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The Relationship Between Implementation of the Healthy Living Community Movement (Germas) Program Regarding the Health of the Elderly in the Rappang Health Center Working Area

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ABSTRACT

Introduction: One of the main problems facing public health services is the global trend of an increasingly aging society which continues to pose major challenges for policy makers and health service providers as well as socio-economic challenges in the health sector. A number of challenges were encountered during the introduction of the GERMAS program, including a lack of awareness regarding physical exercise for the elderly and the importance of physical fitness. Health services rarely provide social education, thus contributing to the ignorance of the elderly.

Objective: To find out the relationship between the implementation of the healthy living community movement (GERMAS) program on the health of the elderly in the Rappang Community Health Center Working Area, Panca Rijang District..

Method: A cross-sectional technique is employed in the descriptive-analytic study design. The sample in this study was 68 reapondents taken using purposive sampling. This study was carried out at the Rappang Community Health Center's operational space, Panca Rijang District, Sidenreng Rappang Regency.

Result: From this research, the statistical results of the Chi-Square Test for the physical activity variable were obtained with a significance of 0.000 ($p < 0.05$), the fruit and vegetable consumption variable had a significance value of 0.025 ($p < 0.05$), the smoking behavior variable had a significance value of 0.000 ($p < 0.05$), the alcohol consumption variable has a significance value of 0.590 ($p > 0.05$), the periodic health check variable has a significance value of 0.000 ($p < 0.05$), the variable maintaining environmental cleanliness has a significance value of 0.007 ($p < 0.05$), and the variable m uses standard toilets with a significance value of 1.000 ($p > 0.05$).

Conclusion: The conclusion that can be drawn is that the GERMAS indicators have a significant relationship with the health of the elderly, namely physical activity, consuming fruit and vegetables, smoking behavior, regular health checks and maintaining environmental cleanliness.

Keywords: GERMAS; Health; Elderly

INTRODUCTION

The Indonesian Ministry of Health has established a public health program action plan for 2020 to 2025 with 5 national priority initiatives, namely Improving MCH, Family Planning and Reproductive Health, Accelerating Nutrition Improvement, Disease Control, Strengthening Health Systems and POM, and Strengthening GERMAS. GERMAS (Healthy Living Community Movement) is a national movement in Indonesia that provides direction to encourage the improvement of healthy living and prevent disease through a systematic and planned approach that involves all components of society. However, there are several challenges in implementing GERMAS, including: Lack of awareness and understanding: many elderly people still have limited knowledge and understanding of GERMAS and healthy living practices (1).

Through various health care programs, the Indonesian government continues to improve health. The GERMAS program is one of the government's initiatives. It is a health improvement and development movement aimed at efforts to increase everyone's knowledge about the importance of leading a healthy lifestyle to maximize public health. It focuses on three aspects of behavior modification: doing physical exercise, eating fruits and vegetables, and having regular check-ups to identify risk factors in each individual.

One of the countries facing a rapid increase in NCD (Non Communicable Disease) related deaths, and prevalence of NCDs including obesity, hypertension, and diabetes in the elderly is Indonesia (2). The health condition that is a big test faced by Indonesia today is the Triple Weight health condition, namely the presence of diseases that cannot be overcome, the increase in NCDs (Non-Communicable Diseases) and infections that should be resolved again. The phenomenon of an increasing number of elderly people in the world is arguably the most significant economic, health and social challenge we face today. In addition, one of the major epidemiologic trends today is the increase in chronic and degenerative diseases. Each individual's aging process can result in a variety of physical, psychological and social problems.

According to the Total Population Information Sheet provided by the Reference Population Department, the world's elderly population has reached the age of 65, more than 8% of the 7 billion obtained in 2012. The overall population is estimated to be 564 million people. Nonetheless, Asia appears to have 53% of the world's elderly population. Currently, there are 142 million people over the age of 60 in the 11 countries of the WHO organization in Southeast Asia, and this number is expected to increase rapidly by 2050 (3).

Data from the Central Bureau of Statistics shows that by 2022, 10.48% of Indonesia's population will be old. Compared to the previous year which amounted to 10.82%, there was a decrease of 0.34% points. The elderly dependency ratio will fall to 16.09 in 2022 as the percentage of the population ages. Based on Susenas data as of March 2022, the percentage of the elderly population is 10.48 percent, while the percentage of elderly dependency is 16.09. (4). The profile of the elderly population of South Sulawesi province conducted in 2020 shows that Sidenreng Rappang Regency is the district with the largest elderly population, totaling 319,990 people from 12 existing sub-districts. The number of elderly people in the Panca Rijang sub-district area as of the implementation of the 2020 population census was 31,808 people (5).

