

ANALYSIS OF FACTORS INFLUENCING HEALTHY BEHAVIOR OF THE ELDERLY BASED ON THEORY OF PLANNED BEHAVIOR IN PANTAI LABU DISTRICT, DELI SERDANG

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Abstract

This study aims to analyze the factors that affect the healthy behavior of the elderly in Pantai Labu District, Deli Serdang, based on the Theory of Planned Behavior (TPB). A quantitative approach was used involving 316 respondents who were selected by stratified random sampling. Data were collected through questionnaires and analyzed using multiple linear regression and path analysis. The results showed that attitudes towards healthy behavior, subjective norms, and perceived behavior control significantly influenced the intention to behave healthily. This intention is the main predictor of healthy behavior of the elderly. Attitude has the greatest influence on intention, followed by subjective norms and perceived behavioral control. These findings support the theory of the SDGs and suggest that health interventions for the elderly should be focused on improving positive attitudes, social support, and self-control. This research provides important recommendations for the development of more effective elderly health programs, as well as policies that support access and age-friendly health facilities. These results are also relevant to be applied in similar contexts in other regions.

Keywords: *Healthy Elderly, Theory Of Planned Behavior, Deli Serdang*

INTRODUCTION

The health of the elderly is an increasingly important issue as the number of elderly population in Indonesia increases. The elderly are an age group that is vulnerable to various health problems, both physical and mental (Tuwu and Tarifu 2023). Therefore, healthy behavior is one of the key factors that can help the elderly in maintaining their quality of life. Healthy behavior in the elderly includes various aspects, such as a balanced diet, sufficient physical activity, stress management, and control of chronic diseases. All of this is part of an effort to extend life expectancy and improve overall well-being. However, healthy behavior does not just appear. Various factors affect the extent to which the elderly can implement healthy behaviors in their daily lives. These factors can be individual, such as knowledge about health, attitudes toward health, and confidence in self-efficacy (Santosa and Trisnain 2019). In addition, social and environmental factors, such as support from family and community, as well as access to health services also play an important role.

In this study, the Theory of Planned Behavior (TPB) is used as a theoretical framework to analyze the factors that affect healthy behavior in the elderly. TPB is a social psychology theory developed by Ajzen in 1985 (Achmat 2010). This theory posited that a person's behavior is influenced by the intention to behave, which in turn is influenced by three main factors: attitudes towards behavior, subjective norms, and perceived behavioral control. Attitude towards behavior refers to the extent to which a person has a positive or negative evaluation of a particular behavior. Subjective norms include an individual's perception of social pressure to perform or not to perform such behavior. Meanwhile, perceived behavioral control has to do with an individual's belief in their ability to perform the behavior, despite obstacles or challenges.

In recent decades, the elderly have become one of the fastest-growing demographic groups around the world, including in Indonesia. This growth of the elderly population poses new challenges in the health sector, especially in efforts to maintain their quality of life (Savitri 2019). Older people tend to be more susceptible to chronic diseases such as hypertension, diabetes, and

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heart disease, all of which require special attention when it comes to prevention and management. This is where the importance of healthy behavior is a key factor that can help the elderly maintain their physical and mental balance.

However, maintaining healthy behavior in the elderly is not easy. Many factors can affect whether an elderly person can adopt a healthy lifestyle. Among them are individual factors such as awareness of the importance of health, self-confidence, and willingness to change (Maulana et al. 2023). In addition, social support from family, friends, and the community also plays a very important role in motivating the elderly to stay physically and mentally active. On the other hand, the physical environment and access to health facilities are also the main determinants of the success of the elderly in carrying out healthy behaviors (Masruroh and Rahma 2023).

In the context of this study, the use of Theory of Planned Behavior (TPB) as a theoretical framework is very relevant. The TPB proposes that the intention to behave healthily is the closest predictor of the behavior itself, and that the intention is influenced by three main components: attitudes towards behavior, subjective norms, and perceived behavioral control. These three components interact with each other and form the basis for a person's decision to engage in certain behaviors, including healthy behaviors.

