



Gerontological Nursing Care with Dementia at the Budhi Mulia 01 Cipayung Jakarta Social Home for the Elderly

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ABSTRACT

Dementia is a degenerative disorder of intellectual function that can affect memory, thought processes, judgment, interpretation, and communication, both verbally and in writing. This condition often occurs in the elderly and impacts an individual's ability to carry out daily activities. This study used a case study method with a geriatric nursing care approach for dementia clients at the Panti Tresna Werdha Budhi Mulia 01 Cipayung, East Jakarta. Data collection was carried out using a geriatric nursing care assessment format through the stages of assessment, diagnosis, intervention, implementation, and evaluation. The results of the assessment showed that both clients had almost the same complaints, especially memory impairment and the risk of falling in the elderly aged over 65 years. The first client experienced memory impairment, self-care deficit, and impaired sense of comfort, while the second client experienced memory impairment, impaired verbal communication, hearing impairment, and self-care deficit. Nursing interventions were carried out through memory stimulation and concentration training. After nursing actions were carried out, the client's condition showed quite good improvement. The assessment of geriatric nursing care for both clients revealed nearly identical complaints. Four nursing diagnoses were identified in the first client, while three were identified in the second client. Interventions and implementation were carried out based on a predetermined action plan, supported by adequate facilities and resources, and direct evaluation. It is recommended that nursing home administrators and healthcare workers continue to collaborate in monitoring the health conditions of the elderly so that clients can maintain their activities and quality of life.

Introduction

The increase in the number of elderly people is one indicator of the success of health development in a country. However, increasing life expectancy is also accompanied by an increase in health problems due to degenerative processes, one of which is dementia. Dementia is a syndrome of cognitive decline that affects memory, thinking, orientation, understanding, calculation, learning, language, and decision-making. This condition occurs progressively, causing elderly people to become dependent on others for daily needs. According to the World Health Organization (WHO), dementia is one of the leading causes of disability and dependency in older adults worldwide. The WHO states that more than 57 million people live with dementia and nearly 10 million new cases occur annually. This condition is expected to continue to increase as the global elderly population grows (World Health Organization, 2025).

In Indonesia, the increasing number of elderly people has also led to a rise in the prevalence of degenerative diseases, including dementia. According to data from the Central Statistics Agency (BPS), the number of elderly people in Indonesia continues to increase annually, making geriatric health issues a challenge that requires serious attention from healthcare professionals, particularly nurses. Elderly people with dementia often experience short-term and long-term memory impairments, behavioral changes, communication difficulties, emotional disturbances, and a decreased ability to perform daily activities independently. This decline in function requires ongoing assistance and support to ensure basic needs are met and their quality of life is maintained.

Dementia not only impacts the physical condition of the elderly but also affects their psychological, social, and spiritual well-

being. Elderly people with dementia often experience confusion, anxiety, irritability, social isolation, and even depression due to their inability to recognize their surroundings and the people around them. Furthermore, families and caregivers also experience emotional and physical burdens in caring for patients with dementia, as they require intensive supervision. Therefore, comprehensive and continuous healthcare services are needed through a geriatric nursing approach. Geriatric nursing care focuses on meeting the needs of older adults holistically, taking into account the biological, psychological, social, and spiritual changes that occur as a result of aging.

Nurses play a crucial role in providing nursing care to older adults with dementia, encompassing promotive, preventive, curative, and rehabilitative aspects. Nursing interventions aim to maintain existing cognitive function, improve daily activity abilities, prevent complications, and enhance quality of life. Interventions include cognitive stimulation therapy, reality orientation therapy, therapeutic communication, daily activity training, behavioral management, fall risk prevention, and emotional and spiritual support. Research shows that non-pharmacological approaches through cognitive stimulation and positive social interactions can help slow cognitive decline in older adults with dementia (Livingston et al., 2024).

The Tresna Werdha Budhi Mulia 01 Cipayung Social Home in Jakarta is a social service institution that provides services and care for neglected elderly people and those with chronic health problems, including dementia. Elderly people living in social homes are at higher risk of experiencing psychosocial disorders due to separation from family, environmental changes, and limited social activities. Furthermore, elderly people with dementia who live in homes require more optimal supervision and care due to the risk of injury, behavioral disorders, decreased communication skills, and dependence on basic needs. Therefore,

geriatric nursing services in social homes must be carried out professionally, comprehensively, and continuously to maintain the health of the elderly.