The health problems faced by the elderly population in South Sulawesi, are mental health problems, especially depression and The increasing number of elderly people in the region has led to an increase in the number of households headed by elderly people, which can increase the decline in the effectiveness of their lives (6).

The agency that plays an active role in the implementation of the GERMAS program in Kecamatan Panca Rijang is the Puskesmas. The Puskesmas is responsible for communicating and broadcasting the impact of the GERMAS program in its area. This involves collecting health data, analyzing trends, and assessing the effectiveness of health interventions. The ongoing GERMAS elderly health program is implementing posyandu (checking weight, height, abdominal circumference and blood pressure) and elderly exercise. However, the implementation of the GEMAS program in the working area of Puskesmas Rappang, Panca Rijang District is not going according to plan, namely the seven GERMAS indicators have not been fully implemented so that it requires a more timely and rigorous evaluation.

After observing these events, the author would like to raise this issue for scientific investigation. Because to identify the obstacles that the elderly may face in accessing health services, programs that can improve the physical and mental health of the elderly. Including prevention programs, chronic disease management, and mental health care that can make a positive contribution to their quality of life, and to find out the extent to which the GERMAS program is able to deal with the health problems of the elderly in Panca Rijang District. The title raised: “The Relationship between the Implementation of the GERMAS Program and the Quality of Elderly Health in the Working Area of the Rappang Puskesmas.

This research model used is the SOR model (Stimulus, Organism, Response). Houland proposed this theory in 1953 which was utilized to predict potential reactions due to stimuli and information about the properties of the organism (communicant). At first, the way of behavior was described as a series of impulse reactions, but it was changed by going down on the creature so that it became S-O-R which emphasized that humans are life forms.

Subsequently, the Organ Reaction enhancement hypothesis centered on the reason that changes in mentality depend on the nature of the enhancement that speaks to the being, it makes sense that behavior is a functioning subject and also a latent beneficiary. According to the method of S-O-R theory, social behavior can be understood by analyzing the stimuli given and received. These stimuli have a certain influence and are reinforced with rewards or punishments based on the response displayed (7). The SOR (Stimulus, Organism, Response) model and this study have a connection that the stimulus in question is the implementation of the GERMAS program which includes physical activity, a diet high in fruits and vegetables, not consuming alcoholic beverages and tobacco, conducting routine checks. The stimulus is the implementation of the GERMAS program, which includes physical activity, eating a high fruit and vegetable diet, not consuming alcoholic beverages and tobacco, conducting regular check-ups, maintaining environmental hygiene, and using the restroom according to health regulations. Of concern are senior citizens in the operating area of Puskesmas Rappang, Panca Rijang District. The quality of elderly health is a questionable reaction.

METHOD

The research design used in this study was cross-sectional with a quantitative analytic survey research design. a survey that investigates the relationship between two related or unrelated parameters. Research conducted using numerical or additional quantitative data is called quantitative analytic research. Conducted in the working area of the Rappang Health Center to obtain data directly from the population under study. Namely covering villages and villages namely, Rappang, Lalebbata, Macorawalie, Kadidi, Timoreng Panua, Bulo Wattang, Bulo, and Cipotakari. The population of this study was all elderly people in the working area of the Rappang Health Center who actively or passively attended health services starting from the last 3 months before this study was conducted. The total sample in this study amounted to 68 elderly people using the Lameshow formula who had met the predetermined criteria.

An assortment of essential and optional information was used to collect research information. Before collecting essential information, a morale survey was completed. It plans to provide insurance coverage to the elderly. Before collecting essential information, members will get clarification on the idea of exploration. The information check applied is insight explanation and Chi square. The following instruments will be used to collect information for this exploration: (a) A survey sheet containing data on sample qualities, such as the elderly's name, orientation, age, and educational foundation. (b) Surveys regarding active work, eating food grown from the ground, smoking, drinking alcohol, regular check-ups, maintaining ecological tidiness, and utilizing latrines according to principles (GERMAS implementation survey). (c) A PC that uses SPSS programming to actually view information.

