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# The Effect of Education and Economic Ability on Elderly Care through Health Services in the Durikumba Health Center Work Area, Karossa District, Central Mamuju Regency

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## Abstract

This study examines and analyses the effect of education and financial ability on elderly care through health services in Durikumba Public Health Center, Karossa District, Central Mamuju Regency. This research design uses a quantitative approach with survey research design and path analysis, namely determining the direct and indirect effect of the variables to be studied. The population in this study were all families who have or care for older people aged 60 years to 75 years and over as many as 273 populations recorded as caring for the elderly in Durikumba Public Health Center's working area Karossa District, Central Mamuju Regency. The number of samples in this study using accidental sampling where the determination of the model using the Slovin formula with a tolerable error rate of 0.05%, the number of pieces in this study were 162 respondents. The results showed that the financial ability of elderly care did not have a significant effect. In contrast, education on elderly care through health services had a positive and significant effect, and education and economic capacity for health services had a positive and significant effect.

## Keywords
Education, Economic Ability, Health Services, Elderly Care

## 1. Introduction

Globally, the population aged over 60 years in 2014 was 12% of the total global population (UNFPA, 2015). In Indonesia, the problem of elderly care is significant to note. The first reason is that the number of older adults has increased significantly during the last forty years, by the increase in the number of older adults in 1970 by 5 million to 18 million in 2010. This number is projected to increase to more than 71 million in 2050 (UI Demographic Institute and HelpAge International, 2012). There are five problems faced by the elderly (Coordinating Ministry for Human Development and Culture, 2017), namely economic, psychological, social, physical, and psychological problems. BPS

(2018) states that in 2017 there was 48.91 percent of older adults in Indonesia experienced complaints of illness. This has become a more serious problem because many older adults have not been touched by government programs (Astuti et al., 2016).

According to Law number 5 of 2007 article 10 paragraph (1), health services are intended to maintain and improve the health status and ability of the elderly so that their physical, mental, and social conditions can function naturally. The elderly who does not get good health services will pose many risks, one of which is the risk of falling elderly, which causes fractures. For this reason, it is necessary to increase the degree of optimal and maximum health services in the available health service agencies. The results of previous research conducted by Nurvi Susanti and Mitra (2011), the results of multivariate analysis showed that the most dominant variable influencing the utilization of Integrated Healthcare Center services for the elderly was the attitude of the elderly. Elderly who has a negative attitude are six times more at risk of not utilizing the elderly Integrated Healthcare Center service than elderly who have a positive attitude after being controlled by attitude, distance traveled, family support, cadre motivation, and education.

Education is part of the process of acquiring better knowledge. Families who have a pretty good education will be more optimal in caring for the elderly, with health services to improve health status and restore health to every individual, family, group, or community who needs it. Elderly care is an effort to increase the comfort of the elderly (offering liked and attentive things), involving other families during treatment, and bringing them to health services either to the hospital or the nearest health center/clinic.

## 2. Methods

This study uses a quantitative approach with survey research design and path analysis to determine the variables' direct and indirect effects to be studied. The research location is in Durikumba Public Health Center, Karossa District, Central Mamuju Regency. The research period will be carried out for approximately three months, namely from August to October 2020. The population is all families that have or care for older adults aged 60 years to 75 years and over as many as 273 populations recorded as caring for the elderly in the working area of Durikumba Public Health Center. Karossa District, Central Mamuju Regency, where samples use the Slovin formula (accidental sampling) with 162 respondents.