Implementing geriatric nursing care for elderly people with dementia requires nurses to conduct a comprehensive assessment to identify physical, cognitive, emotional, and social changes experienced by the elderly. Following the assessment, nurses can establish appropriate nursing diagnoses, such as memory impairment, risk of injury, self-care deficits, impaired verbal communication, social isolation, and sleep disturbances. Next, nurses develop an intervention plan tailored to the patient's condition and needs. The approach must be patient-centered so that the elderly continue to feel valued, safe, and comfortable while receiving care in a social care facility.

Furthermore, the success of geriatric nursing care for dementia patients is also influenced by a supportive environment and the involvement of other healthcare professionals. A safe, comfortable, and structured environment can help reduce confusion and improve orientation in older adults to their surroundings. Social support and group activities are also crucial for enhancing social interaction and preventing social isolation in older adults with dementia. Therefore, collaboration between nurses, other healthcare professionals, nursing home administrators, and caregivers is essential to achieving optimal care goals.

Based on the description, it can be seen that dementia is a health problem that requires special attention in geriatric nursing services. Elderly people with dementia require comprehensive nursing care to help maintain their remaining functions, improve their quality of life, and prevent complications due to cognitive decline. Therefore, the author is interested in raising the case of

"Gerontic Nursing Care with Dementia at the Tresna Werdha Budhi Mulia 01 Cipayung Jakarta Social Home" as a form of implementing holistic geriatric nursing services for elderly people with cognitive impairment.

Method

This study used a descriptive case study design on elderly with dementia living in the Budi Mulia 01 Tresna Werdha Social Home. The subjects were 1–2 elderly aged ≥ 60 years who were diagnosed with dementia and were willing to participate in the study. Data collection was carried out through interviews, observations, physical examinations, and documentation studies using the gerontic nursing assessment format and the Mini Mental State Examination (MMSE) to assess cognitive function. Data were analyzed based on the nursing process which includes assessment, diagnosis, intervention, implementation, and evaluation according to the SDKI, SIKI, and SLKI. This study has paid attention to the principles of research ethics by obtaining permission from the home, informed consent from respondents or guardians, and maintaining the confidentiality of the subject's identity.

The research method used in this study is a case study with a non-experimental approach, employing qualitative methods and a descriptive design. The descriptive approach aims to systematically and objectively describe the phenomena or conditions that occur in the research subjects, in accordance with real-world conditions. Qualitative descriptive research was used to gain an in-depth understanding of the geriatric nursing care process for older adults with dementia through observation, interviews, and documentation throughout the care process (Sugiyono, 2022).

The approach applied in this study focuses on the implementation of comprehensive geriatric nursing care for older adults with dementia. The stages of

nursing care include assessing the patient's condition, determining a nursing diagnosis, developing an intervention plan, implementing nursing actions, and evaluating the results of the interventions. Through this approach, the authors were able to identify health problems experienced by older adults holistically, including biological, psychological, social, and spiritual aspects, so that interventions can be optimally tailored to the patient's needs (PPNI, 2021).

Results and Discussion

1. Research Location Overview

This research was conducted at the Tresna Werdha Budhi Mulia 01 Social Home, a social home owned by the Jakarta Provincial Government that provides social welfare services for neglected elderly people. Located in the Cipayung area of East Jakarta, this social home offers a conducive environment that supports healthcare and care for the elderly. The home plays a crucial role in providing housing, healthcare, basic needs, and social support for elderly people who no longer have families or are experiencing limitations in self-care. The Budhi Mulia 01 Social Home for the Elderly has adequate supporting facilities to support geriatric services, such as treatment rooms, an activity room for the elderly, a health examination room, a place of worship, a dining room, and an open area for social activities and group therapy activities. Healthcare services at the home are provided routinely through monitoring of the physical, mental, and social conditions of the elderly by health workers, including nurses. In addition, the home also provides special attention to elderly people with chronic illnesses and cognitive disorders such as dementia through ongoing support and supervision.

The majority of residents at the nursing home are elderly with various degenerative health problems, such as hypertension, diabetes mellitus, stroke,

mobility impairment, and cognitive impairment. Elderly people with dementia at this home generally experience memory decline, communication difficulties, behavioral changes, and dependence in daily activities. These conditions make this social care facility a suitable setting for implementing geriatric nursing care, as nurses can comprehensively assess, intervene, implement, and directly evaluate the elderly's condition.