RESULTS

Quantitative Research

The research findings are presented below in accordance with the findings of the investigation and data processing that has been carried out.

Table 1. *Sample Characteristics*

Characteristics	N	%
Gender		
Male	18	26.5
Female	50	73.5
Age		
60-70 Years	43	63.2
71-80 Years	22	32.4
81-90 Years	3	4.4
Education		
Not in School	23	33.8
Elementary	18	26.5
High School	6	8.8
Body Condition		
Suffering from Disease	55	80,9
Healthy	13	19,1

Based on table 1, it shows that the sample is dominated by elderly people with female gender as many as 50 samples (73.5%), the majority of samples at the age of 60-70 years as many as 43 samples (63.2%), the majority of sample education has never been to school as many as 23 samples (33.8%). The majority of the sample's body condition since this study was conducted in a state of illness as many as 55 samples (80.9%).

Table 2. Relationship between Physical Activity and Elderly Health

Activity Physical	Health Condition						P-Value
	Activity Sickness		Healthy		Total		
	N	%	N	%	N	%	
Poor	45	93,8	3	6,3	48	100	0,000
God	10	50,0	10	50,0	20	100	
Total	55	80,9%	13	19,1	68	100	

Table 2 shows the relationship of physical activity to health in the elderly in the working area of the Rappang Health Center, Panca Rijang District. There are elderly people who are in the category of less physical activity and are suffering from disease 45 people (93.8%), elderly people who are in the category of less physical activity and healthy body condition 3 people (6.3%), elderly people with physical activity in the good category and suffering from disease 10 people, and elderly people with physical activity in the good category and healthy body condition 10 people (50%). From this study, the chi-square result is 0.000 ($p < 0.05$) which shows that there is a significant correlation between the relationship between physical activity and the health of the elderly in the working area of the Rappang Health Center, Panca Rijang District.

Table 3. Relationship between Fruit and Vegetable Consumption and Elderly Health

Consume Fruits and Vegetables	Kondisi Kesehatan						P-Value
	Activity Sickness		Healthy		Total		
	N	%	N	%	N	%	
Poor	30	93,8	2	6,3	32	100	0,025
Good	25	69,4	11	30,6	36	100	
Total	55	80,9	13	19,1	68	100	

Table 3 shows the relationship of consuming fruits and vegetables to health in the elderly in the working area of the Rappang Health Center, Panca Rijang District. There are elderly people who are in the category of less consuming fruits and vegetables and are suffering from diseases 30 people (93.8%), elderly people who are in the category of less consuming fruits and vegetables and healthy body conditions 2 people (6.3%), elderly people who are in the category of good consuming fruits and vegetables and are suffering from diseases 25 people (69.4%) and elderly people who are in the good category and healthy body conditions 11 people (30.6%). From this study, the chi-square result is 0.025 ($p < 0.05$) which shows that there is a significant correlation between the relationship between consuming fruits and vegetables and the health of the elderly in the working area of the Rappang Health Center, Panca Rijang District.

Table 4. Relationship between Smoking Behavior and Elderly Health

Perilaku Merokok	Kondisi Kesehatan						P-Value
	Activity Sickness		Healthy		Total		
	N	%	N	%	N	%	
Poor	51	89,5	6	10,5	57	100	0,000
God	4	36,4	7	63,6	11	100	
Total	55	80,9	13	19,1	68	100	

Table 4 shows the relationship of smoking behavior to health in the elderly in the working area of Puskesmas Rappang Panca Rijang District. There are elderly people who are included in the category of less in anticipating smoking behavior and are suffering from 51 people (89.5%), elderly people who are included in the category of less in anticipating smoking behavior and healthy body condition 6 people (10.5%), elderly people who are included in the good category in anticipating smoking behavior and are suffering from 4 people (36.4%), and elderly people who are included in the good category in anticipating smoking behavior and healthy body condition 7 people (63.6%). From this study, the chi-square result is 0.000 ($p < 0.05$) which shows that there is a significant correlation between

the relationship between smoking behavior and the health of the elderly in the working area of Puskesmas Rappang, Panca Rijang District.

