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After Covid-19 Pandemic:
Health and Education
System Resilience

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PREFACE

Coronavirus disease, known as Covid-19, is a deadly virus that affects the world population, and cause a Pandemic since early of 2019. In Indonesia, about 3.8 million people are diagnosed with COVID-19, with more than 30,000 and 115,000 deaths due to this virus. Many Countries have been implementing numerous strategies to fight the pandemic; however, the virus remains uncontrol for almost two years.

This pandemic has shocking effects on all countries globally and weakens all systems in every country, especially the health and education system. The research findings show that 80% of cases are mild, 15% of people experience severe cases, and the other 5% become critically suffering (septic shock, respiratory and organ failure). The number of hospitalization is also challenging. According to UNICEF, at least 98.5% of the world's student population experienced new school policies, such as school closures, distance learning, and no school interaction. Long school closures and distancing learning will affect their graduation careers, skills and future. In addition, graduates will face severe challenges from the global recession due to the COVID-19 pandemic.

Therefore, the committee initiated the international conference by inviting experts and leaders around the world. The 3rd Joint International Conference will be held to organize a Global discussion, ideas and innovations are critically needed to improve the current responding strategies of COVID-19 in the health and education system.

Jombang, September 2021

Pujiani, S.Kep.Ns., M.Kes.
Dean of Faculty of Health Science
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The Correlation Between Menopausal Women's Motivation and Regular Visits to The Elderly Health Care Center

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ABSTRACT

Keywords:
Motivation
Menopausal
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Regular visits
Elderly health
care center

The elderly health care center is a facility for health services for the community, especially the elderly. Menopausal women are one of the targets of the elderly health care center. The elderly health care center has an important role in maintaining the quality of life for the elderly in the community. However, the frequency of visits to the elderly health care center from year to year is decreasing. Motivation is one of the factors that can affect the frequency of visits to the elderly health care center. This study aims to determine the correlation between menopausal women's motivation and regular visits to elderly health care center. The research design used correlational analytic research with a cross-sectional approach. The population and samples were postmenopausal women who came to the elderly health care center in Bangkok Village, Gurah District, Kediri Regency. With accidental sampling technique, obtained 30 respondents. The variable consists of the independent variable, namely the motivation of postmenopausal women and the dependent variable, namely the regularity of visits to the elderly health care center. Collecting data using questionnaires and attendance lists for elderly health care center. Data processing by editing, coding, scoring, and tabulating. Data analysis using Spearman Rank correlation. The results showed that from 30 respondents, 23 respondents (76.66%) had high motivation with regular visits. Statistical test results obtained r_s count 0.45 > r_s table 0.364. So H1 is accepted, meaning that there is a correlation between the motivation of menopausal women and the regularity of visits to the elderly health care center. Thus, the high motivation of menopausal women must be maintained because it can affect the regularity of visits to elderly health care center. To increase motivation, it can be done by conducting home visits for the elderly, especially menopausal women who have not come regularly to the elderly health care center.

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I. INTRODUCTION

The success of the development of countries in the world in all fields including health will improve the quality of life and public health which has an impact on increasing life expectancy and increasing the number of elderly people from year to year. The aging process will have an impact on various aspects of life, both social, economic, and health. Viewed from the health aspect, with increasing age, the elderly are more susceptible to various physical complaints, either due to natural factors or due to disease.(1)

The government has formulated various health and social service policies for the elderly aimed at improving the quality of life of the elderly, achieving a happy and efficient old age in family and community life in accordance with their existence. As a tangible manifestation of health and social

services for the elderly, the government has established services for the elderly through several levels. Health and social services at the community level are the elderly health care center.

Based on data from the Central Statistics Agency, the state projects that the elderly population aged 60 years and over will increase from 27.1 million in 2020 to 33.7 million in 2025, and in 2035 to reach 48.2 million. Based on input from the data center of the Indonesian Ministry of Health, there are five provinces in the country that will be filled with elderly residents. From highest to lowest, the five provinces are: DI Yogyakarta (13.4%), Central Java (11.8%), East Java (11.5%), Bali (10.3%) and North Sulawesi (9.7%). It was further stated that the elderly in East Java ranked the third largest. (2)

In 2019, the life expectancy of women reached 73.15 years and men reached 69.30 years. As a result, the presence of the elderly female population will tend to be more than the elderly male. The number of elderly women in East Java reached 2.77 million people, more than the elderly men who reached 2.41 million people. (3)

Indonesian women who enter the premenopause period are currently 7.4% of the population. This number is estimated to be 11% in 2005, then increased again by 14% in 2015. In Indonesia, data from the Central Statistics Agency shows 15.2% of women entering menopause from 118 million Indonesian women. (4)