## 3. Results

### 3.1 Validity Test

It is known that r-table uses a significant level of $\alpha = 0.05\%$ with $n = 162$ then obtained the value of r-table = 0.165. The results of the validity test of each variable can be described in the following Table 1:

Table 1. Item Validity Test Results – Research Variable Items

| Variable | Statement Items | R – Calculate | R – Table | Information |
|---|---|---|---|---|
| Education (X1) | X1.1 | 0.893 | 0,165 | Valid |
| | X1.2 | 0.869 | | Valid |
| | X1.3 | 0.901 | | Valid |
| | X1.4 | 0.906 | | Valid |
| Economic Capability (X2) | X2.1 | 0.872 | | Valid |
| | X2.2 | 0.875 | | Valid |
| | X2.3 | 0.847 | | Valid |
| | X2.4 | 0.868 | | Valid |
| Health Care (Y1) | Y1.1 | 0.869 | | Valid |
| | Y 1.2 | 0.835 | | Valid |
| | Y 1.3 | 0.886 | | Valid |
| | Y 1.4 | 0.868 | | Valid |
| | Y 1.5 | 0.776 | | Valid |
| Aged Care (Y2) | Y 2.1 | 0.845 | | Valid |
| | Y 2.2 | 0.644 | | Valid |
| | Y 2.3 | 0.893 | | Valid |

| | | | | |
|---|---|---|---|---|
| | Y 2.4 | 0.834 | | Valid |
| | Y 2.5 | 0.880 | | Valid |

**Source:** Primary Data Processed, 2021.

The validity test results in table 1 show that the item statement of each variable in this study is valid. The R-value indicates this – calculate ≥ 0.165 (r - table). Thus, all items on the variables of education (X1), economic capability (X2), health services (Y1), and elderly care (Y2) are declared valid and can be used as research instruments.

### 3.2 Reliability Test

Reliability test results can be presented in the following Table 2:

Table 2. Reliability Test Results

| Variable | Cronbach's Alpha | Cut Of Point (0,6) | Information |
|---|---|---|---|
| Education (X1) | 0,839 | 0,60 | Reliable |
| Economic Capability (X2) | 0,833 | 0,60 | Reliable |
| Health Care (Y1) | 0,814 | 0,60 | Reliable |
| Aged Care (Y2) | 0,809 | 0,60 | Reliable |

**Source:** Primary Data Processed, 2021.

Based on the reliability test results shown in Table 2, all question items on the variables of education, financial ability, health services, and elderly care. The Cronbach's Alpha value is obtained> 0.60 (0.839; 0.833; 0.814; 0.809), so it can be concluded that All question items in this study have met the reliability requirements or, in other words, that all variables have a level of reliability (reliable). Data processing in path analysis analyses education and financial ability towards elderly care through health services using two multiple linear regression models with SPSS version 24. each of which will be described in the data processing results shown in the Path Coefficient. The model the Path Coefficient of Model II and I are below:

### 3.3 The model I Path Coefficient

Refers to the Model I Regression output in the following "coefficients" Table 3:

Table 3. Path Analysis Result Model I

| Model | | Unstandardized Coefficients | | Standardized Coefficients | t | Sig. |
|---|---|---|---|---|---|---|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 4.147 | 1.086 | | 3.820 | .000 |
| | Education (X1) | .538 | .121 | .445 | 4.445 | .000 |
| | Economic Capability (X2) | .459 | .129 | .357 | 3.572 | .000 |

a. Dependent Variable: Health Care (Y1)

**Source:** Primary Data Processed, 2021.

Based on the results of the analysis of the output analysis of model 1 path analysis in the table section "coefficients," it can be known that the significance values of both variables are X1 = 0.000 < α = 0.05 and X2 = 0.000< α = 0.05. This result concludes the Model I Path Analysis, i.e., variable X1 and variable X2 against variable Y1, positively and significantly (Table 4).

Table 4. Determination Coefficient Test Results

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate |
|---|---|---|---|---|
| 1 | .775a | .601 | .596 | 2.359 |

a. Predictors: (Constant), Economic Ability(X2), Education (X1)

**Source:** Primary Data Processed, 2021.

The magnitude of the R Square value contained in the "Model Summary" table is 0.601; this indicates that the contribution of X1 and X2 influence to Y1 is 60.1%, while the remaining 39.9% is the contribution of other variables not included in the study. Meanwhile, for e1 value can be searched by formula.

