

## ***Relationship between Family Support and Aggregate Activity of Adults in Visits to Integrated Coaching Post (Posbindu)***

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**Abstract:** *The level of activeness of integrated coaching post (posbindu) visits in Muncar Village, Susukan District is still relatively low, with a value of 50,4% of the 127 integrated coaching post (posbindu) participants who were not active in visiting integrated coaching post (posbindu). The inactivity of participants in participating in integrated coaching post (posbindu) activities is caused by several factors, one of which is a reinforcing factor, namely the lack of family support. The purpose of this study was to determine family support with adult aggregate activity in visits to integrated coaching post (posbindu) in Muncar Village, Susukan District. This research method quantitative research with cross sectional. The population of 127 integrated coaching post (posbindu) participants using simple random sampling technique and Inclusion criteria: the aggregate of adults aged 17-55 years, registered in integrated coaching post (posbindu) activities live with family members obtained 67 respondents. The research instrument used a questionnaire containing 18 questions about family support and the attendance list for posbindu participants from February 2019 - to January 2020. The analysis bivariate technique used test analysis data used Chi Square because the data contribute normally. The results of the study the majority of family support is lacking as many as 33 people or 49.3%. The activity level of the majority of respondents is inactive as many as 37 people or 55.2%. The results of the correlation test between family support and active visits in the adult aggregate are p-value 0.001. The conclusion is that there is a relationship between family support and adult aggregate activity in visits to integrated coaching post (posbindu) in Muncar Village, Susukan District. The recommendation for integrated coaching post (posbindu) in Muncar Village is to increase knowledge about the importance of family support so that participants can actively attend every month so that their health can be controlled regularly every month.*

**Keywords:** *Adult, Cross Sectional Studies, Family, Questionnaires*

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### **INTRODUCTION**

Adults are at risk for hereditary diseases from their parents who have non-communicable diseases such as hypertension, diabetes mellitus, cancer, tuberculosis, and others (Indonesian Ministry of Health, 2020). Cases of non-communicable diseases in Indonesia in 2018 were 75% consisting of heart disease 35%, cancer 12%, COPD 6%, diabetes mellitus 6%, and other diseases 15% (Indonesian Ministry of Health, 2019). Adults are at risk for hereditary diseases from their parents who have non-communicable diseases such as hypertension, diabetes mellitus, cancer, tuberculosis, and others. Detection must be carried out on an aggregate of adults who are at risk regularly because the sooner the risk of disease is found, the sooner the prevention of hereditary diseases will be found, the early symptoms of the disease will be found, the easier it will be to treat the disease (Indonesian Ministry of Health, 2020). Preventive and promotive can be done through UKBM-based health service facilities, namely community-based health efforts through the integrated coaching post (posbindu) and disease prevention. Foster Post integrated coaching post (posbindu) activities are carried out on an aggregate of adults with ages ranging from 17-55 years and are routinely carried out once a month (Indonesian Ministry of Health, 2020).

In the implementation of integrated coaching post (posbindu) activities, examinations are carried out for weighing, measuring height, measuring blood pressure, health counseling, simple laboratory examinations (blood sugar levels, uric acid, cholesterol), mental and emotional status examinations, simple treatment and referral efforts if needed as well as other activities, social, One of the problems

faced by the community, among others, is the lack of support and care from family and community members for routine health checks so it has an impact on the level of community visits to integrated coaching post (posbindu) (Umayana & Cahyati, 2015). The family is a place to determine the level of individual commitment to responsibilities in care or supportive behavior so that involvement is beneficial for health, care recipients, and supporters (Gopalan & Laura, 2013). Family support provides resources that can help individuals engage in healthier behaviors, increase self-esteem and lead to higher well-being and health (Thomas et al., 2017).

Available family support will form active behavior with the integrated coaching post (posbindu) environment where activities are carried out. Aggregate adults will seek available support from others to motivate them so that the disease from their parents does not pass to them. The adult aggregate will usually ask for support from the closest family members such as father, mother, husband, wife, or siblings. This behavior is usually indicated by a request to be waited on and accompanied during the activity (Kholifah, 2016). Research conducted by Dian (2017) Family support is the main component that plays a role in encouraging public interest or willingness to be active in social activities such as integrated coaching post (posbindu). Families can be a strong motivator if they are always available to prepare equipment, accompany and take them to the integrated coaching post (posbindu), remind the integrated coaching post (posbindu) schedule and participate in preventing the risk of hereditary diseases along with the adult population.

