

The Relationship of Self Care with Elderly Well Being

A Systematic Review

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Keywords: Elderly, Mental Health and Self Care.

Abstract: Inability to manage an everyday activity independently is a common reason for self-care, with self-care activities can support the health of the elderly to improve self-esteem, life satisfaction, and prevent depression. Elderly people living in the community tend to experience self-sufficiency, and need more help in daily life. The independence of a person in the overall health measure is about the way individuals perform physical and social tasks, as well as maintaining normal daily self-care, such as bathing, dressing, BAK / CHAPTER, moving from a chair, maintaining a continual and eating. The key words used were elderly, mental health and self-care. Journal articles search were done electronically using multiple databases, namely: Science Direct and Scopus. Limitation year used was 6 years (2012 -2017). From the results obtained fifteen literatures selected of journal articles from 1979 journal articles found. Twelve studies raised in this study is inequality technique (heterogenesis), but self-care can support the health of the elderly to improve self-esteem, life satisfaction, and prevent depression. To improve self-esteem, life satisfaction, and prevent depression, some researchers showed a positive correlation, as evidenced by the result of self-care agency relationship between high self-care agency and interrelated factors encourage self-care, namely: (1) attitude and behavior of members family, (2) characteristics and attitude of the client, and (3) attitude / behavior of staff.

1 BACKGROUND

The aging process is a gradual process of gradual disappearance of the network's ability to repair itself / replace itself and maintain its normal structure and function. Humans slowly regressed organ structures and structures. This condition clearly shows that aging process is a combination of various interrelated factors that can affect the independence and health of the elderly. Entering old age means a setback, such as physical decline characterized by loosening of skin, whitening hair, tooth loss, poor hearing, worsening vision, slow movements, and unprofessional posture (Wahyudi Nugroho, 2008).

Tanaka (2013) says aging is not a disease or disability, although there are many elderly who experience disability. Many elderly are limited in activities or daily mobility. In fact, more than 60% of the elderly with functional impairment due to health problems at age 65 and above (Freedman and Berk, 1988; Clark, 1993). Physical weakness makes elderly tend to become socially isolated and functional decline that can lead to mental health problems.

Some general principles concerning the effects of aging on various organ systems in the elderly, dependence stem from physical, emotional, social or mental changes. The change in age-related dependence is influenced by a decrease in activity levels (Freedman and Berk, 1988). Functional independence or mobility of the elderly affects the mental status of the elderly, and functional independence has a significant relationship with mobility (Tanaka, 2013).

2 METHODS

A literature Journal articles search were done electronically using multiple databases, namely: Science Direct and Scopus. Limitation year used was 6 years (2012 -2017). From the results obtained twelve literatures selected of journal articles from 1979 journal articles found, the article's inclusion criteria were: (1) elderly, (2) mental health and (3) self-care.

The parameters used to determine elderly for self-care was by using *Health-Related Quality of Life*

(HRQOL), *The Exercise of Self-Care Agency Scale (ESCAS)*, *Self-as-Care Inventory (SCI)*, *General Self-Efficacy (GSE) scale*, *Self-Care Agency Scale*, *MentaHealth Inventory (MHI-5)*, *Barthel Index*. This research has been approved by the Commission of Health Research Ethics Faculty of Airlangga University No. 607-KEPK.

3 RESULTS

Kim, 2017 suggests 60 respondents with convenience sampling for Health-Related Quality Of Life (HRQOL) shows a positive correlation with daily life activities (ADL).

After 6 months of intervention, quality of life, average health knowledge, self-concept, self-care ability, and all self-care agencies have significant differences from baseline to post-intervention (Sun, 2017). Self care agency in elderly patients shows significant positive correlation with behavior, then self care behavior is higher when self care agency is high. The result of regression analysis, clarity of strength of self care agency is 77%, indicating that self care agency is a variable that strongly influence for self care behavior. (Kim, 2016)

It was found that most respondents (124, 88.6%) always consume a variety of daily protein sources. An understanding of self-care and self-efficacy practices is needed to improve health care in developing countries (irwan, 2016)

Karagozoglu, 2012, obtained statistical results, there is a weak negative correlation between fatigue with energy level, a weak positive correlation between self-care agency with energy level, weak negative correlation between self-care agency with fatigue level.

