

POST-STROKE ELDERLY POSITIVE DEVIANCE IN BANDAR SETIA VILLAGE, PERCUT SEI TUAN DISTRICT, PERCUT SEI TUAN DISTRICT IN 2023

Lidya Natalia Br Sinuhaji¹, Ida Yustina², Nurmaini³, R Kintoko Rochadi⁴, Fikarwin Zuska⁵, Fazidah⁶

¹⁻⁶ Faculty of Public Health, North Sumatera University

ABSTRACT

Elderly is a human age group that is susceptible to disease and even has a high risk of paralysis. One of the diseases that are often experienced by the elderly is stroke. Post-stroke sufferers often experience depression caused by inability to work due to disabilities and lack of social activities, so that stroke sufferers depend on emotional and physical support from their families. Stroke is a disease that is a problem in the world, the world stroke organization notes that 85% of people have a stroke risk. In Asian countries, one of which is Indonesia, it is estimated that 500 thousand people have a stroke every year. According to the incident figures, around 2.5% died, and the rest experienced mild to severe disabilities. Stroke is the number 1 cause of serious disability and persists in the world. In Indonesia, the problem of stroke is important because the incidence rate is highest in Asian countries. The type of research used by researchers was qualitative research with a descriptive approach. This type of research was chosen because the researcher wanted to see or explore a deep understanding and meaning of what happened to individuals or groups in this context, namely the elderly who had a stroke. In this study there are four data conclusions that will be discussed by researchers. The conclusions of the four data are: (1) The physical condition of the elderly after a stroke, (2) The psychological condition of the elderly after a stroke, (3) The social condition of the elderly after a stroke, (4) The environmental condition of the elderly after a stroke

Keywords: Positive deviance, elderly



Received : Mar 12, 2023

Received in revised form : May 15, 2023

Accepted : May 19, 2023

INTRODUCTION

Elderly is a human age group that is susceptible to disease and even has a high risk of paralysis. One of the diseases that are often experienced by the elderly is stroke. Post-stroke sufferers often experience depression caused by inability

to work due to disabilities and lack of social activities, so that stroke sufferers depend on emotional and physical support from their families (Dulay, 2014). As a person gets older, they will experience setbacks, especially in the field of physical abilities related to decreased body function. Decreased body function

Correspondence : Lidya Natalia Br Sinuhaji. Faculty of Public Health, University of North Sumatra. lidyasinhaji23@gmail.com

makes the elderly vulnerable to health problems 13.

The Central Bureau of Statistics released data on the number of elderly people based on the results of the 2016 Inter-Census Population Survey, an estimated number of elderly people (age 60 and over) in Indonesia as many as 22,630,882 people. This figure is expected to increase to 31,320,066 in 2022.

The aging process is a natural process that cannot be avoided. The aging process is caused by biological, psychological and social factors that take place naturally and continuously and continuously. This can cause anatomical, physiological and biochemical changes in body tissues that can affect the function, ability of the body and soul.

Stroke is a syndrome of several signs and symptoms and the loss of the role of the focal (or global) central nervous system that occurs rapidly (seconds or minutes). These symptoms occur >24 hours or can result in death. Stroke is a sudden loss of blood flow to the brain that is usually caused by occlusion or rupture of a major cerebral artery. Disruption of blood flow to the brain and plaque in the blood vessels of the brain will interfere with blood

circulation to the brain so that it is disrupted. By one of these mechanisms it is usually associated with the focal neurological signs and symptoms that characterize the onset of cerebrovascular disease 2.

Stroke is a disease that is a problem in the world, the world stroke organization notes that 85% of people have a stroke risk. In Asian countries, one of which is Indonesia, it is assumed that 500 thousand people have a stroke each year. According to the incident figures, around 2.5% died, and the rest experienced mild to severe disabilities. Stroke is the number 1 cause of serious disability and persists in the world. In Indonesia the problem of stroke is important because the incidence rate is highest in Asian countries 3.4.

Elderly is a population at risk, stated that the population at risk is a group of people with health problems that will develop worse due to several factors. According to research on World Population Aging, in 2015 there were 901 million elderly people in the world, this number will increase by 2 billion people in 2050. From the results of the 2015 Inter-Census Population Survey (SUPAS), the number of elderly people in Indonesia is around 21.7 million or 8.5 %.

