

## **Nutrition Care Process for Elderly with Disabilities in the Tempel I Community Health Center Working Area**

Lavia Androviterra Sekar Kencana<sup>1</sup>, Setyowati<sup>2</sup>, Siti Budi Utami<sup>3</sup>  
(<sup>1,2,3</sup>) Nutrition Department, Dietitian Professional Education Program, Poltekkes  
Kemenkes Yogyakarta  
Jl. Tata Bumi No. 3 Banyuraden, Gamping, Sleman  
Email: [laviaterra.work@gmail.com](mailto:laviaterra.work@gmail.com)

### **ABSTRACT**

**Background:** *The increase in life expectancy has led to an increase in the elderly. The elderly tend to be vulnerable to disease and cause their quality of life to decline. This poses a risk of incapacity or disability. Elderly people with disabilities tend to have difficulty accessing health services, therefore they need health care services that are easy to access. Home care nutrition care is a home visit activity that is an attempt of nutrition improvement work.*

**Objective:** *To conduct home care nutrition care for the elderly with disabilities in the working area of Tempel I Health Center.*

**Methods:** *This research used a qualitative approach with a case study design that produces descriptive data in the form of written words from observed individual behavior.*

**Results:** *The results of nutritional screening of elderly people with disabilities show a risk of malnutrition, normal nutritional status, physical/clinical data compos mentis, hypertension, poor medication habits, mild deficit protein intake, and excessive fat intake based on recall. A low-sodium diet and education were given and then evaluated. Resulting in a blood pressure decrease, with the addition of normal energy, protein, fat, and carbohydrate intake.*

**Conclusion:** *Nutritional care process that is carried out as a home care can provide access to elderly people with disabilities while helping to improve their health and nutritional conditions.*

**Keywords:** *Elderly, Disability, Home care, Nutritional Care Process*

# Asuhan Gizi Homecare pada Lansia dengan Disabilitas di Wilayah Kerja Puskesmas Tempel I

Lavia Androviterra Sekar Kencana<sup>1</sup>, Setyowati<sup>2</sup>, Siti Budi Utami<sup>3</sup>  
(<sup>1,2,3</sup>) Jurusan Gizi, Prodi Pendidikan Profesi Dietisien, Poltekkes Kemenkes Yogyakarta  
Jl. Tata Bumi No. 3 Banyuraden, Gamping, Sleman  
Email: [laviaterra.work@gmail.com](mailto:laviaterra.work@gmail.com)

## ABSTRAK

**Latar Belakang:** Peningkatan Angka Harapan Hidup (AHH) menyebabkan bertambahnya kelompok usia lanjut. Lansia cenderung lemah dan rentan terhadap penyakit dan menyebabkan kualitas hidupnya menurun. Hal ini menimbulkan risiko ketidakmampuan atau disabilitas. Lansia dengan disabilitas cenderung kesulitan dalam mengakses layanan kesehatan sehingga memerlukan upaya pengasuhan yang mudah untuk diakses. Asuhan gizi *home care* merupakan kegiatan kunjungan ke rumah yang merupakan bagian dari upaya perbaikan gizi.

**Tujuan:** Melakukan asuhan gizi *home care* terhadap lansia dengan disabilitas di wilayah kerja Puskesmas Tempel 1.

**Metode:** Digunakan penelitian kualitatif dengan rancangan studi kasus yang menghasilkan data deskriptif berupa kata-kata secara tertulis dari perilaku individu yang diamati.

**Hasil:** Hasil skrining gizi lansia dengan disabilitas memiliki resiko malnutrisi, status gizi normal, data fisik/klinis composmentis, hipertensi, kebiasaan minum obat buruk, asupan protein defisit ringan, serta asupan lemak berdasarkan *recall* berlebih. Diberikan diet rendah natrium dan edukasi gizi kemudian dilakukan evaluasi. Didapatkan tekanan darah menurun dan asupan energi, protein, lemak, dan karbohidrat normal.

**Kesimpulan:** Asuhan gizi yang dilakukan secara *home care* dapat memberikan akses bagi lansia dengan disabilitas sekaligus membantu memperbaiki kondisi kesehatan dan gizi.

**Kata Kunci:** Lansia, Disabilitas, Home care, Proses Asuhan Gizi Terstandar