Attitudes toward healthy behavior in older adults may be influenced by their life experiences, including personal and family health history, as well as the information they receive from various sources. A positive attitude towards healthy behavior can be formed if the elderly are aware of the benefits of a healthy lifestyle, such as increased energy, reduced disease risk, and improved overall quality of life (Ekasari, Riasmini, and Hartini 2019). However, negative attitudes can arise if they feel that behavior change will be too difficult or not provide significant results.

Subjective norms, namely perceptions of social pressure to do or not perform certain behaviors, also play an important role. In societies that have certain traditions and cultures, healthy behaviors may be greatly influenced by what is considered "normal" or "expected" in their social group (Kusherdiana 2020). For example, if in the elderly community in Pantai Labu District, healthy behaviors such as exercising regularly are seen as important, then elderly individuals may be more encouraged to participate in these activities.

Perceived behavioral control, or an individual's perception of their ability to control a particular behavior, is also highly influential. Older adults who feel able to manage their health well, despite barriers such as physical limitations or access to health services, are more likely to remain consistent in their healthy behaviors (Widyawati et al. 2024). Conversely, if they feel that their situation does not allow for change, their intention to behave healthily may decrease.

In this study, Pantai Labu District in Deli Serdang Regency was chosen as the location of the study because of its diverse demographic and socio-economic characteristics. This area reflects the various challenges faced by the elderly in Indonesia, including limited access to health services and a lack of adequate sports facilities. This study will identify the extent to which the factors mentioned in the SDGs affect the healthy behaviour of the elderly in these areas, as well as how interventions can be designed to support them.

In addition, this study will examine the role of gender in the healthy behavior of the elderly. Older women and men may have different experiences and challenges in implementing healthy behaviors. Cultural factors and gender roles that have been embedded in society can influence the way older people view their health and the strategies they choose to maintain their health. This study will also observe how economic factors affect the healthy behavior of the elderly. Seniors with better economic status may have greater access to quality health services, healthy food, and sports facilities. In contrast, older people with economic limitations may face greater barriers to healthy behavior, such as difficulty purchasing medications or lack of access to adequate health care.

Overall, this study aims to provide a comprehensive overview of the factors that affect the healthy behavior of the elderly in Pantai Labu District. By using the SDGs approach, this study is expected to identify behavioral patterns that can be strengthened through public health interventions. The results of this study are also expected to be the basis for the development of

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more targeted and sustainable health programs. In the long term, a better understanding of the factors that influence healthy behavior in older adults can help in formulating more inclusive and effective health policies. These policies should not only focus on improving access to health services, but should also take into account the social and psychological aspects that influence an individual's decision to live a healthy lifestyle. This research, thus, has the potential to contribute significantly to improving the health and well-being of the elderly in Indonesia.

LITERATURE REVIEW

1. Theory of Planned Behavior (TPB)

The Theory of Planned Behavior (TPB) is a social psychology theory introduced by Icek Ajzen in 1985, which became the basis for understanding how a person's intentions affect their behavior (Conner 2020). The TPB states that the intention to perform a behavior is the main predictor of the behavior itself. This intention is influenced by three main components: attitudes towards behavior, subjective norms, and perceived behavioral control.

Attitude towards behavior refers to an individual's evaluation of how positive or negative the behavior is. Subjective norms involve an individual's perception of social pressure to do or not perform certain behaviors, which usually come from family, friends, or society. Meanwhile, perceived behavioral control reflects an individual's beliefs about their ability to carry out the behavior, despite obstacles or challenges.

Many studies have used the SDGs to understand a variety of behaviors, including in health contexts. According to (Wibowo et al. 2024), the SDGs are able to explain variations in intentions and behaviors in various domains, including health behaviors such as quitting smoking, exercising, and adopting a healthy diet. In this study, the TPB was used to analyze how these three components affect healthy behavior in the elderly in Pantai Labu District.

2. Healthy Behavior in the Elderly

Healthy behavior is the action taken by an individual to maintain or improve their health. In the elderly, healthy behaviors include various activities such as exercising regularly, maintaining a balanced diet, avoiding smoking habits, managing stress, and following medications prescribed by doctors.

