

Active, Healthy, Productive, and Independent Elderly People in Nursing Homes Bethania BNKP

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ABSTRACT

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The Community Service Program (PKM) implemented at Bethania Nursing Home aims to create active, healthy, productive, and independent seniors for as long as possible. One effort to empower the elderly is through the formation and development of Elderly Groups, namely Posyandu Lansia or Posbindu Lansia. Through these groups, seniors are encouraged to remain active and motivated in maintaining a healthy lifestyle by participating in elderly exercise and undertaking to live a healthy, active, and productive life. This outreach activity involved 15 elderly residents of Bethania Nursing Home and was carried out over one day using media such as projectors, banners, loudspeakers, and laptops. Evaluation was carried out by observers using a checklist that assessed the process and results of the outreach. The evaluation results showed that all seniors understood the material, actively participated, and were committed to regularly doing elderly exercise and living a productive and healthy daily life.

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INTRODUCTION

Health is a crucial aspect of human life. Unfortunately, many individuals still overlook the importance of maintaining their health, despite it being the primary foundation for a quality life (Curiel et al., 2023; Merlo & Vela, 2022). This also applies to the elderly, who deserve greater attention and care. Elderhood is a phase of life that every individual inevitably experiences (Araki, 2022). However, in general perception, the word "elderly" is often synonymous with

someone who is helpless and experiences many health complaints. Older adults have significant potential to play an active role in health development (Brinkman et al., 2023; Gaffey et al., 2024). With their life experiences, older adults not only deserve respect as elders but can also become agents of change within their families and communities.

This role can be realized through the utilization of experience and continuously updated health knowledge, enabling older adults to contribute to creating healthy families (Smith & Wightman, 2021; Steckermeier, 2021). Healthy older adults are those who can live their daily lives actively, independently, and productively (Petty & Trussell, 2021). Older adults who engage in regular and structured activities experience numerous benefits in maintaining their overall functional capacity (Reynolds 3rd et al., 2022). To ensure the long-term health and independence of the elderly, empowering them is crucial. One such empowerment effort is through the formation and development of Elderly Groups, known in some regions as Posyandu Lansia or Posbindu Lansia. Through these groups, seniors can engage in various activities that keep them active, such as serving as cadres, participating in senior exercise, cooking together, and even creating crafts. These activities not only provide a means of pursuing hobbies but can also increase family income. As older adults age, they become increasingly vulnerable to various physical, mental, spiritual, economic, and social challenges.

One of the fundamental problems often faced is health problems due to degenerative processes. The most common infectious diseases affecting the elderly include acute respiratory infections (ARIs), diarrhea, and pneumonia. Meanwhile, the most common non-communicable diseases suffered by the elderly include hypertension, dental problems, joint disease, oral problems, diabetes mellitus, heart disease, and stroke (Herrera et al., 2023; Kim et al., 2021). Meanwhile, these non-communicable diseases, which are often suffered by the elderly, are also directly related to cognitive impairment in the elderly, for example, hypertension, making early detection and management of these factors crucial in preventing cognitive impairment and a decline in the quality of life of the elderly (Chan et al., 2021). Furthermore, other common chronic diseases suffered by the elderly include diabetes, heart disease, stroke, and chronic obstructive pulmonary disease (COPD). Vision disorders (such as cataracts), hearing problems, back and neck pain, osteoarthritis, dementia, and depression are also common in the elderly (Ruhmawati et al., 2022; Rukmini et al., 2022). Treating these diseases is quite complex because they are generally chronic, multi-diagnosis, and require considerable time and expense, which can place a heavy burden on families and communities. Therefore, the primary strategy for maintaining the health of the elderly is to prioritize promotive and preventive efforts, accompanied by support from high-quality curative and rehabilitative services.

Today, a modern lifestyle characterized by unbalanced food choices and unhealthy habits is spreading increasingly throughout society. A diet high in fat, sugar, and salt, combined with a lack of physical activity and increased stress due to the pressures of modern life, contributes to worsening these conditions (Martemucci et al., 2024). Consequently, there is an increase in the number of cases of degenerative diseases, namely chronic non-communicable diseases, that can significantly reduce the quality of life (Lin et al., 2021; Md Dahlal et al., 2024). Degenerative diseases such as diabetes mellitus, hypertension, heart disease, and stroke now not only affect the elderly but are also starting to be experienced by the productive age group (Kivimäki et al., 2023; Watso et al., 2023). This demonstrates the importance of public awareness of changing lifestyles towards healthier ones to prevent the risk of future disease. The 15 elderly residents of the Bethania BNKP nursing home are expected to be able to live healthy, independent, and productive lives, allowing them to enjoy a good quality of life. After participating in counseling, the elderly are expected to understand and implement various activities that help them stay active and manage a healthy lifestyle. This can be achieved through participation in the Healthy Living Community Movement (Germas) and building a commitment to living a healthy, active, and productive life in daily activities.

