in the population is more than 100 people, so the sample size taken is approximately 25-30% of the number of subjects (Arikunto, 2015). And the results of the initial survey conducted showed that the number of elderly people suffering from chronic diseases was 135 people. From this formulation, the sample size was 43 people.

3. RESULTS AND DISCUSSION

Distribution and Frequency Data Demographic Data on Changes in Social Interactions of Elderly People Suffering from Chronic Diseases

Characteristics	F	(%)
Age		
60-69	13	30
70-79	22	51
>80	8	19
Ethnic group		
Batak	30	70
Java	10	23
Minang	3	7
Education		
elementary school	40	93
JUNIOR HIGH SCHOOL	2	5
SENIOR HIGH SCHOOL	1	2
College		
Previous Work		
Civil servants	-	-
Private employees	2	5
Farming	35	81
Laborer	6	14



The type of disease		
Rheumatism	12	28
Diabetes Militus	8	19
Strokes	7	16
Pulmonary TB	2	5
Hypertension	14	32
Duration of disease		
0.5-1.5	11	25
1.6-2.5	5	11
2.6-3.5	22	51
>4.6	5	12

Frequency distribution and percentage changes in social interactions in elderly people with chronic illnesses. Feeling disturbed when joining friends

Statement	F	(%)
Never	19	44
Sometimes	22	51
Often	2	5

From the research results in the table above, it shows that respondents feel nervous about joining with friends, 2 (5%) respondents said often, 22 (51%) respondents said sometimes, 19 (44%) respondents said never.

Feel capable if you join with friends

Statement	F	(%)
Never	22	44
Sometimes	19	51
Often	2	5

The research results in the table above are based on the question of feeling able to do activities with friends, 2 (5%) respondents answered often, 19 (44%) respondents said sometimes, and 22 (51%) said never.) respondents.

Able to do activities with friends

Statement	F	(%)
Never	22	51
Sometimes	19	44
Often	2	5

From the research results based on the question of being able to do activities with friends, 2 (5%) respondents answered often, 19 (44%) answered sometimes, and 22 (51%) respondents answered never.

Feel able to carry out daily activities

Statement	F	(%)
Never	7	16
Sometimes	35	81
Often	1	2

From the research results based on questions about being able to carry out daily activities, 1 (2%) respondents answered often, 35 (81%) answered sometimes, and 7 (16%) answered never.



Feeling unsure about joining friends

Statement	F	(%)
Never	4	9
Sometimes	36	84
Often	3	7

From the results of research based on the question of feeling not confident about joining with friends, data was obtained that 3 (7%) respondents answered often, 36 (88%) respondents sometimes, and 4 (9%) answered never.) respondents.

Feeling not accepted in the environment

Statement	F	(%)
Never	6	14
Sometimes	33	77
Often	4	9

From the results of the question about feeling not accepted in the environment, the answer was never as many as 6 (14%) respondents, sometimes sometimes as many as 33 (77%) respondents, and those who answered often were 4 (9%) respondents.

Feeling unable to build meaningful relationships with other people

Statement	F	(%)
Never	4	9
Sometimes	13	30
Often	26	61

From the results of the question about feeling unable to build meaningful relationships with other people, the answer was never as many as 4 (9%) respondents, sometimes 13 (30%) respondents, and those who answered often were 26 (61%) respondents.

Feeling very dependent on other people

Statement	F	(%)
Never	2	5
Sometimes	14	33
Often	27	63

From the results of the question about feeling very dependent on other people, the answers were never as many as 2 (5%), sometimes 14 (33%), and those who answered often were 27 (63%) respondents.

Feel lonely

Statement	F	(%)
Never	-	-
Sometimes	22	49
Often	43	51

From the results of the question about feeling lonely, data was obtained that those who answered never were none, those who answered sometimes were 22 (49%) respondents, and those who answered often were 43 (51%) respondents.

Frequency distribution and percentage changes in social interactions in elderly with chronic diseases

Elderly social interaction	F	(%)
0-10 (poor social interaction)	38	88 %
11-20 (good social interactions)	5	12%

The results obtained were that 38 respondents (88%) experienced changes in social interactions, or their social interactions were bad, and only 5 respondents (12) had good social interactions or no changes in social interactions.

Social Interaction of Elderly People with Chronic Diseases

Basically, elderly people will experience setbacks in socializing. As a person gets older, there will be a process of decreasing the ability of the body's organs to function (regeneration) and this will affect the social interactions of the elderly. This, especially in elderly people who experience chronic illnesses, means that clients will find it difficult to socialize (Suhartini, 2021). Based on the results of this study, it shows that 38 (88.4%) elderly experienced changes in social interactions or poor social interactions and 5 (11.6%) experienced good social interactions.