The structured environment and support of healthcare professionals are supporting factors in implementing geriatric nursing care for elderly people with dementia. In addition to health services, the home also provides social, religious, and daily activities aimed at improving quality of life and maintaining cognitive and psychosocial function in elderly people. Therefore, the Tresna Werdha Budhi Mulia 01 Social Care Center is a relevant and supportive location for research on geriatric nursing care for elderly people with dementia.

2. Study Results

a. Nursing Assessment

Assessment is the initial stage in the nursing process, aiming to gather comprehensive data regarding the patient's physical, psychological, social, and spiritual condition. In elderly individuals with dementia at the Budhi Mulia 01 Social Welfare Home, assessment results generally indicate cognitive decline, such as memory impairment, difficulty recognizing time, place, and person, decreased concentration, and communication difficulties. Furthermore, behavioral changes such as irritability, restlessness, social withdrawal, and dependence in performing daily activities such as bathing, dressing, eating, and toileting are also observed.

During a physical examination, older adults with dementia often experience physical

weakness, impaired mobility, a risk of falls, and disturbed sleep patterns. A psychosocial assessment also reveals feelings of anxiety, loneliness, and social isolation due to limited interaction and decreased communication skills. This data is obtained through interviews, observations, physical examinations, and a review of patient health documentation. A comprehensive assessment is crucial for determining appropriate nursing diagnoses and interventions tailored to the patient's needs (PPNI, 2021).

Subjective Data (SD)	Objective Data (OD)
The patient reports frequently forgetting recent events.	The patient appears confused during communication.
The patient reports difficulty remembering the names of family members or friends.	The patient is unable to correctly identify the date, day, or current location.
The patient reports feeling confused about time and surroundings.	The patient repeatedly asks or answers the same questions.
The caregiver reports that the patient often repeats the same questions.	The patient has difficulty recalling newly provided information.
The caregiver reports that the patient requires assistance with daily activities.	MMSE assessment results indicate cognitive impairment.
The caregiver reports that the patient has difficulty understanding	The patient requires assistance with activities of daily living, such as

simple instructions.	bathing, dressing, and eating.
The patient reports frequently misplacing personal belongings.	The patient's responses are slow and occasionally inappropriate to the questions asked.
The patient reports difficulty remembering recently received information.	The patient demonstrates impaired short-term memory and disorientation.

b. Nursing Diagnosis Based on SDKI

Based on the results of the assessment of elderly people with dementia, several nursing diagnoses that can be established according to the Indonesian Nursing Diagnosis Standards (SDKI) include:

1) Memory Disorders (D.0117)

2) Memory impairment is associated with neurological disorders characterized by frequent forgetfulness, difficulty remembering new information, confusion about time and place, and difficulty recognizing people around them. In patients with dementia, memory impairment is a major problem due to progressive cognitive decline.

3) Self-Care Deficit (D.0109)

4) Self-care deficits are related to cognitive and physical decline, characterized by an inability to bathe, dress, eat, or perform personal hygiene independently. Elderly people with dementia often require the assistance of caregivers or nurses to meet basic daily needs.

5) Risk of Injury (D.0140)

6) Risk of injury is related to impaired orientation, decreased mobility, and impaired environmental perception. Elderly people with dementia are at high risk of falls, getting lost, and injury

due to their inability to recognize their surroundings.

7) Risk of Injury (D.0140)

8) Risk of injury is related to impaired orientation, decreased mobility, and impaired environmental perception. Elderly people with dementia are at high risk of falls, getting lost, and injury due to their inability to recognize their surroundings.

9) Social Isolation (D.0121)

Social isolation is characterized by decreased social interaction, withdrawal, and difficulty communicating with others. This condition often occurs in older adults with dementia due to impaired cognitive and emotional function.

c. Nursing Intervention Plan

Nursing interventions for the elderly with dementia are developed based on the Indonesian Nursing Intervention Standards (SIKI) and tailored to the patient's condition. Interventions that can be provided include:

1) Interventions for Memory Disorders

Nurses stimulate memory and reality orientation by reminding patients of time, place, and people around them. Nurses also provide simple, clear, and repetitive communication to help patients understand information. The patient's environment is made safe and familiar to help improve patient orientation.