Table 5. Relationship between Alcohol Consumption and Elderly Health

Tidak Mengkonsumsi Alkohol	Kondisi Kesehatan						P-Value
	Activity Sickness		Healthy		Total		
	N	%	N	%	N	%	
Poor	5	100	0	0,0	5	100	0,590
God	50	79,4	13	20,6	63	100	
Total	55	80,9	13	20,6	68	100	

Table 5 shows the relationship of alcohol consumption behavior to health in the elderly in the working area of Puskesmas Rappang, Panca Rijang District. There are elderly people who are included in the category of less in anticipating alcohol consumption behavior and are suffering from disease 5 people (100%), elderly people who are included in the category of less in anticipating alcohol consumption behavior and healthy body condition 0 people (0%), elderly people who are included in the category of good in anticipating alcohol consumption behavior and are suffering from disease 50 people (79.4%), and elderly people who are included in the category of good in anticipating alcohol consumption behavior and healthy body condition 13 people (20.6%). From this study, the chi-square result was 0.590 (p> 0.05) which showed that there was no significant correlation between the relationship between smoking behavior and the health of the elderly in the working area of Puskesmas Rappang, Panca Rijang District.

Table 6. Relationship between Periodic Health Checks and Elderly Health

Pemeriksaan Kesehatan Berkala	Kondisi Kesehatan						P-Value
	Activity Sickness		Healthy		Total		
	N	%	N	%	N	%	
Poor	49	94,2	3	5,8	52	100	0,000
God	6	37,5	10	62,5	16	100	
Total	55	80,9	13	19,1	68	100	

Table 6 shows the relationship of conducting regular health checks on health in the elderly in the working area of the Rappang Health Center, Panca Rijang District. There are elderly people who are in the category of lack of regular health checks and are suffering from diseases 49 people (94.2%), elderly people who are in the category of lack of regular health checks and healthy body condition 3 people (5.8%), elderly people who are in the category of good regular health checks and are suffering from diseases 6 people (37.5%), and elderly people who are in the category of good regular health checks and healthy body condition 10 people (62.5%). From this study, the chi-square result is 0.000 (p < 0.05) which shows that there is a significant correlation between the relationship between periodic health checks and health in the elderly in the working area of the Rappang Health Center, Panca Rijang District.

Table 7. Relationship of Maintaining Environmental Hygiene with Elderly Health

Menjaga Kebersihan Lingkungan	Kondisi Kesehatan						P-Value
	Activity Sickness		Healthy		Total		
	N	%	N	%	N	%	
Poor	34	94,4	2	5,6	36	100	0,007
God	21	65,6	11	34,4	32	100	
Total	55	80,9	13	19,1	68	100	

Table 7 shows the relationship of maintaining environmental hygiene to health in the elderly in the working area of the Rappang Health Center, Panca Rijang District. There are elderly people who are in the category of poor

environmental hygiene and are suffering from disease 34 people (94.4%), elderly people who are in the category of poor environmental hygiene and healthy body condition 2 people (5.6%), elderly people who are in the category of good environmental hygiene and are suffering from pain 21 people (65.6%), and elderly people who are in the category of good environmental hygiene and healthy body condition 11 people (34.4%). From this study, the chi-square result is 0.007 ($p < 0.05$) which shows that there is a significant correlation between the relationship between maintaining environmental hygiene and health in the elderly in the working area of the Rappang Health Center, Panca Rijang District.

Table 8. The relationship between the use of latrines according to standards with the health of the elderly

Jamban Sesuai Standar	Kondisi Kesehatan						P-Value
	Activity Sickness		Healthy		Total		
	N	%	N	%	N	%	
Poor	2	100	0	0	2	100	1,000
God	53	80,3	13	19,7	66	100	
Total	55	80,9	13	19,1	68	100	

Table 8 shows the relationship between the use of latrines according to standards on health in the elderly in the working area of Puskesmas Rappang Panca Rijang District. There are elderly people who are included in the category of poor use of latrines according to standards and are suffering from diseases 2 people (100%), elderly people who are included in the category of poor use of latrines according to standards and healthy body condition 0 people (0%), elderly people who are included in the category of good use of latrines according to standards and are suffering from diseases 53 people (80.3%), and elderly people who are included in the category of good use of latrines according to standards and healthy body condition 13 people (19.7%). From this study, the chi-square result is 1.000 ($p > 0.05$) which shows that there is no significant correlation between the relationship between the use of latrines according to standards on health in the elderly in the working area of the Rappang Health Center, Panca Rijang District.