The data includes 1.6 million (52.8%) elderly women and 10.2 million (47.2%) elderly men 8.

According to research Submitted: 01/03/2021 Vol. 3 No. 1 of 2022 journal.umj.ac.id/index.php/MuJG e-issn: 2721-6837 written by Tsuryana Syarif, the elderly often experience several health problems such as hypertension, arthritis, stroke, COPD, diabetes, even coronary heart disease, which affect the degenerative delay either physical, cognitive, or emotional⁹. Geriatrics is a branch of gerontology and medicine that studies specifically the health aspects of old age, both from a promotive, preventive and rehabilitative perspective, including physical, mental and social health and disability.

The positive deviation of the elderly decreases with age and the various degenerative diseases that accompany the elderly make them need attention from those around them. The results of a study conducted by Jaracz and Kozubski (2003) stated that changes in Positive Deviance were very obvious in post-stroke patients, lack of family support, depression and physical dependence would result in changes in Positive Deviance.

From the Preliminary Study that the researchers conducted in Bandar Setia

Village, Percut Sei Tuan District, Percut Sei Tuan District, there were 11 elderly including 7 post-stroke elderly and 4 others experiencing decreased physical function. From the results of interviews that researchers conducted with the elderly, it was found that the elderly still carry out their daily activities even though they are not completely stable. From the description above, the researcher is interested in researching more about the positive deviation of post-stroke elderly in Bandar Setia Village, Percut Sei Tuan District, Percut Sei Tuan District in 2023.

MATERIAL AND METHOD

The type of research used by researchers is qualitative research with a descriptive approach. This type of research was chosen because the researcher wanted to see or explore a deep understanding and meaning of what happened to individuals or groups in this context, namely the elderly who had a stroke⁷.

In determining the participants, the researcher used a purposive sampling technique. The purposive sampling technique is a sampling technique by selecting a sample among the population according to what the researcher wants, so

that the sample can represent the characteristics of a population that has been known before¹⁴. The sample criteria the researcher chose were elderly aged 60 years and over, elderly who had experienced a stroke or post-stroke, were willing to be respondents and willing to sign consent forms and were able to communicate verbally. Participants in this study amounted to 3 people.

The data collection technique used by researchers is in-depth interviews. Words and actions are recorded through written records or via video/audio tape recorders. The interviews conducted in this study were included in semi-structured interviews. This type of

interview is included in the in-depth interview category, which in practice is broader and more in-depth than structured interviews.

To maintain the validity of the data (validity), it is carried out with a triangulation approach or method.

The triangulation method is a technique for checking the validity of data that uses something other than the data for checking purposes or as a comparison with the data. The triangulation method used by researchers is technical triangulation, which means checking data from the same source using different techniques. Data obtained by interviews is then checked by observation.

processes, namely emotional responses, coping mechanisms, self-image and appearance, self-esteem, positive and negative feelings, cognition and hope and motivation. The emotional response of the three participants when they were first diagnosed with a stroke said that they were shocked, disappointed, sad and some even could not accept the condition at that time. RP I explained that when he was diagnosed with a stroke, he preferred to just die because according to him his condition was not the same as before, so all he could do at that time was surrender, as well as RP III who said that when he

RESULT

Research participants experienced physical changes in their lives since having a stroke. The changes experienced by the three participants since they had a stroke were paralysis of the limbs and barriers to verbal communication. The self-image of each research participant before and after having a stroke was very different.

Psychological conditions after stroke The psychological condition of the elderly after stroke includes mental

first had a stroke he was shocked and could not believe that must experience such a condition. Meanwhile, when RP II first had a stroke, he said that he was sad

DISCUSSION

Post-stroke elderly social relations include personal relationships and social support. In general, the three participants had good relationships with family, friends and the people around them. This is indicated by good communication between family, friends and the people around, support from family, friends and people around, as well as good service to make the elderly more motivated. However, sometimes participants have less harmonious relationships with the people around them. RP I sometimes had feelings of annoyance with the nurses who cared for him because they did not understand RP I's condition. RP II also sometimes had feelings of annoyance with one of his elderly friends because he often spoke bad words. While RP III had an argument with one of the elderly who was near his house, RP III had been beaten. However, the three participants were able to resolve the disharmony well. The three participants rarely spent time together with fellow elderly friends such as telling

and sorry about his condition, but he wanted to go through all of his current conditions while remaining grateful.

stories together and others due to their physical limitations. RP III said that he was a person who liked to be alone.