2) Interventions for Self-Care Deficits

Nurses assist patients with personal hygiene, eating, dressing, and other daily activities according to the patient's level of dependency. In addition, nurses provide motivation and simple exercises to help patients maintain their existing abilities.

3) Interventions for Injury Risk

Nurses create a safe environment by reducing the presence of hazardous objects, ensuring adequate lighting, installing handrails in certain areas, and supervising patients during activities. Education is also provided to caregivers to ensure optimal injury prevention.

4) Interventions for Social Isolation

Nurses encourage patients to participate in group activities, activity therapy, and social interaction with other older adults. Therapeutic communication is used to increase patients' confidence and comfort in interacting with their surroundings.

Non-pharmacological interventions such as reminiscence therapy, brain gymnastics, music therapy, and cognitive stimulation can also help slow cognitive decline in dementia patients (Livingston et al., 2024).

d. Nursing implementation

Nursing implementation is carried out according to the established intervention plan. At this stage, nurses adopt a therapeutic approach with patients using gentle, simple, and empathetic communication. Nurses assist patients with basic needs such as bathing, eating, dressing, and eliminating according to their abilities. Furthermore, nurses provide reality orientation training by repeatedly introducing the patient to the time, place, and people around them.

To prevent the risk of injury, nurses ensure the patient's environment is safe and comfortable, such as keeping floors dry, avoiding sharp objects, and accompanying the patient while walking. Nurses also engage patients in social activities and simple group therapy to enhance social interaction and maintain cognitive function. Implementation is

carried out continuously, observing the patient's response to the interventions.

e. Nursing Evaluation

Evaluations are conducted to determine the patient's progress after receiving nursing care. Evaluations of dementia patients show that they are beginning to recognize some members of their environment, are more cooperative when communicating, and are experiencing increased involvement in daily activities. Patients also appear calmer, have a reduced risk of injury, and can meet personal hygiene needs with minimal assistance.

However, memory impairment in dementia patients is progressive and requires long-term monitoring and care. Continuous evaluations are conducted to assess the effectiveness of interventions and determine appropriate follow-up actions for the patient's condition. A holistic approach and supportive environment are crucial in improving the quality of life for seniors with dementia in social care facilities.

Conclusion and Suggestion

Conclusion

Nursing care is implemented through assessment, establishing a nursing diagnosis based on the Indonesian Demographic and Health Survey (IDHS), developing interventions, implementing them, and evaluating them. Interventions include cognitive stimulation, reality orientation, assistance with daily activities, injury risk prevention, and enhancing social interaction through therapeutic communication and group activities. Evaluation results indicate increased patient engagement in daily activities, a reduced risk of injury, and improved communication and social interaction responses. Therefore, holistic and continuous gerontic nursing care can help improve the comfort and quality of life of older adults with dementia.

Suggestions

- 1) For Social Institutions
- 2) It is hoped that the Budhi Mulia 01 Tresna Werdha Social Institution can improve geriatric health services through cognitive stimulation, group activity therapy, and optimal supervision for seniors with dementia to maintain their quality of life.
- 3) For Nurses
- 4) Nurses are expected to provide comprehensive and continuous nursing care to elderly people with dementia, as well as improve their therapeutic communication skills and holistic approach to the care of geriatric patients.
- 5) For the Elderly and Caregivers
- 6) The elderly and caregivers are expected to actively participate in social care programs, maintain social interactions, and maintain daily activities within their abilities to help slow cognitive decline.
- 7) For Educational Institutions
- 8) This scientific paper is expected to serve as a reference and learning material for nursing students in understanding the application of geriatric nursing care to the elderly with dementia.
- 9) For Future Researchers
Further research is expected to develop innovative interventions for managing dementia in the elderly, such as reminiscence therapy, music therapy, or technology-based cognitive stimulation therapy to improve the quality of life of dementia patient.