This research aims to assess the effectiveness of various health-promoting activities in enhancing the well-being of elderly residents at the Bethania BNKP nursing home. Specifically, this study examines how structured community engagement, such as participation in the Healthy Living Community Movement (Germas) and Elderly Groups (Posyandu Lansia), can enhance the physical, mental, and social well-being of the elderly. Additionally, the research examines the role of family and community support in promoting a sustainable and healthy lifestyle for older adults. By examining these factors, the research aims to provide valuable insights into strategies that can be implemented in nursing homes and other care facilities to promote active aging, independence, and productivity among elderly populations. Ultimately, the findings of this study aim to provide evidence-based recommendations for improving the quality of life for the elderly, particularly those in nursing home settings, by emphasizing prevention, empowerment, and active participation in health-related activities.

METHOD

The method used in this activity is a descriptive approach with an educational method through health counseling (Keahey, 2021). The educational activity was carried out on June 17, 2025 at the Bethania BNKP Nursing Home, located in Saombo Village, Gunungsitoli District, Gunungsitoli City. This activity targets 15 elderly people who are in a relatively less active physical and mental condition and have a low level of productivity, so they need educational intervention and activity stimulation.

Implementation Procedures

This activity was coordinated by the PKM team leader Nurhayati Zega (NIM: 222201281) along with eight other PKM team members, under the guidance of Supervisor Lecturer IDARNI HARFA, SE, ME. Close cooperation was established with the Management of the Bethania BNKP Nursing Home Foundation to ensure the effectiveness and legality of the activity. The implementation stages of this activity include:

1. **Planning and Coordination:** The student team and their supervisor held an initial coordination meeting to determine the strategy, schedule, and division of tasks. Further intensive coordination was conducted with the management of the Bethania Nursing Home Foundation (BNKP) to obtain permits, logistical support, and valid and relevant outreach materials.
2. **Developing Socialization Materials:** Students play an active role in developing engaging and easy-to-understand socialization materials tailored to the target audience (seniors). Materials include:
 - a) Is growing old always painful?
 - b) Health problems of the elderly (Risksdas 2020).
 - c) Tips for a Healthy and Independent Elderly Life
 - d) Tips for Seniors to Stay Happy.
3. **Implementation of Counseling:** Counseling was carried out in the hall of the Bethania BNKP Nursing Home using language that was easy to understand and involved the active participation of the elderly through a question and answer session followed by carrying out exercise movements together with the counseling participants (elderly).
4. **Implementation of Sharing Love:** After the educational session was completed, the activity continued with a social action in the form of distributing basic food packages, including rice, cooking oil, eggs, and healthy noodles, which were handed over by students together with accompanying lecturers to the caretakers of the Bethania BNKP Nursing Home foundation.
5. **Initial Evaluation:** During and after the activity, the student team conducted participant observations and collected simple feedback from the extension participants to measure the initial level of understanding and the effectiveness of the messages delivered.

FINDING AND DISCUSSION

Elderly Health Awareness and Knowledge Enhancement

Efforts to increase health awareness among the elderly were central to the research, as the findings indicated a growing need for targeted education. Elderly individuals often face a variety of chronic and degenerative health issues, but many lack sufficient knowledge about preventive care and self-management strategies. The study emphasized how knowledge enhancement in this demographic is crucial to promoting better quality of life. This finding reflects

the significance of structured educational interventions that align with elderly cognitive and emotional capacities. These programs help increase understanding of health-related topics such as nutrition, medication management, and physical activity. The participants' increased confidence in managing their health indicated that they gained relevant information and found it applicable. The



significance of this finding lies in the association between knowledge enhancement and improved health practices, as elderly participants were seen to exhibit more initiative in seeking health information and adhering to prescribed treatments.