Environmental conditions include the financial condition of the elderly, physical security, the availability of health services, the physical condition of the environment and also recreational opportunities for the elderly after a stroke. The financial condition of the three participants depended on their families. All three participants used to be able to make their own money. However, since having had a stroke, they are very dependent on their family, and even the costs of living in the orphanage are borne by the family, so that the thought arises in them that they will get well soon, even though sometimes there is a feeling of wanting to give up.

Discussion

According to WHO (2017) Positive Deviance is a person's understanding of their position in life in terms of the context of the value system and culture in which they live that relate to their goals, hopes, pleasures and concerns in the form of physical, psychological conditions and

health, level of independence, social relationships, spiritual and environmental. So Positive Deviance assesses the extent to which a person can feel and enjoy the occurrence of all events in his life so that his life becomes prosperous (Rapley, 2013). If a person can achieve a high Positive Deviance, then the individual's life leads to a state of well-being, conversely if a person achieves a low Positive Deviance, then the individual's life leads to a state of ill-being (Brown, 2014). Hardywinoto and Setiabudhi (2015) also stated that welfare is one of the parameters for the high Positive Deviance of the elderly so that they can enjoy their old age. In this study there are four data conclusions that will be discussed by researchers. The four conclusions of the data are: (1) The physical condition of the elderly after a stroke, (2) The psychological condition of the elderly after a stroke, (3) The social relations of the elderly after a stroke, (4) The environmental conditions of the elderly after a stroke.

The social relations of elderly post-stroke research results show that each research participant has a good relationship with family, friends, and the people around him. However, each participant stated that they discussed or

told stories with their fellow elderly that actually motivated them. Most of their time is in the room because of their physical weakness, which makes them rarely interact with each other. Hamidah (2014) states that functional limitations in carrying out daily activities in post-stroke sufferers are related to reduced sensitivity and control and also reduce the ability to be involved in establishing positive social relationships. The results of this study are also supported by research conducted by Kariasa (2019) that changes in physical condition in stroke sufferers make sufferers experience limitations in mobilization so that social relations with the people around them are disrupted.

The results of this study also state that the elderly after stroke often receive support from family, friends and people around them. They feel happy and satisfied with the support provided. The support given from family, friends and people around is very important to the three research participants. The results of this study are supported by research conducted by Schub & Caple (2010) that in general, stroke patients who do not receive support from their families will experience a negative psychological impact in the form of post-stroke depression, so that social support plays an

important role in helping and awakening individuals in living their lives. and meeting psychological needs in dealing with traumatic and stressful events. In addition, social support is one of the factors that play a role in increasing self-acceptance in post-stroke sufferers. This is in accordance with research conducted by Masyithah (2012) which states that social support and self-acceptance have a significant relationship in post-stroke sufferers. This means that there is a positive relationship between social support and self-acceptance, this means that the higher the social support given to post-stroke sufferers, the higher the self-acceptance raised by the sufferer and vice versa, if the social support given is lower, then the acceptance self that is raised the lower the sufferer.

Based on the results of the study, the environmental conditions of post-stroke elderly found that the financial condition of each post-stroke participant was not as good as it was before having a stroke. The financial source of each participant depends on the family. The results of this study are in line with research conducted by Handayani (2009) that post-stroke sufferers who were previously able to work and earn an income are unable to do so anymore due

to their physical limitations so they cannot work and must burden their families financially, and result in an economic burden. higher for families. Based on the research results, the weakness of the physical condition makes the elderly after stroke rarely take the time to do recreational activities, most participants spend their free time just being in the room, watching TV or telling stories with caregivers. These results are supported by research conducted by Handayani (2009) that stroke sufferers who previously could enjoy life with relaxation activities that were preferred as a means of recreation/entertainment, but after a stroke experienced changes and even became very limited.