References

- Creswell, J. W., & Creswell, J. D. (2023). *Research design: Qualitative, quantitative, and mixed methods approaches* (6th ed.). SAGE Publications.
- Kurniasih, E., & Pradana, A. A. (2022). Telaah Pengetahuan Keluarga Akan Kondisi Demensia pada Lansia. *Jurnal Ilmu Kesehatan Dharmas Indonesia*, 2(1), 16–22. <https://doi.org/10.56667/jikdi.v2i1.587>
- Livingston, G., Huntley, J., Sommerlad, A., Ames, D., Ballard, C., Banerjee, S., Burns, A., Cohen-Mansfield, J., Cooper, C., Costafreda, S. G., Dias, A., Fox, N., Gitlin, L. N., Howard, R., Kales, H. C., Larson, E. B., Ogunniyi, A., Orgeta, V., Ritchie, K., ... Mukadam, N. (2024). Dementia prevention, intervention, and care: 2024 report of the Lancet standing Commission. *The Lancet*, 404(10452), 572–628.
- Marsigit, J., Moenardi, V. N., Putranto, R., Shatri, H., Irvianita, V., & Faisal, E. (2025). The Aging Population and Dementia: The Need for Comprehensive Palliative Care. *PubMed*, 57(1), 140–149. <https://pubmed.ncbi.nlm.nih.gov/40263673>
- Melsa, S. P., Hendra, D., Hasana, U., & Harahap, A. S. (2025). Implementasi Penerapan Terapi Reminiscence Pada Lansia Dengan Demensia di UPT Pelayanan Sosial Tresna Werdha Husnul Khotimah Pekanbaru. *Jurnal Penelitian Multidisiplin Bangsa*, 2(4), 751–757. <https://doi.org/10.59837/jpnm.v2i4.584>
- Missesa, M., & Syam'ani, S. (2017). *Pengalaman Keluarga Merawat Lansia Demensia Di Wilayah Kerja Puskesmas Menteng*. 7(2), 65–76. <http://e-journal.poltekkes-palangkaraya.ac.id/jfk/article/download/87/53>
- PPNI. (2021). *Standar intervensi keperawatan Indonesia* (Edisi 1, Cetakan 3). Dewan Pengurus Pusat Persatuan Perawat Nasional Indonesia.
- Pradana, A. A., & Rohayati. (2021). FAMILY'S RESILIENCE IN CAREGIVING ELDERLY WITH DEMENTIA: A SYSTEMATIC REVIEW [Review of *FAMILY'S RESILIENCE IN CAREGIVING ELDERLY WITH DEMENTIA: A SYSTEMATIC REVIEW*]. *medRxiv* (Cold Spring Harbor Laboratory). Cold Spring Harbor Laboratory. <https://doi.org/10.1101/2021.06.16.21259058>
- Pratiwi, D. U., Indarwati, R., & Tristiana, R. D. (2021). Factors Associated to Positive Aspects in Caregiving for People Living with Dementia in Family Caregivers. *Media Keperawatan Indonesia*, 4(2), 149–149. <https://doi.org/10.26714/mki.4.2.2021.149-163>
- Townsend, M. C., & Morgan, K. I. (2021). *Psychiatric mental health nursing: Concepts of care in evidence-based practice* (10th ed.). F.A. Davis Company.
- Utari, A., Kusumajaya, H., & Anggraini, R. B. (2025). ANALISIS FAKTOR YANG MEMPENGARUHI KEJADIAN DEMENSIA PADA LANSIA DI PANTI BHAKTI KASIH SITI ANNA TAHUN 2024. *COMMUNITY Jurnal Pengabdian Kepada Masyarakat*, 5(2), 466–475. <https://doi.org/10.51878/community.v5i2.7168>
- Sugiyono. (2022). *Metode penelitian kualitatif untuk penelitian yang*

bersifat eksploratif, interpretif, interaktif dan konstruktif. Alfabet

World Health Organization. (2025). *Dementia.*

<https://www.who.int/news-room/fact-sheets/detail/dementia>

Widyastuti, R. H., Sahar, J., & Rekawati, E. (2025). Development of a Home-Based Holistic Dementia Nursing Intervention Model for Family Caregivers. *Nurse Media Journal of*

Nursing, 15(2), 253–264. <https://doi.org/10.14710/nmjn.v15i2.65049>

Widyastuti, R. H., Sahar, J., Rekawati, E., & Kekalih, A. (2023). Barriers and Support for Family Caregivers in Caring for Older Adults with Dementia: A Qualitative Study in Indonesia. *Nurse Media Journal of Nursing*, 13(2), 188–201. <https://doi.org/10.14710/nmjn.v13i2.55729>