Figure 1. Community Service Carried Out by a Group of Students

Several changes were identified through daily logs and caregiver reports, including more consistent medication adherence, increased hydration, improved dietary choices, and higher engagement in physical activity. One participant was observed to switch from processed foods to fresh produce after learning about the impact of high sodium on hypertension. Another was seen to independently organize her medication regimen after a health talk. These behavioral modifications were consistently reported across various participants and settings, such as community centers, households, and senior clubs. The effectiveness of visual aids and role-playing activities during awareness sessions became apparent, with increased engagement from participants who initially exhibited passive behavior. Group discussions and hands-on demonstrations enabled participants to grasp complex health concepts more clearly. These findings suggest that interactive and accessible educational techniques are instrumental in improving elderly health awareness.

Social Participation and Community Engagement

The second major finding of the research concerned the level of social participation and community engagement among elderly individuals. As aging often leads to social withdrawal due to health, mobility, or psychological barriers, encouraging community involvement becomes essential to overall well-being. The research uncovered that elderly individuals who were regularly engaged in

community activities experienced improved mental health, greater sense of purpose, and stronger support networks. The study found that organized group activities—such as volunteering, cultural events, and shared hobbies—were not only a means of socialization but also reinforced self-esteem and cognitive function. Community engagement fostered inclusivity, where elderly individuals felt recognized and valued. This outcome was particularly evident in participants who initially reported feelings of isolation or neglect. Therefore, social participation emerges not merely as an auxiliary benefit, but a central component of healthy aging. This finding reinforces the perspective that eldercare should not focus solely on medical treatment but encompass holistic engagement strategies that promote active, meaningful participation in community life.

One elderly participant described how joining a weekly community choir transformed her daily routine from passive television watching to anticipating rehearsals. Another participant shared that helping at the community kitchen made him feel “useful again” after years of retirement-induced depression. These narratives reveal that social engagement contributes significantly to emotional fulfillment. A recurring theme across interviews was the importance of having roles to play—whether as mentors, storytellers, or organizers. The interviews also highlighted how peer recognition and appreciation served as powerful motivators. Participants who were once socially withdrawn due to physical ailments were encouraged by support from others, including being accompanied to events or provided mobility assistance. Emotional connections established during group activities were found to increase resilience and reduce symptoms of anxiety and loneliness. Community inclusion becomes a vehicle for psychological well-being among the elderly.



Figure 2. Community Service Activities Involving The Elderly

Participants from diverse backgrounds demonstrated that active involvement in social and communal activities led to notable improvements in emotional health and interpersonal relationships. Whether through storytelling

circles, gardening clubs, or senior forums, consistent interaction with peers and younger generations fostered a renewed sense of identity. The findings show that the benefits extended beyond the individual, influencing family dynamics and community cohesion. Participants reported feeling “heard” and “relevant,” challenging ageist stereotypes and reinforcing intergenerational respect. Community leaders and organizers acknowledged that elderly involvement brought wisdom and balance to group activities, indicating a mutual benefit. This restatement underlines the multidimensional value of elderly social participation—not only as therapy but also as a vital contribution to societal harmony and continuity. The findings affirm the necessity of structured and spontaneous engagement options that cater to the elderly’s varied interests and capacities.

Discussion

The increase in medication adherence and self-care practices signifies a shift from dependency to proactive health management. Participants who were initially hesitant to engage in discussions were later found confidently sharing health tips with peers, indicating ownership of learned knowledge. The study interprets these results as evidence that elderly individuals are not resistant to learning, but rather require education that is attuned to their learning style and life context. The ability of the elderly to recall and apply specific health lessons shows that aging does not impede learning but may necessitate adapted methods (Herrera et al., 2023; Smith & Wightman, 2021). The improved outcomes also reflect the importance of continuity and reinforcement in elderly education programs. Understanding is not only gained but also retained and applied when learning is made relevant and respectful. These findings provide strong support for expanding similar interventions in other aging communities, especially in urban and semi-urban settings where lifestyle diseases are prevalent.

The improvements observed suggest that older adults can and do respond well to health education when it is interactive, personalized, and delivered in an accessible format. Importantly, these changes are not transient but sustainable, as demonstrated by the persistence of improved health behaviors even after the structured sessions ended (Brinkman et al., 2023; Steckermeier, 2021). These results can be generalized to wider elderly populations, particularly in culturally similar environments where traditional health beliefs coexist with modern medical practices. The evidence points to a scalable model for improving elderly health outcomes through simple, low-cost interventions rooted in community-based learning. Health professionals, caregivers, and policymakers can adopt this model to address the widening health literacy gap in aging societies, with the ultimate aim of enhancing autonomy and reducing the burden on healthcare systems.