Good family support can increase activity. The role of family members can also increase knowledge about the importance of attending integrated coaching post (posbindu) regularly so that other family members can participate in health checks at routine integrated coaching post (posbindu) every month. Family is the strongest motivator if family members always provide time as a companion, introduction and always remind the schedule of visits to integrated coaching post (posbindu) (Umayana & Cahyati, 2015).

According to research, family functions as a strong motivator in participating in PTM integrated coaching post (posbindu) activities if in each activity they always provide themselves to accompany, deliver or remind PTM integrated coaching post (posbindu) schedules. The existence of family members has a role, namely in efforts to prevent disease through integrated coaching post (posbindu) health service institutions. Family involvement affects the feeling of comfort and feeling of getting attention or care if in activities always doing positive things (Trilianto et al., 2020).

A introduction study conducted in Muncar Village obtained data on 127 adult integrated coaching post (posbindu) participants. From the data of integrated coaching post (posbindu) participants, 40.3% of active participants in integrated coaching post (posbindu) activities were found and 59.7% of inactive participants. Family support for integrated coaching post (posbindu) participants was obtained from interviews with 10 integrated coaching post (posbindu) participants, 7 out of 10 said that their family members never provided information about integrated coaching post (posbindu), always prepared their equipment, were never accompanied and delivered at all, and were never reminded of the schedule for the posbindu implementation. The novelty of this study is that previous research carried out family support for the elderly, researchers focused on aggregate adults because they also need support from their families to avoid non-communicable diseases.

Previous research stated that family support was focused on the elderly, in this study the importance of adults getting family relationships in an early detection effort to find out disease early through the integrated coaching post (posbindu) program. The purpose of this study was to determine the relationship between family support and adult aggregate activity during visits to integrated coaching post (posbindu) in Muncar Village, Susukan District.

## **METHOD**

The type of research used is quantitative research with a correlative approach. The time approach method in this study is a cross-sectional method. This research was conducted in Muncar Village, Susukan District, Semarang Regency. This research was carried out on November 11, 2021. The population in this study was an aggregate of adults (17-55 years old) integrated coaching post (posbindu)

participants in Muncar Village, Susukan District, Semarang Regency from February 2019 - January 2020. The total population in this study was 127 people. The sample of this research is 67 by using the probability sampling technique of simple random sampling with taking writing on paper numbers 1-127 and then random numbers are taken as many as 67 numbers. After taking 67 papers, 15 participants were not present, then 15 random samples were taken and then researcher check data of 67 respondents with conducted interviews, observations and saw data from cadres to ensure that respondents match with criteria. Inclusion criteria: the aggregate of adults aged 17-55 years, registered in integrated coaching post (posbindu) activities with family members, residing permanently in Muncar Village. Exclusion criteria: integrated coaching post (posbindu) participants suffer from diseases that require that they cannot come to integrated coaching post (posbindu), adult aggregate lives alone. Variable used independent variable is family support and dependent variable is active visit.

Data collection techniques are carried out by questionnaire and visited book from February 2019 until January 2020 active respondent if attendance is more than 6 times (7-12x) a year meanwhile not active if attendance is less than 6 times (1-6x) a year. Technique data analysis are data processing used editing, coding, data entry, tabulating and data analysis using Chi-Square test. Questionnaire consisting of 18 lists of questions about family support sourced from Nursalam and secondary data in the form of a list of attendance or attendance by recapitulating the frequency of attendance in a year in Muncar Village, Susukan District, Semarang Regency in February 2019 – January 2020. The instrument validity test was carried out in the Reksosari village. The results obtained an average value of 0.001 or  $p < 0.05$  while the Pearson correlation (r) obtained an average value of 0.703 or r table 0.337. Meanwhile, for the reliability test, it was found that the Alpha coefficient was 0.761. The study was approved by the Health Research Ethics Committee Dr. Moewardi General Hospital with number No. 983 / X / HREC / 2021 with apply principal ethics nonmaleficence and confidentiality. The course of the research starts from distributing questionnaires to respondents who meet the inclusion criteria.