Review Articles

Puskesmas Rappang is the implementing unit for health development in Panca Rijang Sub-district which covers ± 48 km² and is located 10 km north of Pangkajene, the capital of Sidenreng Rappang Regency. UPT Puskesmas Rappang has difficulty in carrying out its operations because of its relatively large operating area, which is dominated by lowlands with large expanses of plantation and agricultural land.

Doing physical activity, eating vegetables and fruit, not smoking, not drinking alcohol, periodic health checks, environmental hygiene and the use of toilets spread across each Puskesmas area are part of the implementation of GERMAS at Puskesmas Labang. The ongoing GERMAS elderly health program is carrying out posyandu (checking weight, height, abdominal circumference and blood pressure) and elderly exercise. However, the implementation of the GEMAS program in the Puskesmas Rappang working area is not going according to plan, namely the seven GERMAS indicators have not been fully implemented, which requires a more timely and rigorous evaluation.

DISCUSSION

The significance value of 0.000 ($p < 0.05$) indicates that there is a relationship between health status and the level of physical activity of the elderly, in accordance with the research findings. The findings showed that 45 out of 68 elderly lacked physical exercise. Aryanto's research, which showed a relationship between physical exercise and the quality of life of the elderly, reinforced the findings of this study. Specifically, 30 out of 45 (66.6%) of the elderly did adequate physical exercise (8). In accordance with Salsabilla's findings, statistical analysis of the Chi-Square test resulted in a sig value of 0.000 ($p<0.05$), meaning that H1 was accepted and H0 was rejected. This means that it can be concluded that there is a relationship between physical activity and balance in Malang elderly, with a coefficient value of 0.007, the two variables have a high level of relationship (9).

Every human being has an inseparable habit of moving. Humans never stop moving, even when they sleep. As technology advances in all areas of life, there is a decline in understanding of the need for physical movement for human health (10). Degeneration will result in a decline in the physiological functions of the elderly, resulting in lower levels of physical activity and balance. The ability to keep our muscles and nervous system in an effective posture as we move is known as balance. Seniors who engage in regular physical exercise can maintain balance by improving the nervous system, which impacts neuromuscular, cognitive function and muscle strength.

A significant score of 0.025 ($p < 0.05$) indicates that there is a relationship between the health status of the elderly and fruit and vegetable consumption. The results showed that 30 out of 68 elderly consumed insufficient amounts of fruits and vegetables. The Elderly study, which found that older people who followed the recommended fruit and vegetable intake guidelines had higher cognitive ability than older people who consumed fewer fruits and vegetables, supports the findings of the study (11). Hidayat's research revealed that physical exercise and a healthy diet, including eating fruits and vegetables high in antioxidants, can help the elderly stay fit. One way to achieve this is by blocking the work of oxidant enzymes and decreasing the development of new reactive oxygen species. In addition, eating fruit has an impact on the physical fitness level of an older person. One of the positive impacts of eating more fruits and vegetables on the body is improved fitness (12).

Fruits and vegetables eaten raw are rich in vitamins and minerals. These can be found in plant parts, leaves, flowers, stems, tubers, and fruits. The German Nutrition Society states that (2012) (13), Eating fruits and vegetables as needed can help prevent weight gain, cancer, stroke, CHD, hypertension, and Alzheimer's (14).

The significance value of 0.000 ($p < 0.05$) indicates that there is a relationship between smoking behavior and elderly health, in accordance with the research findings. The results of 51 out of 68 elderly people whose smoking habits were in the bad group showed this. According to Supriadi's research, 94.6% of smokers are heavy smokers (over 20 years), 64.1% are moderate smokers (11-20 cigarettes per day), 55.4% are non-filter smokers, and 76.1% of non-filter smokers suffer from hypertension. Considering that the sign value of 0.041 is smaller than 0.05, it seems that there is a relationship between the number of cigarettes smoked and the degree of hypertension in elderly men in Ciamis Village (15).

Adisya Arinditha's research which shows the relationship between smoking habits and the prevalence of hypertension in the elderly in Bintauna District also supports this study. In accordance with Siregar's study (16). With a value of = 0.003, the findings indicate a relationship between smoking habits and the disease suffered by the elderly, namely hypertension. Since it is less than 0.05, this graph shows a very high relationship. Therefore, with a significance value of $p = 0.003 < 0.05$, it can be proven that smoking and hypertension have a relationship (17).