## 3.4 Model II Path Coefficient

Path Analysis Result Model II is presented in Table 5.

Table 5. Path Analysis Result Model II

| Model | | Unstandardized Coefficients | | Standardized Coefficients | t | Sig. |
|---|---|---|---|---|---|---|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 1.145 | .691 | | 1.657 | .100 |
| | Education (X1) | .255 | .078 | .220 | 3.262 | .001 |
| | Economic Capability (X2) | .082 | .081 | .066 | 1.004 | .317 |
| | Health Care (Y1) | .656 | .048 | .684 | 13.584 | .000 |

a. Dependent Variable: Aged Care (Y2)

**Source: Primary Data Processed, 2021.**

Based on the analysis of the regression output of model II in the table section "coefficients.". It can be known that the significance value of the variable is X1 = 0.001 < α = 0.05, X2 = 0.317< α = 0.05, and Y1 = 0.000 < α = 0.05 This result concludes that model II Path Analysis, i.e., variables X1 and Y1 against Y2 have a positive and significant effect while the X2 variable against Y2 has an insignificant positive effect (Table 6).

Table 6. Determination Coefficient Test Results

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate |
|---|---|---|---|---|
| 1 | .916a | .840 | .837 | 1.437 |

**Source:** Primary Data Processed, 2021.

The magnitude of the R Square value contained in the "Model Summary" table is 0.840; this indicates that the contribution of X1 and X2 influences Y1 to Y2 is 84.0%, while the remaining 16.0% is a contribution from other variables not included in the study. Meanwhile, for e2 value can be searched by formula. Meanwhile, the results of hypothesis testing from the indirect effect through intervening variables are as follows (Table 7):

Table 7. Indirect Effect Test Results

| **Path Coefficient** | **Standardized Coefficient Beda** | **Std. Error** |
|---|---|---|
| X1 Y1→ | 0,445 | 0,121 |
| Y1 Y2→ | 0,684 | 0,048 |
| X1 Y1 Y2→→ | 0,445 x 0,684 = 0,304 | - |
| X2 Y1→ | 0,357 | 0,129 |
| X2 Y1 Y2→→ | 0,357 x 0,684 = 0,244 | - |

**Source:** SPSS Data Processing Results, 2021.

The effect of education (X1) on elderly care (Y2) through health services (Y1), it was found that the direct effect of education (X1) on elderly care (Y2) was 0.220 or 22.0%. Meanwhile, the indirect effect of education (X1) on elderly care (Y2) through health services (Y1) is 0.445 x 0.684 = 0.304 or 30.4%. From the findings, it was found that the direct effect was smaller than the indirect effect.

## 4. Discussion

The respondents' assessment related to education show that education in the second indicator is in the high category, namely the knowledge possessed by families with a pretty good educational background must be able to foster, increase, and develop the potential of the elderly. Meanwhile, based on the problem formulation previously described, from the hypothesis test results with path analysis. The path coefficient model I found was a positive and significant influence between the education variables on health services in the working area of Puskesmas Durikumba, Karossa District, Central Mamuju Regency. The results can be seen in Table 7; the results of the path analysis model I obtained the value of X1 = 0.445 with the level of probability (sig) of education is 0.000 ($p < 0.05$). It is stated that the first hypothesis proposed by the author is acceptable, namely that there is a positive and significant influence between the education variables on health services in the working area of Durikumba Public Health Center, Karossa District, Central Mamuju Regency.

From the results of data processing of respondents' answers, it was found that the variable of financial ability towards health service methods was in a pretty good category. Therefore, the hypothesis proposed by the author shows the results of a positive and significant influence between economic capacity on health services in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency. This is evidenced by the results of the path analysis test (Path Analysis), the path coefficient of the model I obtained the value of X2 = 0.357 with the probability level (sig) of financial ability is 0.000 ($p < 0.05$). The results of the path analysis test prove that the hypothesis proposed by the author is accepted, namely that there is a positive and significant influence between economic capacity on health services in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency. The correlation number is positive, which means that if the economic capacity increases by one point, then health services in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency will increase.