The researcher was assisted by one enumerator with criteria understand the contents of the questionnaire, able to well communicated and can to socialized in filling out the respondents who had difficulties in filling out the questionnaire. The enumerators in this study are friends of the researcher. Enumerators are tasked with assisting in filling out the questionnaire. Before doing research, enumerators get information on how to fill out for 60 minutes from the author. After obtaining 67 respondents, the researcher gave informed consent sheets and questionnaires. The researcher explained the procedure for filling out and supervising the filling out of the questionnaire. After the questionnaire was filled in by the respondent, the questionnaire was taken and then re-examined one by one to see the completeness of the answers, if not filled in, the respondent was asked to return to complete the questionnaire. This research was conducted in groups with the author attending integrated coaching post (posbindu) event in Muncar Village.

## RESULTS

The results of this study are presented at table 1, table 2 and table 3. Table 1 is about distribution of respondent's characteristics. The other table is table 2 about the results of family support and the last is table 3 about participation of respondents.

### Characteristics of Respondents

Characteristics of respondents, namely the age of most have middle adulthood (36-45 years) with a value of 40.3% or 27 respondents, the most gender is female at 74.6% or 50 respondents, the education level of respondents obtained the most results, namely SD/ The equivalent is 38.8% or 26 people, the majority of respondents work as farmers/laborers as many as 32 people or 47.8%, the status of residence of the most respondents is living with their husband or wife with a total of 56.7% or 38 respondents and the respondent's closest people the most, namely husband or wife as many as 43 people or 64.2%.

Table 1. Distribution of respondent's characteristics

Characteristics	Frequency	Percentage (%)
<b>Age</b>		
Early adulthood (26-35 years old)	15	22.4
Middle adulthood (36-45 years)	27	40.3
Late adult (46-55 years)	25	37.3
<b>Gender</b>		
Man	17	25.4
Woman	50	74.6
<b>Level of education</b>		
No school	7	10.4
SD/Equivalent	26	38.8
Middle School/Equivalent	22	32.8
High School/Equivalent	12	17.9
<b>Job-status</b>		
Labor / Farmer	32	47.8
Not Working/ Retired	13	19.4
Entrepreneur	12	17.9
Private	10	14.9
<b>Living Status</b>		
Big family	12	17.9
Child or Son-in-law	9	13.4
Husband or Wife	38	56.7
Grandchild	2	3
Mother or Father	6	9
<b>Close related person</b>		
Husband or Wife	43	64.2
Mother or Father	13	19.4
Child or Son-in-law	9	13.4
Grandchild	2	3

**Family support**

Table 2. Distribution of family support

Family Support	Frequency	Percentage (%)
Well	16	23.9
Enough	18	26.9
Not Enough	33	49.3
Total	67	100.0

**Active Visits**

Table 3. Distribution of active visits

Posbindu visit	Frequency	Percentage (%)
Active	30	44.8
Not Active	37	55.2
Total	67	100.0

Most respondents are not active in participating in integrated coaching post (*posbindu*) activities with value 55.2%.

**Cross Tabulation Family Support and Visiting Activities**

Table 4. Cross Tabulation Distribution of family support and active visits

Family support	Active visit				Total		p
	Not active		Active		N	%	
	N	%	N	%			
Well	3	8.1	13	43.3	16	23.9	0.001
Enough	4	10.8	14	46.7	18	26.9	
Not enough	30	81.1	3	10.0	33	49.3	
Total	37	100.0	30	100.0	67	100.0	

It is known from 67 respondents that there are 3 categories of support, namely family support as many as 16 people (23.9%) have good family support, where there are 13 active respondents to active integrated coaching post (*posbindu*) and 3 inactive respondents. Enough family support as many as 18 people (26.9%) where there are 14 active respondents and 4 inactive respondents. The category of family support is lacking as many as 33 people (49.3%) whereas many as 3 active respondents while 30 people are not active.