The results show that three interrelated factors encourage self care, namely: (1) attitudes and behaviors of family members, (2) characteristics and attitudes of clients, and (3) attitudes / behavior of staff. Therefore, to promote independent self-care of the elderly, cooperation between staff, family caregivers and the elderly (Chang, 2013)

Chan, 2015 undertook measurements of reported health conditions regarding disease knowledge, and biomarkers (HbA1c, blood pressure, peak expiratory flow, lipid panel, albumin, and creatinine). SCOPE is also designed to provide information on chronic diseases and the utilization of health facilities in the community with the elderly.

Elderly who receive informal care can reduce the risk depression by 42% and an increase of one hour

of formal treatment increased MHI-5 by 1.8 points on a scale of 0-100. Individuals who did not receive formal care had an average estimate of MHI-5 44, 9, while

Individuals who received formal care had an average MHI-5 52.6. If we standardize the MHI-5 score, it is found that one additional hour of formal treatment will increase MHI-5 by 0.09 standard deviation (Barnay, 2016)

Ouden, 2012, made adjustments for confusion, walking speed and shorter time to carry out standing seat tests with higher probability of being independent in daily life activities (ADLs). And no associations were found for grip strength, physical performance score, standing balance and physical activity in the elderly

Matsui, 2014, attributes the independence of the elderly daily with the power of significantly related subscribers in the right hands of both sexes, and the more significant, related strength in both hands in women and in the left hand in men. The correlation index varies by sex, side and age group, especially in men in their 70s, and in women aged less than 70 years and women in their 80s.

Standard Mance Perfor- presented to men and women aged 60-94 shows the level of fitness associated with staying physically independent until the end of his life. The reliability and validity of indicators for standards ranges between 0.79 and 0.97 (Rikli, 2012)

In the exploratory factor analysis, high factor loading for toiletries, makeup, toilets and transfers to and from seats (loading factor) Maintaining continuity and breastfeeding correlated less with other items and total scale. One extraction factor accounted for 61% of total variance. Consistency internal tested by Cronbach's alpha (a) Cronbach's coefficient is 0.838 The result shows good internal consistency results for Katz ADL that supports its reliability If the continuity of the item has been removed, Cronbach's alpha will be 0.884, if the item has been removed, the Cronbach alpha will be 0.845 Thirty-six patients were interviewed twice in one week period by the same interviewer There was no difference between the two two assessments (interclass correlation coefficient (ICC) = 1,000, 95% CI 1,000-1,000) .The stability of the retest of Katz ADL was perfect The inter-rater reliability is also good, reflected from the ICC 0.999 (95% CI 0.999-1000) .Nursing r the home population has decreased the value of Katz ADL compared with patients living at home Patients with dementia also had lower Katz

Table 1: The characteristic of journal.