Based on the direct test results with the analysis test (Path Analysis), it can be concluded that health services show a positive and significant effect on elderly care in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency. The results of the path analysis test (Path Analysis) for the path coefficient of model II obtained the value of Y1 = 0.684 with the probability level (sig) of health services is 0.000 ($p < 0.05$). The results of the path analysis test prove that the hypothesis proposed by the author is accepted, namely that there is a positive and significant influence between health services on elderly care in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency. This shows that the good and bad of elderly care is influenced by good and evil and precisely a health service in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency.

Based on the partial test results with the path analysis test, it can be concluded that education has a significant influence on elderly care in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency. The results of the path analysis test (Path Analysis) for the path coefficient of model II obtained the value of X1 = 0.220 with the probability level (sig) of education is 0.001 ($p < 0.05$). The path analysis test results prove that the author's hypothesis is accepted. There is a positive and significant influence between education on elderly care in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency.

In theory, knowledge or cognition is a binding domain for forming a person's behavior or actions (overt behavior) (Notoatmodjo, 2007). However, it does not rule out the possibility for someone with an educational background below average to provide good health services for the elderly. This is due to the high sense of family empathy for the elderly to repay parents. Who has sacrificed all their time? Energy and attention to raise their children.

Based on the partial test results with the path analysis test, it can be concluded that the economic capacity of elderly care in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency, does not have a significant effect. The results of the path analysis test (Path Analysis) for the path coefficient of model II obtained the value of X2 = 0.066 with the probability level (sig) of financial ability is 0.317 ($p < 0.05$). The results of the path analysis test prove that the hypothesis proposed by the author is rejected; that is, there is no significant effect between financial ability on elderly care in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency.

With sufficient economic capacity, the level of attention to the elderly is increasing fulfilled. Still, several factors make changes in family responsibilities to care for the elderly. one of which is because the family is very busy with

their work, so they do not have time to take care of the elderly or are even left alone by a family. That makes older adults not live. Potential and become displaced. This condition causes families to choose institutional services to take care of the elderly. One of the services for elderly institutions is social care.

Based on the path analysis test (Path Analysis), the path coefficient of model II is obtained that the direct effect of X1 on Y2 is 0.220. At the same time. The indirect effect of X1 through Y1 on Y2 is the multiplication of the beta value of X1 to Y1. The beta value of Y1 to Y2: 0.445 x 0.684 = 0.304. Then the total effect given by X1 on Y2 is the direct effect plus the indirect effect, namely: 0.220 + 0.304 = 0.524. Based on the calculation results above, it is known that the value of the direct effect is 0.220. The indirect effect is 0.304, which means that the value of the indirect effect is greater than with direct effect value. To test the hypothesis is done by using the Sobel test, guided by the t-table, which is 1,654, and the t-count from the Sobel test is 3,548. This shows that t-count> t-table or 3,548 <1,654, so it can be concluded. The sixth hypothesis states, "Education has a positive and significant effect on elderly care through health services in the Durikumba Community Health Center Work Area, Karossa District, Central Mamuju Regency," is accepted or proven.

This is evidenced by the high perceptions of the respondents on the education variable, which shows that the knowledge possessed by families with a pretty good educational background must foster, increase, and develop the potential of the elderly. The complete health services that the elderly can get and feel cannot be separated from good family education in understanding and providing care for the elderly. With a sound and maximum education, a person will think broadly about good health services provided to the elderly who need care—the higher a person's education level, the better the ability to understand and reason information.