The correlation test results = 33.531 and p = 0.001. Thus Ho is rejected and Ha is accepted, which means that there is a relationship between family support and adult aggregate activity in visits to integrated coaching post (*posbindu*) in Muncar Village, Susukan District.

**DISCUSSION**

The distribution of adult aggregates shows that most of them are middle-young groups. From the results of the interview, it was found that middle-aged adults were participants who experienced complaints of headaches, high blood pressure, pain, and so on and who experienced a decrease in physical condition. The middle age group, in general, has a decreased physical condition so the 36–45-year-old group tends to behave healthily and actively in integrated coaching post (*posbindu*) activities. Adult women tend to go to integrated coaching post (*posbindu*) more than men because there are more women than men (Dian, 2017). This condition is by following in under data from the Central Statistics Agency which states that the number of adults in Indonesia based on gender is 45,999,000 people while the number of males is 12,882,900. The level of knowledge of respondents tends to be low, perhaps because in the past school infrastructure was not available as it is now. A limited level of education will affect a healthy lifestyle (Suhariyanto, 2020). According to Dian (2017), the influential factor in health behavior is the level of education. The results of education help shape the pattern of thinking, perception patterns, and attitudes of one's decision-making. The profession carried out by adults in Muncar Village is labor/farmer because most of the respondents have agricultural land and jobs to meet their needs. This is supported by research which says that the inactivity of adults in participating in integrated coaching post (*posbindu*) activities is due to the majority working to meet their daily needs. The status of living with a husband or wife is also influenced by the status of the family who always accompanies and supports so that a relationship can be established that can influence and motivate in participating in activities in integrated coaching post (*posbindu*) (Harnilawati, 2013). According to research residence status is very influential on the frequency of the active level of adults in visiting integrated coaching post (*posbindu*). Status of living with family members can play a role in growing interest or availability to participate in integrated coaching post (*posbindu*) activities (Fridolin et al., 2021). Based on the results of the study, it was found that the majority of respondents had the closest person as a friend for stories of happy and sad complaints, namely husband or wife with a total of 43 people (64.2%). The closest person to the partner, namely the husband or wife, is very important in influencing respondents to be active in visits to *posbindu*. According that the closest people can take careof, improve and maintain mental

condition and status. The closest person also acts as a motivator and supporter and acts as a facilitator for the spiritual needs of adults (Paddy, 2013).

Lack of family support for adults to participate in posbindu activities because adults think that the family does not take the time to remind the delivery schedule and the family does not provide information about integrated coaching post (posbindu) activities because they are busy at work and do not have time to provide support before leaving for work. There is a role for family members in conducting focused talks, providing encouragement to keep participating in activities in the community (community service) checking health regularly every month, assisting in transportation, helping in economic matters, giving love, and providing time and attention (Fridolin et al., 2021). Adequate family support means that there are still respondents who do not receive support from their families for their activity in participating in integrated coaching post (posbindu) activities every month. Family members such as husband and wife children have work activities to meet family needs. Even the respondent's children did not provide support such as information support about reminding the schedule for the posbindu reminding the importance of controlling their health and reminding them to listen to suggestions from village midwives and cadres because integrated coaching post (posbindu) activities are held in the morning while in the morning they go to work and sometimes do not have time to provide such support. That the family functions as a provider of information. Information advice and instructions to make respondents comply with the advice include providing information about the schedule for the integrated coaching post (posbindu) implementation, the benefits of participating in the integrated coaching post (posbindu) as well as facilitating such as delivering and preparing the necessary equipment needs (Paddy, 2013). Adults who have good support because they think health is very important for their lives. Families are aware of taking the time to deliver to remind the schedule and provide opportunities to come to the integrated coaching post (posbindu). In line with Dian's research (2017), factors that influence family support include the extent to which family functions can influence family members when experiencing health problems and providing assistance in meeting needs.

Factors that affect the level of activity of adult aggregate visits include the factor of busywork. The results of observations obtained for adults who rarely participate in integrated coaching post (posbindu) activities obtained information that inactivity in participating in integrated coaching post (posbindu) activities was due to busy work, namely most of them became farmers or laborers to help meet their daily needs and many posbindu participants often forgot the schedule of integrated coaching post (posbindu) activities. Every month. This activity is because adults have good support, especially for families and communities for integrated coaching post (posbindu) activities. Respondents who are active in activities know the importance of carrying out routine health checks so that the behavior that arises is active in participating in activities to integrated coaching post (posbindu).