The literature shows that healthy behavior is essential for the elderly to prevent and manage chronic diseases, as well as to improve overall quality of life (Ekasari et al. 2019). Study by (Setiyorini et al. 2018) It found that older adults who consistently engaged in healthy behaviors, such as physical activity and a healthy diet, had a lower risk of heart disease, diabetes, and depression.

However, healthy behavior in the elderly is often influenced by a variety of factors, including individual, social, and environmental factors. According to (Umberson and Karas Montez 2010), social support from family and community is essential in motivating the elderly to engage in healthy behaviors. In addition, the literature also shows that older people with better economic status tend to have greater access to resources that support healthy behaviors, such as exercise facilities and healthy eating (Marmot 2005).

3. Characteristics of the Elderly and Health Challenges

The elderly population in Indonesia is experiencing rapid growth, and this poses a major challenge to the health system. Seniors are a vulnerable group to a variety of health problems, including chronic diseases, decreased physical and cognitive function, and psychosocial problems such as loneliness and depression (Organization 2018). Based on data from (2020 Statistics), the percentage of the elderly in Indonesia has reached around 10% of the total population, and is expected to continue to increase. Pantai Labu District, as one of the areas with a significant elderly population, reflects this dynamic. The diverse socio-economic conditions in these areas provide an important context for understanding how these factors affect the healthy behavior of the elderly. In addition, research by (Irianti and Pramono 2022) About successful aging shows that healthy aging depends not only on biological factors, but also on lifestyle and social environment. These studies

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highlight the importance of a comprehensive approach in understanding the factors that affect the health of the elderly.

4. Health Promotion Interventions and Programs for the Elderly

The literature also suggests that interventions designed to promote healthy behaviors in older adults should consider factors that influence their intentions and behaviors. For example, programs that combine health education with social support have been shown to be effective in increasing physical activity and healthy eating in the elderly (Sinambela 2024).

In Indonesia, several public health programs have been launched to support the health of the elderly, such as the Posyandu Elderly and the Elderly Health program managed by the Ministry of Health. However, the effectiveness of these programs is often limited by factors such as limited resources, lack of public awareness, and geographical constraints (Rachmawati 2021).

In the context of this study, it is important to understand how the elderly in Pantai Labu District respond to existing health interventions, as well as how these programs can be tailored to their needs and preferences. Previous research has shown that older people's participation in health programs is often influenced by their perception of the benefits of the program and the extent to which it fits their needs (Winarti and Sunarto 2024).

METHOD

Research methods are systematic and planned steps used to collect, analyze, and interpret data to answer research questions. In this study entitled "Analysis of Factors Influencing Healthy Behavior of the Elderly Based on Theory of Planned Behavior in Pantai Labu District, Deli Serdang," the method used is a quantitative approach with survey techniques. Here are the details of the research methods that will be used:

1. Research Design

This study uses a quantitative research design with a cross-sectional approach (Mandey, Kundre, and Bataha 2020). This design was chosen because it allows researchers to measure variables at a certain point in time, so that they can identify the relationship between the variables studied, namely attitudes, subjective norms, perceived behavioral control, intentions, and healthy behaviors of the elderly.

2. Population and Sample

Population: The population in this study is all elderly people who live in Pantai Labu District, Deli Serdang. Based on data from the Population and Civil Registration Office, there are around 1,500 elderly people in this region.

Sampling: Sampling is carried out using stratified random sampling technique, where the elderly will be grouped based on age (60-69 years, 70-79 years, and >80 years), gender, and socioeconomic status. Sample size determination uses the Slovin formula to ensure adequate representation:

$$n = \frac{N}{1 + Ne^2}$$

Where:

- n = Sample Measurement
- N = Number of Population
- e = Tolerable error rate (5%)

Thus, if the elderly population in Pantai Labu District is 1,500 people and the desired error rate is 5% (0.05), then the sample calculation is as follows:

$$n = \frac{1500}{1 + 1500 \times (0,05)^2} = \frac{1500}{1 + 1500 \times 0,0025} = \frac{1500}{1 + 3,75} = 316$$

Thus, the minimum sample size is 316 people.

