

**PENGEMBANGAN MODEL SAVE GERIATRI HOMECARE BERBASIS KELUARGA
UNTUK MENINGKATKAN PENGETAHUAN DAN SIKAP
CAREGIVER DALAM PERAWATAN LANSIA**

DISERTASI



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Abstrak

Pelayanan homecare lansia di Kota Batam masih belum optimal, ditandai dengan belum adanya pelatihan caregiver (100%), keterbatasan kunjungan rumah (100%), serta belum tersedianya modul edukasi keluarga (100%). Pelayanan yang diberikan masih terbatas dan belum disertai monitoring berkelanjutan. Selain itu, sebagian keluarga (50%) belum memahami perawatan lansia, dan masih terdapat persepsi bahwa penyakit pada lansia merupakan proses alami penuaan (30%). Kondisi tersebut berdampak pada tingginya masalah kesehatan lansia, seperti depresi (60%), risiko jatuh (60%), gangguan kognitif (70%), malnutrisi (50%), dan ketergantungan (50%). Penelitian ini bertujuan mengembangkan Model SAVE Geriatri Homecare Berbasis Keluarga untuk meningkatkan pengetahuan dan sikap caregiver dalam perawatan lansia. Metode penelitian menggunakan mixed methods dengan pendekatan ADDIE (Analysis, Design, Development, Implementation, Evaluation). Pada tahap Analysis ditemukan faktor-faktor yang memengaruhi pengetahuan dan sikap caregiver, yaitu pendidikan, status ekonomi, peran perawat, pola komunikasi, dan mutu fasilitas kesehatan ($p < 0,05$). Tahap Development menunjukkan bahwa model yang dikembangkan memiliki tingkat validitas yang sangat tinggi ($\geq 92\%$), sedangkan tahap Implementation dan Evaluation menunjukkan adanya peningkatan yang signifikan pada pengetahuan dan sikap caregiver keluarga setelah implementasi model ($p = 0,000$). Penelitian ini membuktikan bahwa Model SAVE Geriatri Homecare Berbasis Keluarga efektif dalam meningkatkan pengetahuan dan sikap caregiver keluarga perawatan lansia di rumah. Model ini berpotensi menjadi strategi intervensi berbasis keluarga dan kearifan lokal dalam memperkuat pelayanan kesehatan lansia di tingkat komunitas.

Kata Kunci: *Caregiver Keluarga; Pengetahuan; Sikap; perawatan lansia*

DEVELOPMENT OF A FAMILY-BASED SAVE GERIATRIC HOMECARE MODEL TO ENHANCE FAMILY CAREGIVERS' KNOWLEDGE AND ATTITUDES TOWARD ELDERLY CARE

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Abstract

Homecare services for older adults in Batam City remain suboptimal, as evidenced by the absence of caregiver training programs (100%), limited home visits (100%), and the lack of family educational modules (100%). The services provided are still limited and are not supported by continuous monitoring. In addition, some families (50%) have insufficient knowledge regarding elderly care, and there is still a perception that illnesses among older adults are a natural part of the aging process (30%). These conditions contribute to a high prevalence of health problems among older adults, including depression (60%), risk of falls (60%), cognitive impairment (70%), malnutrition (50%), and dependency (50%). This study aimed to develop the Family-Based SAVE Geriatric Homecare Model to improve family caregivers' knowledge and attitudes toward elderly care. This study employed a mixed-methods approach using the ADDIE model (Analysis, Design, Development, Implementation, and Evaluation). The Analysis phase identified several factors influencing caregivers' knowledge and attitudes, including educational level, economic status, nurses' roles, communication patterns, and the quality of health facilities ($p < 0.05$). The Development phase demonstrated that the model had a very high level of validity ($\geq 92\%$), while the Implementation and Evaluation phases showed significant improvements in the knowledge and attitudes of family caregivers following the implementation of the model ($p = 0.000$). This study demonstrates that the Family-Based SAVE Geriatric Homecare Model is effective in improving family caregivers' knowledge and attitudes as well as enhancing healthcare providers' competencies in supporting home-based elderly care. The model has the potential to serve as a family-centered and culturally based intervention strategy to strengthen elderly healthcare services at the community level.

Keywords: Family caregivers; geriatric homecare; knowledge; attitudes; elderly