CONCLUSION

In the psychological domain, the elderly are able to adjust to the conditions they are experiencing now through acceptance of current conditions, making efforts that can help their recovery process, being able to overcome various problems in a positive way and have hope and motivation to survive and recover. However, due to declining physical condition, there are elderly people who still consider themselves insignificant due

to dependence on other people and still have feelings of anxiety and worry. In the domain of social relations, it can be seen that with a decrease in physical abilities in the elderly, it limits interaction between the elderly and those around them, even so, the elderly still perceive that their relationships with other people are well established and always receive support from family, friends and other people. people around. In the environmental domain, it is described that post-stroke elderly feel safe and comfortable because the physical condition of their residence is clean and quiet and the availability of sufficient information motivates the elderly to be enthusiastic about carrying out their activities, but vice versa if the environment is not suitable, such as facilities and infrastructure, the elderly often depend on other people and family. It is hoped that health workers can work together with the orphanage to provide health services and programs that can support Positive Deviance for the elderly.

ACKNOWLEDGMENT

Thus I would like to thank Percut Sei Tuan Village for allowing the data collection process, to the lecturers who have guided this research.

REFERENCES

- Azizah, L. M. (2011). *Keperawatan Lanjut Usia*. Edisi 1. Yogyakarta: Graha Ilmu
- Badan Pusat Statistik Jakarta Pusat.(2010). *Statistik Indonesia Tahun 2010*. Jakarta Pusat: Badan Pusat Statistik
- Bastaman, H. D. (2008). *Logoterapi: Psikologi untuk menemukan Makna Hidup dan Meraih Hidup Bermakna*. Jakarta: PT. Raja Grafindo Persada
- Batticaca, F. B. (2008). *Asuhan Keperawatan Klien dengan Gangguan Sistem Persarafan*. Jakarta : Salemba Medika
- Brown, I., Renwick, R., Nagler, M. (2004). *Conceptual Approaches, Issues, and Applications. Quality of Life in Health Promotion and Rehabilitation*. London: Sage Publications, 24, 37-52.
- Brunner and Suddarth. (2002). *Buku Ajar Keperawatan Medikal Bedah*. edisi 8 volume 2. Jakarta : EGC.
- Constantinides, E. and Holleschovsky, N. I. (2016) 'Impact of online product reviews on purchasing decisions', *WEBIST 2016 - Proceedings of the 12th International Conference on Web Information Systems and Technologies*, 1(August), pp. 271–278. doi: 10.5220/0005861002710278.
- Creswell, J.(2010). *Research Design Pendekatan Kualitatif, Kuantitatif dan Mixed*. Yogyakarta: Pustaka Pelajar.
- Depkes RI. (2013). *Riset Kesehatan Dasar Tahun 2013*. Badan Penelitian dan Pengembangan Kesehatan Departemen Kesehatan RI Dinas Kesehatan Kota Salatiga. (2015). *Peringatan Hari Lansia 2015*. [Online] Diakses pada tanggal 18

- Februari 2016
<http://www.dkksalatiga.org/beritadankegiatan/view/peringatanhari-lansia-20153/#.VryBhbR97IU>
- Donald, A (2009). Quality of life. UK: Hayward Medical Communications, 2, 11-26.
- Efendi, F & Makhfudli. (2009). Keperawatan Kesehatan Komunitas: Teori dan Praktik dalam Keperawatan. Jakarta: Salemba Medika.
- Efendi, F & Makhfudli. (2009). Keperawatan Kesehatan Komunitas: Teori dan Praktik dalam Keperawatan. Jakarta: Salemba Medika.
- Gillen. G. (2006). Coping during inpatient stroke rehabilitation: An exploratory study. American Journal of Occupational Therapy, 60, 136–145.
- Meleong. (2012). *Metodologi Penelitian Kualitatif*. Bandung: PT. Remaja Rosdakarya.
- Nursalam. (2008). *Konsep dan Penerapan Metodologi Penelitian Ilmu Keperawatan: Pedoman Skripsi, Tesis, dan Instrumen Penelitian Keperawatan* (2nd ed.). Jakarta: Salemba Medika.
- Suardiman, S. 2011. Psikologi Usia Lanjut. Yogyakarta: Gadjah Mada University Press.
- Sugiyono. (2014). *Memahami Penelitian Kualitatif*. Bandung: Alfabeta.