The Effect of Economic Ability on Elderly Care Through Health Services in the Work Area of Durikumba Health Center, Karossa District, Central Mamuju Regency; Based on the path analysis test (Path Analysis), the path coefficient of model II obtained a direct effect given by X2 to Y2 of 0.066. At the same time, the indirect effect of X2 through Y1 on Y2 is the multiplication of the beta value of X2 to Y1. The beta value of Y1 to Y2: 0.357 x 0.684 = 0.244. Then the total effect given by X2 to Y2 is the direct effect plus the indirect effect, namely: 0.066 + 0.244 = 0.31. Based on the results of the above calculations, it is known that the value of the direct effect is 0.066 and the indirect effect is 0.244, which means that the value of the indirect effect is greater than the value of the direct effect. To test the hypothesis was carried out by using the Sobel test, guided by the t-table, which was 1.654, and the t-count obtained from the Sobel test was 2.710. This indicates that t-count> t-table or 2.710> 1.654. it can be concluded that. The seventh hypothesis, "Economic Ability has a Positive and Significant Effect on Elderly Care through Health Services in the Work Area of Durikumba Public Health Center, Karossa District, Central Mamuju Regency," is accepted or proven.

The high perceptions evidence of respondents on the variable of financial ability in the third indicator shows that families with sufficient economic ability are expected to pay attention to the basic needs of the elderly. (Nutrition for the elderly. Bathing, BAK, and defecating. Moving from a bed to sitting, traveling. etc.) are in the pretty good category with an average value of 4.21. Maximum ability or economic capacity in a family will significantly affect the health services provided for elderly care.

## 5. Conclusions

Analysis of the effect of the extension method (X) on personal hygiene (Y1) in the working area of the Durikumba Community Health Center, Karossa District, Central Mamuju Regency obtained a significance value of X1 to Y1 of 0.000 <0.05. So, it can be concluded that there is a direct positive and significant effect of X on Y1; Analysis of the influence of the extension method (X) on social distance (Y2) in the working area of the Durikumba Community Health Center, Karossa District, Central Mamuju Regency obtained a significance value of X against Y2 of 0.000 <0.05. So, it can be concluded that there is a direct positive and significant effect of X on Y2; Analysis of the effect of the Health Counseling Method (X) on the Prevention of Covid 19 (Z) in the Work Area of the Durikumba Community Health Center, Karossa District, Central Mamuju Regency: Obtained a significance value of X against Z of 0.000 <0.05. So, it can be concluded that there is a direct positive and significant effect of X on Z.

Analysis of the effect of Personal Hygiene (Y1) on the Prevention of Covid 19 (Z) in the Working Area of the Durikumba Community Health Center, Karossa District, Central Mamuju Regency: Obtained a significance value of Y1 to Z of 0.015 <0.05. So, it can be concluded that there is a direct positive and significant effect of Y1 on Z; Analysis of the influence of Social Distancing (Y2) on the Prevention of Covid 19 (Z) in the Work Area of the Durikumba

Community Health Center, Karossa District, Central Mamuju Regency: Obtained a significance value of Y2 against Z of 0.000 <0.05. So, it can be concluded that there is a direct positive and significant effect of Y2 on Z; Analysis of the effect of education (X1) on elderly care (Y2) through health services (Y1) in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency: Obtained t-value from the Sobel test is 3,548. This shows that t-count> t-table or 3,548> 1,654, it can be concluded that the sixth hypothesis. Which states, "education has a positive effect on elderly care through health services in the working area of Durikumba Puskesmas, Karossa District, Central Mamuju Regency," is accepted or proven; Analysis of the effect of economic capacity (X2) on elderly care (Y2) through health services (Y1) in the Durikumba Community Health Center, Karossa District, Central Mamuju Regency: Obtained t-value from the Sobel test of 2,710. This shows that t-count> t-table or 2,710> 1,654, it can be concluded. the seventh hypothesis, "Economic Ability Has a Positive Effect on Elderly Care through Health Services in the Work Area of Durikumba Community Health Center, Karossa District, Central Mamuju Regency, "is accepted or proven.

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