No	Title	Design Sample Variable	Instrument	Analysis	Result
1	Health-Related Quality-of-Life and Diabetes Self-Care Activity in Elderly Patients with Diabetes in Korea (Kim, 2017)	Design: Cross Sectional Sample: 60 Sampling: convenience Variable: 1. Quality of Life 2. Self-Care Elderly	1. Instrument: Korean version of the ADL questionnaire (K-ADL) 2. Short Geriatric Depression Scale (SGDS) Questionnaire 3. Summary of Diabetes Self-Care Activities (SDSA) Questionnaire 4. Short-Form Health Survey (SF-36)	Independent t-tests, Pearson correlations, and stepwise multiple regression	The average Total Health-Related Quality of Life (HRQOL) score was 74.77, and HRQOL showed a positive correlation with daily life activity (ADL), and Summary of Diabetes Self-Care Activities (SDSA). There is a negative correlation between HRQOL and Short Geriatric Depression Scale (SGDS). The lower the SGDS score, the SDSA score, and the male sex associated with HRQOL are higher
2	Quality of life and self-care in elderly patients with cardiovascular diseases: The effect of a Traditional Chinese Medicine health educational intervention (Sun, 2017)	Design: Quasi-experimental Sample: 48 control: 50 Variable: 1. Quality of Life 2. Self-Care Elderly	1. the Short Form Health Survey (SF-36) 2. The Exercise of Self-Care Agency Scale (ESCAS)	Independent t-test	After 6 months of intervention, quality of life, mean health knowledge, self-concept, self-care ability, and all self-care agencies had significant differences from baseline to post intervention in the intervention group significantly increased ($p < 0.05$)
3	The Effects of Elderly Diabetic Patients' Self-Care Agency on their Self-Care Behavior (Kim, 2016)	Design: Cross Sectional Sampel: 222 Variable: 1. Diabetes 2. Self Care Elderly	1. Self-as-Care Inventory (SCI) 2. self-care behavior scale	t-test, one-way ANOVA, Scheffe's test, dan Pearson's correlation	Self care agency in elderly patients with diabetes mellitus showed a significant positive correlation with self care behavior ($r = 0.82$, $p < .001$). That is, self care behavior is higher when the self-care agency is high. According to regression analysis, the clarity of self care agency's strength is 77% ($p < .001$), indicating that self care agency is a variable that has strong influence for self care behavior.
4	Self-care practices and health-seeking behavior among older persons in a developing country: Theories-based research (Irwan, 2016)	Design: Cross Sectional Sampel: 140 Variable: 1 Self Care 2 Health Seeking Behaviour 3 Elderly	1. Health Promoting Lifestyle Profile II (HPLP) questionnaire 2. Rapid Estimate of Adult Literacy in Medicine Short Form (REALM-SF) 3. General Self-Efficacy (GSE) scale	Fisher's exact tests and χ^2 tests, Spearman's rank order correlation, logistic regression analysis	It was found that most respondents (124, 88.6%) always consume a variety of daily protein sources. However, many participants never limit the consumption of sugar (55, 39.3%) or salt (40, 28.6%), and more than half of respondents (96, 68.6%) do not do Monthly Health Check-Ups (MHC) regularly. An understanding of self-care and self-efficacy practices is needed to improve health care in developing countries

ADL scores compared with untreated patients (Arik, 2015)

prevention of life hazards, human functions, and human well-being and desire to be normal.

4 DISCUSSION

Summary of research conducted review; shows a positive effect on the physical changes that occur in the elderly will certainly affect the independence of the elderly. Independence is freedom to act, independent of others, unaffected by others and free to govern oneself or the activities of an individual or group of health or disease. Independence in the elderly is very important to take care of itself to meet basic human needs.

The existence of functional dependence increases with age for example in elderly. Thus, today, the assessment of functional independence is a priority of health services worldwide. However, by not being independent of the elderly leads to mental disorders. These results indicate a decrease in functional independence affecting mental disorders in the elderly, threatening self-care skills. Other studies have shown that the relationship between functional independence and mental disorder is characterized by reciprocity, ie functional dependence can trigger mental disorders.

The awareness of the elderly with independence in maintaining life, health and welfare. Independence in the elderly depends on the ability of functional status in performing daily activities.

Self-care is a personal act that every individual undertakes to sustain life, health, and well-being, and consistently fulfills personal health. There are three types of self-care: universal, developmental, and divergence of health,

5 CONCLUSIONS

It can be concluded that aged people who experience the aging process can influence the function kemandirian evidenced menurunya self-care on the elderly, so if not resolved can lead to mental health in the elderly. And there are eight dimensions or requirements that human must fulfill for self-care that is maintenance of adequate air supply, maintenance of adequate water supply, adequate provision of food supplies, provision of treatments associated with elimination and excretion, maintaining balance between activity and rest, maintenance balance between loneliness and social relationships,

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