Smoking increases blood pressure levels, with an increase in systolic blood pressure by four mmHg. Tobacco products contain nicotine, which causes the nervous system to produce substances that can narrow blood vessels and increase blood pressure. According to epidemiological studies, smoking increases the risk of a number of chronic diseases in old age, such as lung cancer, chronic obstructive pulmonary disease (COPD), coronary heart disease, stroke and peripheral vascular disease. In addition, smoking is also associated with poorer quality of life in old age, increased risk of dementia, and decreased cognitive function (18).

The significance value of 0.590 ($p > 0.05$) indicates that there is no relationship between the health status of the elderly and alcohol consumption habits. This can be seen from the data showing that 50 elderly people have good alcohol consumption habits and 5 out of 68 elderly people have poor alcohol consumption habits. Based on Sukma's research, the p value is 1,000, and because the p value is more than 0.05, it can be said that there is no relationship between the incidence of hypertension and elderly alcohol consumption. A person's health will be affected in the long term due to alcohol use. Similar to carbon monoxide, alcohol increases blood pressure and blood acidity (19).

The significance value of 0.000 ($p < 0.05$) indicates that there is a relationship between the health status of the elderly and routine health checks, based on the research findings. The results of routine health checks showed this in 49 out of 68 elderly in the poor group who had routine health checks. This finding is in line with research published in Revista Conrado, which found that there is a strong correlation between elderly health and routine health checks. This is because regular health checks can identify health problems early and provide appropriate treatment. By monitoring blood pressure and cholesterol and encouraging physical activity, it aims to improve the health status of the elderly by reducing sedentary behavior, which is known to trigger metabolic syndrome, a condition that is more common in the elderly (20). Citramas and Tadjuddin provide support for the findings of the study, showing a significant correlation (p value <0.001) between Daily Living Activities and the degree of depression experienced by elderly residents of the Tresna Werdha Budhi Dharma Bekasi Social Home (21).

The significance value of 0.007 ($p < 0.05$) indicates a relationship between elderly health and maintaining environmental hygiene, based on the research findings. The findings of 34 out of 68 elderly who routinely conduct health checks and fall into the poor category show this. According to Pandhita's research which produced statistical findings, the p value was $0.000 < 0.05$. Thus, it can be said that keeping the environment clean has an impact on the health of senior citizens who participate in the implementation of Germas. Maintaining a cleaner environment is one of the ways the healthy living movement contributes to better environmental quality. With waste control, we can utilize this software to keep the environment clean on a local scale, such as in the family (22).

The significance value of 1,000 ($p > 0.05$) indicates that the findings do not support an association between the practice of regular toilet use and the health status of the elderly. Only 2 elderly people in the poor group who followed standards in using the restroom and 53 elderly people in the excellent category who followed standards in

using the restroom were included in the results. In accordance with Rahmadani's findings, there was no significant relationship between elderly health and ownership and use of standardized toilets (23)

CONCLUSION

Based on the findings of the study and discussion around the implementation of GERMAS behavior in the working area of Puskesmas Rappang, it can be concluded that physical activity behavior is related to the quality of elderly health, as evidenced by a significance value of 0.000 ($p < 0.05$). The behavior of consuming fruits and vegetables carried out by the elderly has a significant relationship with the quality of their health, as evidenced by a significance value of 0.025 ($p < 0.05$). Smoking behavior has a meaningful relationship with the quality of health experienced by the elderly as evidenced by a significance value of 0.000 ($p < 0.05$). Alcohol consumption behavior does not have a meaningful relationship with the quality of health of the elderly as evidenced by a significance value of 0.590 ($p > 0.05$). Elderly who routinely conduct regular health checks are proven to have a relationship with their health quality, with a significance value of 0.000 ($p < 0.05$). Elderly who are accustomed to maintaining environmental cleanliness have a much better health quality as evidenced by a significance value of 0.007 ($p < 0.05$) which means they have a relationship. In the findings of this study, elderly people who use latrines according to standards or otherwise do not have a meaningful relationship with their health quality, as evidenced by a significance value of 1.000 ($p > 0.05$).

SUGGESTION

This study recommends that future researchers conduct a comprehensive evaluation of the implementation of the GERMAS program, including aspects of implementation, participant compliance, availability of resources, and the effectiveness of interventions carried out as well as identifying the strengths and weaknesses of the program. Future researchers are expected to review the impact of the GERMAS program on the health of the elderly by paying attention to changes in health parameters such as blood pressure, blood sugar levels, body mass index, and other risk factors.

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