It is possible that this is caused by a decrease in body function due to chronic diseases suffered by the elderly. Based on research conducted, (Hartika, 2021), elderly people who suffer from chronic diseases will have their social interactions disrupted, this is due to the limited ability of elderly people to interact with other people, as a result elderly people feel lonely. Meanwhile, to maintain both physical and mental health, elderly people still have to carry out activities that are useful for their lives, including social support. According to (Bruner, 2016), social interaction allows elderly people to gain a feeling of belonging to a group which makes it possible to share interests, attention, and carry out creative activities together and by gathering with people of the same age. According to (Santrock, 2021) social interaction plays an important role in the lives of the elderly. Conditions of loneliness and social tolerance will be risk factors for health. This will have an impact on the length of life. Especially for elderly people who suffer from chronic diseases, apart from not being able to interact, elderly people who suffer from chronic diseases also experience hopelessness, feeling dejected and even reaching depression. And the factors that make it difficult for elderly people to interact with other people due to their illness are due to disturbances in bodily functions due to chronic diseases suffered by the elderly person, a feeling of lack of self-confidence and a feeling of not being accepted by the environment due to the chronic disease suffered by the elderly person. (Potter, 2015).

According to (Hadi, 2021) the form of social interaction is a relationship between individual and individual, meaning that one individual will provide influence, stimulation/stimulus to other individuals, this form of interaction is usually in the form of shaking hands, reprimanding each other, and conversing. However, this situation cannot be carried out by elderly people with chronic diseases, because the condition and function of the body do not allow these elderly people to have interactions between individuals and individuals. Especially for elderly people who suffer from stroke, it is difficult to even move their body, let alone interact. Likewise with elderly people who suffer from pulmonary TB, elderly people who suffer from this disease are generally isolated from their environment, so this does not allow the elderly to interact. According to (Christianson, 2018), interaction between individuals and groups is a form of interaction, for example the individual participates in an activity, for example orphanage activities such as gymnastics, religious activities and other group activities. According to (Harmoko, 2021), elderly people who suffer from chronic diseases rarely meet the need for social interaction between individuals and groups, because interactions between individuals and individuals are difficult to fulfill, let alone between individuals and groups.

Likewise, interactions between groups and groups will definitely not be possible for elderly people with chronic illnesses because interactions between individuals and individuals, interactions between individuals and groups cannot be carried out, let alone groups and groups (Nasution, I, 2014).

From the results of research on Changes in Social Interaction of Elderly People with Chronic Diseases at Muara Fajar Riau Community Health Center, it turns out that the worst thing is social interaction between individuals and individuals. because respondents have chronic diseases such as rheumatism, Diabetes Mellitus, Stroke, pulmonary TB and hypertension, and all of these diseases are diseases that make it difficult to carry out social interactions



4. CONCLUSION

Based on the results of this research, the researchers can conclude that the majority of respondents were aged 70-79 years, namely 22 respondents (51.2%). Islamic religion 41 respondents (95.3%), Batak tribe 30 respondents (69.8%), elementary school education (43.0%) respondents, previous occupation was farming 35 respondents (81.4%). The type of disease was chronic for 14 respondents (32.6%), and the duration of suffering was 2.6-3.5 years for 22 respondents (51.2%). The results of research on changes in social interactions in elderly people with chronic disease show that there are changes in social interactions. This result can be seen based on the data obtained showing that the majority of elderly people suffering from chronic diseases, 38 (88.4%) respondents, experienced changes in social interactions or their social interactions were categorized as bad. and as many as 5 respondents were elderly who suffered from chronic diseases who did not experience changes in social interactions or whose social interactions were categorized as good. Based on the results of this research, changes in social interactions among elderly people with chronic diseases at the Muara Fajar Riau Community Health Center include: Based on the research results obtained, the nursing profession should be able to understand that elderly people suffering from chronic diseases experience changes in social interactions or have poor social interactions. And as a nursing profession we must better understand and prepare nursing care plans for elderly people with chronic diseases regarding changes in their social interactions. So that this nursing care can be carried out as it should. Based on the results of this research, changes in social interactions among elderly people with chronic diseases at the Muara Fajar Riau Community Health Center include: Based on the research results obtained, the nursing profession should be able to understand that elderly people suffering from chronic diseases experience changes in social interactions or have poor social interactions. And as a nursing profession we must better understand and prepare nursing care plans for elderly people with chronic diseases regarding changes in their social interactions. So that this nursing care can be carried out as it should. Based on the results of this research, changes in social interactions among elderly people with chronic diseases at the Muara Fajar Riau Community Health Center include: Based on the research results obtained, the nursing profession should be able to understand that elderly people suffering from chronic diseases experience changes in social interactions or have poor social interactions. And as a nursing profession we must better understand and prepare nursing care plans for elderly people with chronic diseases regarding changes in their social interactions. So that this nursing care can be carried out as it should. The nursing profession should be able to understand that elderly people who suffer from chronic diseases experience changes in social interactions or poor social interactions. And as a nursing profession we must better understand and prepare nursing care plans for elderly people with chronic diseases regarding changes in their social interactions. So that this nursing care can be carried out as it should. The nursing profession should be able to understand that elderly people who suffer from chronic diseases experience changes in social interactions or poor social interactions. And as a nursing profession we must better understand and prepare nursing care plans for elderly people with chronic diseases regarding changes in their social interactions. So that this nursing care can be carried out as it should.

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