3. Research Instruments

This study uses a questionnaire as a data collection tool. This questionnaire is structured based on the construct in the Theory of Planned Behavior, which consists of several parts:

- Attitudes towards Healthy Behaviors: Measuring the evaluation of the elderly on healthy behaviors, for example in terms of physical activity and healthy diet. The questionnaire consists of 10 questions on a 5-point Likert scale, ranging from "strongly disagree" to "strongly agree".
- Subjective Norms: Measures the perception of the elderly about the perceived social pressure to carry out healthy behaviors. This questionnaire consists of 8 questions with a Likert scale of 5 points.
- Perceived Behavior Control: Measures older people's confidence in their ability to control healthy behaviors, including the obstacles they may face. Consists of 10 questions with a Likert scale of 5 points.
- Intention to Engage in Healthy Behavior: Measure the intention of the elderly to engage in healthy behavior in the near future. This questionnaire consists of 5 questions with a Likert scale of 5 points.
- Healthy Behavior: Measure the frequency and consistency of the elderly in carrying out healthy behaviors. Consists of 10 questions with a Likert scale of 5 points.

4. Validity and Reliability of Instruments

To ensure the validity and reliability of the instrument, a pilot test will be carried out on 30 elderly people who are not included in the main sample.

- Validity Test: Uses Pearson Product Moment analysis to measure the correlation between items and total scores. Items with an r value > 0.3 are considered valid.
- Reliability Test: Uses Cronbach's Alpha method to measure the internal consistency of the questionnaire. An instrument is considered reliable if the value of Cronbach's Alpha > 0.7.

5. Data Collection Techniques

Data was collected through a survey by means of direct interviews using a structured questionnaire. Interviews are conducted by trained enumerators to ensure a consistent understanding of the questions asked. The data collection process is estimated to take one month (Jogiyanto Hartono 2018)

6. Data Analysis

The collected data will be analyzed using statistical software, such as SPSS or AMOS, with the following techniques (Jogiyanto Hartono 2018):

- Descriptive Analysis: To describe the demographic characteristics of the respondents (age, gender, education, economic status) as well as the distribution of answers for each questionnaire item.
- Multiple Linear Regression Analysis: Used to test the influence of attitudes, subjective norms, and perceived behavioral control on the intention to behave healthily. The multiple linear regression equations used are:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \epsilon$$

Where:

- Y = Intention to behave healthily
- β_0 = Constant
- $\beta_1, \beta_2, \beta_3$ = Regression coefficient for each predictor variable
- X1 = Attitudes towards healthy behavior
- X2 = Subjective norms
- X3 = Perceived behavioral control

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- ϵ = Error
- Path Analysis: Used to test the direct and indirect relationship between free variables (attitudes, subjective norms, perceived behavioral controls) and bound variables (healthy behaviors) through mediating variables (intention).

RESULTS AND DISCUSSION

Research Results

The results of this study are presented in several parts in accordance with the purpose of the research, namely to analyze the factors that affect the healthy behavior of the elderly in Pantai Labu District, Deli Serdang, based on the Theory of Planned Behavior (TPB). Data was obtained from 316 respondents who were selected using stratified random sampling techniques. The following are the results of the data analysis that has been carried out:

1. Demographic Characteristics of Respondents

Table 1 shows the demographic distribution of respondents who participated in this study.

Table 1. Demographic Characteristics of Respondents

Characteristic	Frequency (n)	Percentage (%)
Gender		
Man	152	48.1
Woman	164	51.9
Age (years)		
60-69	190	60.1
70-79	98	31.0
≥80	28	8.9
Economic Status		
Low	134	42.4
Intermediate	156	49.4
Tall	26	8.2
Education Level		
No School	45	14.2
SD	128	40.5
JUNIOR	87	27.5
SMA	45	14.2
College	11	3.5

2. Descriptive Analysis of Research Variables

Table 2 displays the results of descriptive analysis for the main variables of the study, namely attitudes towards healthy behaviors, subjective norms, perceived behavioral control, intentions, and healthy behaviors.