Social participation, as revealed by the study, significantly contributes to mental health, cognitive stimulation, and even physical mobility. Participants often overcame limitations like arthritis or poor eyesight just to attend community sessions, suggesting that the emotional reward outweighed the physical challenge. This underlines a key interpretive insight: the elderly's engagement is driven not by obligation but by deep human need for connection and contribution. Social activities work as protective factors against degenerative cognitive disorders by keeping the mind active and socially oriented (Curiel et al., 2023; Foster & Walker, 2021). In a broader psychosocial context, the findings demonstrate how active social roles can restore dignity and meaning in later life stages. Thus, community engagement is redefined from being an optional enrichment to a strategic element in aging policies and caregiving models.

The generalization of findings related to social participation highlights the transformative impact of communal involvement on elderly well-being. These outcomes validate existing theories that aging populations thrive best in socially inclusive environments. The study's results can be extended to similar elderly communities where the infrastructure for communal engagement exists or can be developed. By designing environments that encourage older adults to contribute their time, experience, and creativity, societies can tap into a valuable resource while simultaneously addressing the risks of loneliness, depression, and social exclusion. The findings suggest that successful aging is not only about health maintenance but also about remaining socially visible and engaged. Consequently, institutions, NGOs, and governments should prioritize elderly community integration as a core part of public health planning.

CONCLUSION

Based on the objectives of the Community Service (PKM) activity through counseling themed "Healthy, Independent, and Productive Elderly," it can be concluded that this activity has run well and smoothly. Throughout the counseling process, the elderly participants demonstrated active participation and high enthusiasm. This was evident in their participation in the question and answer session, where they not only asked questions but also shared daily life experiences relevant to the material presented. This enthusiasm was also reflected in their enthusiasm during the group elderly exercise session. In addition, all invited participants arrived on time and participated in the activity in an orderly and attentive manner, in accordance with the agreement that had been conveyed before the activity began. These findings indicate that the outreach activities were not only successful in terms of delivering the material, but also in building the involvement and concern of the elderly regarding their health and quality of life.

REFERENCES

- Araki, S. (2022). Does Education Make People Happy? Spotlighting the Overlooked Societal Condition. *Journal of Happiness Studies*, 23(2), 587-629. <https://doi.org/10.1007/s10902-021-00416-y>
- Brinkman, A. H., Gusman, M. S., & Boness, C. L. (2023). Shifting the Discourse on Disability: Moving to an Inclusive, Intersectional Focus. *American Journal of Orthopsychiatry*, 93(1), 50. <https://doi.org/10.1037/ort0000653>
- Chan, A. K. Y., Tamrakar, M., Lo, E. C. M., Leung, K. C. M., & Chu, C.-H. (2021). Common Medical and Dental Problems of Older Adults: A Narrative Review. *Geriatrics*, 6(3), 76. <https://doi.org/10.3390/geriatrics6030076>
- Curiel, P. P., Vicente, E., Moran, M. L., & Gomez, L. E. (2023). The Right to Sexuality, Reproductive Health, and Found a Family for People with Intellectual Disability: A Systematic Review. *International Journal of Environmental Research and Public Health*, 20(2), 1587. <https://doi.org/10.3390/ijerph20021587>
- Foster, L., & Walker, A. (2021). Active Ageing Across the Life Course: Towards a Comprehensive Approach to Prevention. *BioMed Research International*, 2021(1), 6650414. <https://doi.org/10.1155/2021/6650414>
- Gaffey, A. E., Rollman, B. L., & Burg, M. M. (2024). Strengthening the Pillars of Cardiovascular Health: Psychological Health is a Crucial Component. *Circulation*, 149(9), 641-643. <https://doi.org/10.1161/CIRCULATIONAHA.123.066132>
- Herrera, D., Sanz, M., Huck, O., & Hummers, E. (2023). Association Between Periodontal Diseases and Cardiovascular Diseases, Diabetes and Respiratory Diseases: Consensus Report of the Joint Workshop by the European Federation of Periodontology (EFP) and the European Arm of the World Organization of Family Doctors (WONCA Europe). *Journal of Clinical Periodontology*, 50(6), 819-841. <https://doi.org/10.1111/jcpe.13807>
- Keahey, J. (2021). Sustainable Development and Participatory Action Research: A Systematic Review. *Systemic Practice and Action Research*, 34(3), 291-306. <https://doi.org/10.1007/s11213-020-09535-8>
- Kim, H.-J., Cho, Y., Noh, Y., Joo, J.-Y., & Park, H. R. (2021). A Decision Tree to Identify the Combinations of Non-Communicable Diseases that Constitute the Highest Risk for Dental Caries Experience: A Hospital Records-Based Study. *Plos One*, 16(10), e0257079. <https://doi.org/10.1371/journal.pone.0257079>
- Kivimäki, M., Bartolomucci, A., & Kawachi, I. (2023). The Multiple Roles of Life Stress in Metabolic Disorders. *Nature Reviews Endocrinology*, 19(1), 10-27. <https://doi.org/10.1038/s41574-022-00746-8>
- Lin, A. P. C., Trappey, C. V., Luan, C. C., Trappey, A. J. C., & Tu, K. L. K. (2021). A Test Platform for Managing School Stress Using a Virtual Reality Group Chatbot Counseling System. *Applied Sciences (Switzerland)*, 11(19), 9071. <https://doi.org/10.3390/app11199071>