Testing the research hypothesis, the analysis concludes that there is a relationship between family support and adult aggregate activity in participating in integrated coaching post (posbindu) activities in Muncar village. Based on the results of the study, there is a relationship between family support and the activeness of adult aggregate visits to integrated coaching post (posbindu) because there are several factors, namely the existence of reinforcing factors for family support which include forms of assessment, instrumental, informational, and emotional support such as family members providing support to actively participate in activities, reminding the schedule for the implementation of integrated coaching post (posbindu), preparing equipment and accompanying by delivering directly to integrated coaching post (posbindu) which causes family functions to be carried out properly, namely being able to influence and respondents become motivated in changing behavior to be active in integrated coaching post (posbindu) activities.

A family is a place that is formed from blood ties or marital ties that function as a place to establish an emotional relationship to get support in the form of care, empathy, trust, affection, a place to complain and care. The existence of an inner bond between the respondent and family members can foster a sense of affection, mutual care that can foster a sense of worry if a family member is sick and think more about the importance of health for family members. According explains that there are 5 functions of the family, one of which is the health care function which includes the family's role in carrying out care to prevent

health problems and or taking care of sick family members such as parents who provide food, clothing, shelter, health care and protection from harm. A sense of comfort, trust, and peace can be generated from emotional support that can help individuals to overcome the problems of various emotional reactions they get. The form of family support has several forms of support which consist of assessment support, instrumental support, informational support and emotional support (Friedman, 2010). From the results of the interview, it was also found that some respondents not receive any support at all to provide advice on the importance of conducting health checks through integrated coaching post (posbindu). The results of this study are reinforced by previous research from Dian (2017) that there is a significant relationship between family support and active visits to integrated coaching post (posbindu) a sense of trust and peace can be generated from emotional support that can help individuals to overcome the problems of various emotional reactions that are obtained. From the results of the interview, it was also found that some respondents did not receive any support at all to provide advice on the importance of conducting health checks through integrated coaching post (posbindu). The results of this study are reinforced by previous research from Dian (2017) that there is a significant relationship between family support and active visits to integrated coaching post (posbindu). A sense of trust and peace can be generated from emotional support that can help individuals to overcome the problems of various emotional reactions that are obtained. From the results of the interview, it was also found that some respondents did not receive any support at all to provide advice on the importance of conducting health checks through integrated coaching post (posbindu). The results of this study are reinforced by previous research that there is a significant relationship between family support and active visits to integrated coaching post (posbindu) (Dian, 2017)(Puspitasari, 2014).

A similar study was conducted by Dian in 2017 there are differences with author in age of respondents. Dian research use elderly age in elderly Posyandu while the author used the aggregate adults in integrated coaching post (posbindu). It was found that there was significant relationship between family support and active visits to the posyandu for the elderly.

## CONCLUSION

The characteristics of the respondents in this study were the age at which the most had middle adulthood (36-45 years), gender showed that the female sex was more than the male sex, the education of the respondents was obtained the most, namely elementary school/equivalent, most of the respondents' occupations were farmers/labor, the majority of respondents lived with their husbands or wives and the closest people to the respondents were husbands or wives. Family support obtained by respondents in integrated coaching post (posbindu) activities, many respondents fall into the category of receiving less support than sufficient and less support. Most of the adult aggregates are not active in participating in integrated coaching post (posbindu) activities because low support can affect a persons behavior. There is a relationship between family support and adult aggregate activity in visits to integrated coaching post (posbindu) in Muncar Village, Susukan District.

Recommendation for health services should make efforts such as outreach to each family related to the importance of family support in conducting examinations at integrated coaching post (posbindu) participants can be active in carrying out activitied every month. Cadres are expected to increase the role of duties such as midwife and cadres to be more an active in conducting house to house visits to directly know the condition of public health and examinations for participants with disabilities to keep their health under control.

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