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Table 2. Descriptive Statistics of Research Variables

Variable	Mean	Median	Standard Deviation	Range
Attitudes towards Healthy Behavior	4.12	4.20	0.61	3.00 - 5.00
Subjective Norms	3.98	4.00	0.67	2.00 - 5.00
Perceived Behavior Control	3.85	4.00	0.74	2.00 - 5.00
Intention to Behave Wholeheartedly	4.05	4.20	0.64	2.80 - 5.00
Healthy Behavior	3.76	3.80	0.79	2.00 - 5.00

3. Instrument Validity and Reliability Test

After a validity test using Pearson Product Moment, all items in the questionnaire had a correlation value above 0.3, so they were considered valid. The reliability test using Cronbach's Alpha showed the following values:

- Attitudes towards Healthy Behavior: $\alpha = 0.81$
- Subjective Norm: $\alpha = 0.79$
- Perceived Behavior Control: $\alpha = 0.83$
- Intention to Behave Healthy: $\alpha = 0.80$
- Healthy Behavior: $\alpha = 0.78$

These values show that the instruments used in this study are reliable with good internal consistency.

4. Multiple Linear Regression Analysis

Multiple linear regression analysis was used to test the influence of attitudes, subjective norms, and perceived behavioral control on the intention to behave healthily. The results of the analysis are shown in Table 3.

Table 3. Multiple Linear Regression Analysis Results

Independent Variable	Regression Coefficient (β)	t-value	p-value	Information
Attitudes towards Healthy Behavior	0.435	8.462	<0.001	Significant
Subjective Norms	0.287	5.765	<0.001	Significant
Perceived Behavior Control	0.219	4.127	<0.001	Significant
Constant	0.512	2.987	0.003	Significant
R-squared	0.672			

The results of the regression analysis showed that the three independent variables, namely attitudes towards healthy behavior, subjective norms, and perceived behavioral control, significantly influenced the intention to behave healthily in the elderly. An R-squared value of 0.672 indicates that the model is able to account for 67.2% variation in intentions to behave healthily.

5. Path Analysis

To test the direct and indirect influence of attitudes, subjective norms, and perceived behavioral control on healthy behavior through intention, a path analysis was conducted. The results are shown in Figure 1 (not included) and a summary in Table 4.

Table 4. Results of Path Analysis

Variable	Direct Influence	Indirect Influence Through Intention	Total Influence
Attitudes towards Healthy Behavior	0.324	0.176	0.500
Subjective Norms	0.257	0.123	0.380
Perceived Behavior Control	0.196	0.091	0.287
Intention to Behave Wholeheartedly	0.562		0.562

The results of the pathway analysis showed that the intention to behave healthily had a significant direct influence on healthy behavior. Attitudes towards healthy behavior had the largest total influence (0.500) on healthy behavior, followed by subjective norms (0.380) and perceived behavioral control (0.287).

DISCUSSION

The results of this study show that attitudes towards healthy behavior, subjective norms, and perceived behavior control significantly affect the intention of the elderly to behave healthily. In addition, this intention plays an important role in encouraging the elderly to really do healthy behavior. These findings can be further discussed by referring to the theory underlying this study, namely the Theory of Planned Behavior (TPB), and are associated with relevant previous research results.

1. The Influence of Attitude on Healthy Behavior

The results showed that attitudes towards healthy behavior had a very significant influence on the intention to behave healthily with a regression coefficient of 0.435. This finding is consistent with the TPB which states that a person's attitude towards a behavior is one of the main predictors of the intention to carry out the behavior (Ajzen 1991). Positive attitudes towards healthy behaviors, such as the understanding that these behaviors can improve quality of life and prevent disease, tend to reinforce the intention of the elderly to practice healthy behaviors.

Previous studies also support these findings. For example, research conducted by (Nurbadriyah 2018) shows that a positive attitude towards healthy eating habits greatly affects an individual's intention to carry out a balanced diet. Other research by (Puspita 2009) It also found that attitudes toward physical activity were closely related to the intention to exercise regularly among adults. Thus, interventions that aim to improve healthy behaviors in the elderly should focus on strengthening positive attitudes towards health, such as through education about the long-term benefits of a healthy lifestyle.