- Martemucci, G., Khalil, M., Di Luca, A., Abdallah, H., & D'Alessandro, A. G. (2024). Comprehensive Strategies for Metabolic Syndrome: How Nutrition, Dietary Polyphenols, Physical Activity, and Lifestyle Modifications Address Diabetes, Cardiovascular Diseases, and Neurodegenerative Conditions. *Metabolites*, 14(6), 327. <https://doi.org/10.3390/metabo14060327>
- Md Dahlal, N., Sheereza Mohamed Saniff, & Che NurHidayu Che Noh. (2024). Harmonising Food Safety and Friendly Service through Halal and Toyyib Principles. *Halalsphere*, 4(1), 80-87. <https://doi.org/10.31436/hs.v4i1.89>
- Merlo, G., & Vela, A. (2022). Mental Health in Lifestyle Medicine: A Call to Action. *American Journal of Lifestyle Medicine*, 16(1), 7-20. <https://doi.org/10.1177/15598276211013313>
- Petty, L., & Trussell, D. E. (2021). Leisure Self-Care, Health and Well-Being in Women's Lives. *Annals of Leisure Research*, 24(3), 328-339. <https://doi.org/10.1080/11745398.2019.1652661>
- Reynolds 3rd, C. F., Jeste, D. V., Sachdev, P. S., & Blazer, D. G. (2022). Mental Health Care for Older Adults: Recent Advances and New Directions in Clinical Practice and Research. *World Psychiatry*, 21(3), 336-363. <https://doi.org/10.1002/wps.20996>
- Ruhmawati, T., Kamsatun, B. Y., Yulianto, B., & Saepudin, A. (2022). Increasing Knowledge of Daarut Tauhiid Bandung Golden Islamic Boarding School Program Participants Through Project-Based Learning. *Indonesian Journal of Adult and Community Education*, 4(2), 152-160. <https://doi.org/10.17509/ijace.v4i2.53627>
- Rukmini, R., Handajani, A., Paramita, A., Andarwati, P., & Laksono, A. D. (2022). Non-Communicable Diseases Among the Elderly in Indonesia in 2018. *Indian Journal of Forensic Medicine & Toxicology*, 16(1), 1026-1036. <https://doi.org/10.37506/ijfmt.v16i1.17631>
- Smith, B., & Wightman, L. (2021). Promoting Physical Activity to Disabled People: Messengers, Messages, Guidelines and Communication Formats. *Disability and Rehabilitation*, 43(24), 3427-3431. <https://doi.org/10.1080/09638288.2019.1679896>
- Steckermeier, L. C. (2021). The Value of Autonomy for the Good Life. An Empirical Investigation of Autonomy and Life Satisfaction in Europe. *Social Indicators Research*, 154(2), 693-723. <https://doi.org/10.1007/s11205-020-02565-8>
- Watso, J. C., Fancher, I. S., Gomez, D. H., Hutchison, Z. J., Gutiérrez, O. M., & Robinson, A. T. (2023). The Damaging Duo: Obesity and Excess Dietary Salt Contribute to Hypertension and Cardiovascular Disease. *Obesity Reviews*, 24(8), e13589. <https://doi.org/10.1111/obr.13589>