Many women tend to live more than 20 years after menopause, spending about a quarter or more of their lives in a state of estrogen deficiency. Due to a lack of estrogen, women can experience physical and mental decline (5). Physical inactivity not only puts women's health at risk but also increases menopausal problems. (6)

One of the targets of the elderly health care center is the elderly group, namely the age group of 45-59 years. Menopausal women are included in the pre-elderly group. The formation of the elderly group, the integrated elderly post is one of the efforts to empower the elderly. Basic health services can be obtained by the elderly through the activities of the elderly health care center in the hope of improving the quality of life of the elderly. (7)

Currently, many of the elderly health care center have been established, but the average elderly visits to the elderly health care center are still low. Motivation is very closely related to an elderly person because motivation will serve to determine the direction of what actions must be done properly, especially in improving the health of an elderly person, one of which is active attendance at the elderly health care center.

Based on the results of Nurzia (2017), it shows that there is a corelation between the motivation of the elderly and the visit of the elderly health care center. Motivation does not only arise from within the elderly, but motivation can also be influenced by information that comes from outside.

Elderly motivation is one of the factors that can affect the frequency of elderly visits to the elderly health care center. Motivation cannot be separated from needs because someone is driven to do something when they feel there is a need. So, it can be interpreted that the elderly who have motivation will be encouraged to follow the elderly health care center. On the other hand, for the elderly who do not have the motivation to come to the elderly health care center, it is feared that the health of the elderly will not be monitored. (8)

Indonesia must prepare for the handling of the elderly from now on so that the elderly do not become a burden in the future. Therefore, efforts are needed to increase motivation and support for the elderly regarding the importance of health checks at the elderly health care center. Based on the description above, the authors are interested in conducting research on the correlation between menopausal women's motivation and regular visits to the elderly health care center. This study aims to analyze the correlation between menopausal women's motivation and regular visits to the elderly health care center.

II. METHOD

The research design used correlational analytic research with a cross-sectional approach. The population and samples were postmenopausal women who came to the elderly health care center in Bangkok Village, Gurah District, Kediri Regency. With accidental sampling technique, obtained 30 respondents. The variable consists of the independent variable, namely the motivation of postmenopausal women and the dependent variable, namely the regularity of visits to the elderly health care center. The operational definition of menopausal women's motivation is an impulse that

arises from within or from outside so that the menopausal woman wants to visit the elderly health care center. While the operational definition of regular visits to the elderly health care center is the visit of menopausal women to the elderly health care center, the best visit is regularly every month or 12 times per year. If the frequency of visits has been 8 times or more in a period of 1 year including regular criteria, but if less than 8 times in 1 year including irregular criteria. Collecting data using questionnaires and attendance lists for the elderly health care center visits. Data processing by editing, coding, scoring, and tabulating. Data analysis using Spearman Rank correlation.

III. RESULTS AND DISCUSSION

Table 1. Characteristics of Respondents in The Elderly Health Care Center, Bangkok Village, Gurah District, Kediri Regency

No.	Characteristics	f	%
1.	Education levels		
	Elementary school	6	10
	Junior high school	13	43,33
	Senior high school	10	33,33
	University/ Academy	1	3,33
	N	30	100
2.	Profession		
	Housewife	9	30
	Farmer	9	30
	Entrepreneur	12	40
	N	30	100

Table 1 shows that most of the respondents have a junior high school education background, as many as 13 respondents (43.33%). Most of the respondents work as entrepreneurs, as many as 12 respondents (40%).

Table 2. Cross-tabulation Analysis of Menopausal Women's Motivation with Regular Visits to The Elderly Health Care Center, Bangkok Village, Gurah District, Kediri Regency

Motivation \ Regularity	Reguler		Irregular		N	
	n	%	n	%	n	%
High	23	76.66	2	6.66	25	83.33
Moderate	-	-	5	16.66	5	16.66
Low	-	-	-	-	-	0
N	23	76.66	7	23.32	30	100
Sperman Rank	rs count:0.45			rs table:0.364		

Table 2 shows that from 30 respondents, 23 respondents (76.66%) had high motivation and regularly visited the elderly health care center, 2 respondents (6.66%) had high motivation, but did not regularly visit the elderly health care center.

From the results of data analysis with Spearman rank correlation obtained rs count 0.45. When compared with the table rs with a significance level of 5% and $n = 30$, which is 0.364, it is found that the calculated rs is greater than the table rs. This means that H_0 is rejected and H_1 is accepted, that there is a relationship between the motivation of menopausal women and the regularity of visits to the elderly health care center.

The results of this study are in line with the research of Sulistianingsih (2017), that the motivation of the elderly has a strong correlation with the frequency of the elderly health care center visits. The higher the motivation, the frequency of visits to the elderly health care center will increase.