2. The Influence of Subjective Norms

The subjective norm was also found to have a significant influence on healthy behavior intentions with a regression coefficient of 0.287. This means that the elderly's perception of social pressures or expectations from the people around them (family, friends, and society) is very

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influential in shaping their intention to behave healthily. These findings are in line with the SDGs, where subjective norms are considered to be one of the important factors shaping behavioral intentions (Ajzen 1991). Study conducted by (BUDGET 2023) found that subjective norms play a significant role in influencing the intention to quit smoking, especially when individuals feel supported by their social environment. Other research by (Ogbodoakum and Abiddin 2017) It also affirms that subjective norms play an important role in health behaviors, such as diet and exercise, especially among older age groups.

In the context of the elderly, the role of family and community is very important. For example, family support in the form of encouragement to participate in health programs or communities that support physical activity together can increase the intention of the elderly to maintain their health. Therefore, interventions that involve family members and communities in the promotion of elderly health can provide more effective results.

3. The Influence of Perceived Behavioral Control

The perceived behavior control had a significant influence on healthy behavior intentions with a regression coefficient of 0.219. This shows that the belief of the elderly in their ability to overcome obstacles and perform healthy behaviors greatly affects their intentions. The TPB emphasizes that the greater the control a person feels over a behavior, the more likely the individual is to have an intention and then perform that behavior (Ajzen 1991).

Previous research also supports these findings (Godin, Vézina-Im, and Naccache 2010) found that perceived behavioral control is a strong predictor of intentions and behaviors in a variety of health contexts, such as adherence to medication and involvement in physical activity. In the context of the elderly, confidence in one's ability to practice healthy behaviors may be influenced by factors such as physical health, social support, and access to health facilities.

To improve perceived behavioral control, interventions can be focused on developing the skills of the elderly in practicing healthy behaviors, such as providing training or practical guidance for physical activity appropriate to their health condition. In addition, improving access to supportive resources, such as accessible health facilities or exercise programs, can also improve perceived behavioral control.

4. The Role of Intention in Healthy Behavior

The intention to behave healthily was shown to have a significant direct influence on healthy behavior with an influence coefficient of 0.562. This is consistent with the main premise of the SDGs that intention is the main predictor of actual behavior (Ajzen 1991). A strong intention to behave healthily is very likely to translate into real action.

Study conducted by (Candra, Prasetyo, and Rahmadani 2023) In the context of physical activity, it was found that intention is a strong predictor of participation in physical activity. Other research by (Khoiruman and Harsono 2023) The meta-analysis also confirmed that intentions are strongly correlated with behavior in various domains, including health. However, researchers also show that intentions do not always guarantee behavior, especially if there are other significant obstacles. In the context of the elderly, factors such as physical health conditions, the environment, and social support may affect how far intentions can be manifested into action. Therefore, it is important to overcome these obstacles through appropriate interventions so that the intention of the elderly to behave healthily can be realized in real actions.

CLOSING

Conclusion

The conclusion of this study highlights the importance of psychological and social factors in shaping healthy behavior in the elderly in Pantai Labu District, Deli Serdang. Using the Theory of Planned Behavior (TPB) approach, this study identified that attitudes towards healthy behaviors, subjective norms, and perceived behavior control significantly influenced the intention of the

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elderly to behave healthily. This intention was then proven to be the main predictor of healthy behavior carried out by the elderly. A positive attitude towards healthy behavior, which reflects the elderly's view of health benefits, is the most powerful factor in shaping the intention to practice healthy behavior. Subjective norms, or social pressures from families and communities, also have a significant influence, demonstrating the importance of social support in encouraging healthy behaviors. Meanwhile, perceived behavioral control, which reflects the elderly's confidence in their ability to overcome obstacles, also affects their intentions.

The results of this study support the main premise of the SDGs, where a strong intention to behave healthily is a direct predictor of actual behavior. These findings are also in line with previous studies that show that attitudes, subjective norms, and perceived behavioral control are important determinants of health intentions and behaviors. Thus, effective health interventions for the elderly should be focused on increasing positive attitudes towards health, strengthening supportive social norms, and increasing the perception of self-control among the elderly. In addition, policies that support access to health facilities and community-based health programs are essential to improve the overall well-being of the elderly. This study provides a solid basis for the development of more holistic and evidence-based health intervention programs, with the main goal of improving the quality of life of the elderly in Pantai Labu District and other areas.

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