Motivation comes from the word "motive" which means encouragement, so motivation is an urge to do activities consciously. Without motivation, all activities carried out cannot be successful. The

motivation of the elderly to encourage the elderly to be more independent in preventing and overcoming health problems, such as visiting the elderly health care center. (10)

Motivation can come from within or from outside the individual. Intrinsic motivation is motivation that arises from within the individual itself. Intrinsic motivation arises because of a need (Sulistianingsih, 2017). In postmenopausal women, the need to socialize with other people of the same age can increase motivation to visit to the elderly health care center. In addition to checking their health, postmenopausal women have the opportunity to interact with their peers more often. They usually use this time to share their experiences about the complaints experienced during menopause. This situation makes menopausal women more relaxed in going through menopause and they are generally able to cope with the complaints they experience independently, so that it will indirectly make their lives more quality.

Extrinsic motivation is the motivation that arises as a result of external stimuli. The stimulus can come from the closest people, environment, or association (Sulistianingsih, 2017). In line with the research of Nugroho et al. (2021), the majority of the elderly who actively use the elderly health care center have good family support. The existence of family support for the elderly can cause inner peace and feelings of pleasure in the elderly. In addition, family support has an impact on the convenience of the elderly to participate in activities at the elderly health care center. The family also has a major role in providing encouragement to the elderly before other parties also provide encouragement. The pattern of influence of family support with activity shows that the higher the family support, the higher the active participation in the elderly health care center. On the other hand, the lower the family support, the lower the active participation in the elderly health care center.

Families have an important role in encouraging the motivation, interest or willingness of postmenopausal women to participate in the elderly health care center. Families can be a strong motivation for postmenopausal women if they are always available to accompany or take them to the posyandu, and remind the schedule the elderly health care center. The family is the main support system for the elderly in maintaining their health. In general, the causes of the absence of postmenopausal women in the activities of the elderly health care center are physical incapacity and the distance from the house to the place where the elderly health care center is held. This is where the support of younger family members is needed to guide them. With good family support, the motivation and willingness of the elderly to participate in the elderly health care center will also increase.

Apart from family, motivation can also be obtained from social support such as friends, government and health workers. In this case, the elderly health care center cadres are an integral component of health workers to support development goals (12). One of the efforts to create a healthy Indonesian society is to empower the community, including by involving community members or cadres who are willing to voluntarily be involved in health issues. Cadres play a role in community development in the health sector through activities carried out at posyandu (13). Cadre as a party that is a link to government programs. The role of cadres in general for the implementation of the elderly health care center consists of being a community activator, monitoring and counseling (14).

The elderly health care center cadres in Bangkok Village come from community leaders who are seen as having more abilities than other community members. In general, the duties of the elderly health care center cadres are to prepare for the implementation of the elderly health care center, to mobilize the community to attend and participate in the elderly health care center activities, and to assist health workers in registration, counseling, and various other public health efforts, including the implementation of elderly gymnastics. The role of cadres is very influential in the utilization of the elderly health care center services for the elderly so that it can be said that the arrival of the elderly to the elderly health care center depends on how big the participation of cadres is given to the elderly.

Most of the respondents had junior high school education, as many as 13 people (43.33%). Only 1 (3.33%) of the respondents had a tertiary education. The level of education is one of the predisposing factors that affect the utilization of health services by individuals. Educational status affects the utilization of health services because educational status will affect awareness and knowledge about health.

Education is the process of changing the attitudes and behavior of a person or group of people in an effort to mature a person through teaching and training efforts. Although only 1 (one) respondent has a tertiary education, the motivation of most respondents to visit the elderly health care center for the elderly remains high. In this case, information through health education such as counseling about the benefits of the elderly health care center for the elderly can increase the number of visits to the elderly health care center even though the education level of most respondents is low.

The elderly health care center is a community-based health service forum to serve the elderly population by emphasizing health services on promotive and preventive efforts. In addition to health services, the elderly health care center also provide social, religious, educational, skills, sports, arts and culture services, and other services needed by the elderly with the aim of improving the quality of life through improving health and welfare.(16)

The elderly health care center activities are expected to provide convenience for the elderly in obtaining basic health services, so that the quality of life of people in the elderly is well maintained. The elderly should take advantage of the elderly health care center properly, so that the health of the elderly can be optimally maintained and monitored. (17)

The elderly health care center activities for the elderly in Bangkok Village already have complete facilities and infrastructure. The Posyandu for the elderly is routinely held every month, located at the Bangkok Village Hall. Regional midwives and trained cadres manage all the elderly health care center activities, including routine health checks every month, health counseling, and exercise for the elderly every Sunday morning. By participating in the elderly health care center activities on a regular basis, it is hoped that postmenopausal women can live their old age happily and efficiently in family and community life in accordance with their existence.

IV. CONCLUSION

The results of this study indicate a significant correlation between menopause women's motivation and regularity of visits to the elderly health care center. Families are expected to always give attention and support, either physically or psychologically to postmenopausal women to be diligent in visiting the elderly health care center. The elderly health care center cadres are expected to be able to further improve their abilities in terms of knowledge, attitudes and skills as motivators for the surrounding community. Health workers are expected to hold ongoing health counseling activities, especially regarding the benefits, objectives and types of services provided at the elderly health care center so that the elderly, especially postmenopausal women, are motivated to regularly attend the elderly health care center.

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JOINT INTERNATIONAL CONFERENCE AGENDA

17-18th November 2021

DAY	ACTIVITY	RESPONSIBLE EVENT
17 th Novem- ber 2021	Opening Ceremony National Anthem of Indonesia Welcoming dance Welcome speech and report by Chairman Welcome speech by Dean of FIK Unipdu Welcome speech and opening ceremony by Rector Unipdu Speech by Head of Yayasan Pesantren Tinggi Darul Ulum Pray (Doa) Photo Session (via zoom) Education Policy of Indonesia During and After Covid-19 Pandemic in Health Schools 1 st Main Session "Thailand challenges and strategies after covid-19 pandemic in the health school system" 2 nd Main Session "Immune resilient during and after covid-19 pandemic in Taiwan" 3 rd Main Session "Strategies to improve family and community resilience in the face of the covid-19 pandemic" 4 th Main Session "Immune response after covid-19 vaccination" 5 th Main Session "Education in Public Health During the Covid-19 Pandemic" 6 th Main Session "Maternal Health: Past, Present and Moving forward"	Wim Banu Ukhrowi, S.S., M.Pd Operator Operator H. Andi Yudianto, S.Kep., M.Kes Pujiani, S.Kep., Ns., M.Kes Prof. DR. H. Ahmad Zahro, MA Drs. KH. Zaimudin Wijaya As'ad, MS Dr. dr. H. M. Zulfikar As'ad, MMR Operator Dr. H. Emil Elestianto Dardak, B.Bus., M.Sc Assistant Professor Dr. SupapakPhetrasuwan Mahidol University of Thailand Prof. Chiou-Feng Lin, Ph.D Taipei Medical University, Taiwan Dr. Ns. Moch. Maftuchul Huda, M. Kep. Sp.Kom KaryaHusada, Indonesia Dyah Ika Krisnawati, S.Kep, Ns, M.Si, Ph.D Dharma Husada Nursing Academy, Kediri, East Java, Indonesia Dr. Kaeleen Dingle, PhD, MPH (TropHlth) BEduc RN Queensland University of Technology (QUT), Brisbane, Australia DrJerico F Pardosi, PhD Queensland University of Technology (QUT), Brisbane, Australia

DAY	ACTIVITY	RESPONSIBLE EVENT
18 th Novem- ber 2021	7 th Main Session "In this world you will have trouble: developing resilience in nursing students for a post-Covid world" 8 th Main Session "Overcoming compassion fatigue" 9 th Main Session "Living side to side with Covid-19" 10 th Main Session "Social mental health after pandemic covid-19" 11 th Main Session "Spirituality and quality of life after the covid-19 pandemic" Parallel session Public Health 1: OP_01 Public Health 2: OP_02 Fundamenal and Management: OP_03 Medical Surgical: OP_04 Mental Health: OP_05 Nutrition & Herbal: OP_06 Maternity1: OP_07 Maternity2: OP_08 Pediatric: OP_09	Dr. Barbara Richardson, DNP, RN, ARNP, FNP-C Lee University America Dr. Michelle White, DNP, RN, APRN, FNP-BC Lee University America Putu Indraswari Aryanti, S.Kep. Ns., M.Kep Stikes RS Baptis, Indonesia Dr. Byba Melda Suhita, S.Kep. Ns., M.Kes Dean of Nursing and Midwifery program of IIK Strada, Indonesia Dr. Masruroh. S.Kep., Ns., M.Kes Nursing Lecturer of University of Pesantren TinggiDarulUlum, Indonesia Riza Yulawati, SKM, MIPH Mika Vernicia K, SKM. MPH Selvia David Richard, S.Kep., Ns., M.Kep Sahari, SKM Desi Natalia Tryjianti I, S.Kep., Ns., M.Kep Srinalesti Mahanani, S.Kep., Ns., M.Kep Zakiah, S.Keb., Bd., M.Keb Sri Banun Titi Istiqomah, SST. M.Kes Angga Miftakhul Nizar, S.Kep., Ns., M.Kep