

# Psychoeducation on Stress Prevention For Elderly Caregivers

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## ABSTRACT

The increasing number of elderly individuals in Indonesia indicates the country's entry into the ageing population phase and creates new challenges in health and social welfare. One group directly affected is elderly caregivers, who play a vital role in assisting and caring for older adults but often experience physical and psychological stress. This study aims to enhance caregivers' understanding and mental preparedness through psychoeducation activities. The activity was conducted on June 22, 2025, in one of the RTs (neighborhood units) in Purworejo Regency, involving six caregivers. The materials included an introduction to post-power syndrome, caregiver roles and burdens, healthy coping strategies, and the application of psychological first aid. The activity was evaluated using pre-tests and post-tests in the form of knowledge assessments on the psychoeducation materials. Percentage calculations were employed to measure participants' comprehension levels before and after the intervention. The evaluation results showed an average score increase of 3.17 points, with an average percentage improvement of 33.15%. These findings indicate that psychoeducation is efficacious in improving mental preparedness, role awareness, and stress management skills among elderly caregivers. Therefore, psychoeducation should be further developed as part of sustainable efforts to support caregiver well-being at the community level.

## Introduction

In 2024, older people in Indonesia will account for 12.00% of the total population, with a dependency ratio of 17.76, indicating that for every 100 people of productive age, there will be approximately 17 older adults (BPS, 2024). The increase in the number of older adults in Indonesia shows that the country is entering a phase of population ageing. This condition indicates that, if not balanced with improvements in quality of life, the increase in the number of older adults can create a burden, especially on health (Khodijah, 2018). Therefore, attention to the welfare of older people is significant in social development. Old age is often marked by a period of retirement, which can trigger emotional and psychological stress. Individuals entering retirement often feel a loss of role, status, and routine that were once an important part of their lives. This situation can give rise to symptoms of post-power syndrome, which is

an emotional disorder caused by the loss of power and social role (Rahmat, 2016). This phenomenon not only affects the psychological aspects but also the physical well-being of the elderly. Individually, the elderly face various challenges in adjusting to themselves, including physical, emotional, and social aspects. Hurlock (in Hasan et al., 2024) explains that these challenges include declining physical condition, reduced personal income, loss of a partner, changes in social roles, changes in lifestyle, and a decline in the quality of relationships with peers. Inability to adapt to these changes can lead to stress and psychological distress.

Although post-power syndrome primarily affects retired older adults, its psychological manifestations such as irritability, withdrawal, decreased self-worth, and emotional instability may indirectly intensify caregiver burden. Without adequate understanding, caregivers may respond with frustration or emotional withdrawal, which can further deteriorate relational quality. Therefore, increasing awareness of post-power syndrome is essential not only for supporting elderly psychological adjustment but also for preventing secondary stress among caregivers.

In such situations, the presence of a caregiver becomes essential. Caregivers are individuals who assist older adults in meeting their physical and psychological needs, including providing emotional support and helping with daily activities (Setiawan, 2021). Caregivers function not only as companions but also as primary sources of emotional and instrumental support for the well-being of older adults in their daily lives. However, this role is not easy. Caregivers are often under psychological pressure due to workload, uncertainty, and limited knowledge in dealing with behavioural changes or cognitive decline among older people (Iriyanti & Widiyana, 2024). In addition, changes in the health status of the elderly, especially when they have chronic diseases, also have a direct impact on the families who become caregivers. Retnani and Kusumadewi (2024) reported that these conditions can impose physical and psychological burdens, including limitations in daily activities. Rafli et al. (2023) emphasised that caregivers who experience stress tend to provide lower-quality care, which ultimately hurts the physical and psychological condition of older people. According to Armanu (2021), stress can cause various effects such as depression, anger, feelings of disappointment, low self-esteem, inability to cope with frustration, and physical and mental health disorders.

To comprehensively understand the problems elderly caregivers face, an ecological approach is needed to map the risk factors affecting them. In terms of proximal factors, pressure arises from the severe physical condition of the elderly, such as stroke or heart

disease, as well as intensive caregiving routines without breaks. Prolonged emotional burdens and role conflicts between caregiving, work, and family care further exacerbate stress. At the microsystem level, caregivers often feel guilty when they believe they have not provided the best care, especially when faced with limited resources or complex situations. Findings from a Focus Group Discussion (FGD) conducted in April 2025 in a neighbourhood unit in Purworejo Regency underscore the importance of addressing caregivers' welfare. In the FGD, caregivers revealed that they often feel emotionally overwhelmed, confused in dealing with psychological changes in older people, and lack the tools to manage this pressure. However, there are protective factors that can strengthen their mental resilience, such as emotional support from family, warm and respectful relationships with the elderly they care for, and healthy coping strategies such as prayer, meditation, or relaxation. The presence of social support and strong emotional connections has been shown to help carers find meaning in their role and maintain psychological stability amid the heavy burden of caregiving.

To strengthen caregivers' resilience in the face of these pressures, psychoeducation is a relevant intervention. Psychoeducation is a form of intervention aimed at individuals and families to help strengthen coping strategies, which are specific ways of dealing with challenges or changes in mental health. Professionals deliver psychoeducation, an integrated approach that combines elements of psychotherapy with education as a mutually supportive intervention (Trisanti & Nurwati, 2022). Psychoeducation not only conveys information but also helps participants develop problem-solving skills, emotional control, and coping strategies in facing crises. The effectiveness of this approach is reflected in various research findings. Research by Halid et al. (2023) revealed that psychoeducation has a positive impact on improving the ability of families to care for older adults with dementia. On the other hand, Sutriyanti et al. (2023) highlighted that psychoeducational therapy is beneficial in helping families manage the stress that arises from caring for older adults with disabilities. Therefore, in the context of elderly caregiving, psychoeducation can strengthen mental resilience, reduce stress, and improve the quality of the relationship between caregivers and older people.

The psychoeducation programme was conceptually grounded in the stress-coping framework proposed by Lazarus and Folkman, which emphasises that individuals' cognitive appraisal of stressful situations significantly influences emotional and behavioural responses. In the context of elderly caregiving, limited knowledge regarding age-related psychological changes may lead caregivers to misinterpret behavioural symptoms as intentional resistance or negativity, thereby increasing emotional strain. By strengthening cognitive understanding

and adaptive coping strategies, psychoeducation aims to improve caregivers' appraisal processes, enhance perceived control, and reduce maladaptive stress reactions. Thus, the intervention was designed not merely as an informational session but as a cognitive restructuring effort to promote adaptive caregiving responses.

## **Method**

The problems faced by caregivers in dealing with older people can be addressed through psychoeducation interventions. Psychoeducation is an integrated approach carried out by professionals that combines elements of psychotherapy with education as a mutually supportive intervention (Trisianti & Nurwati, 2022). This intervention was then implemented through psychoeducation activities held on Sunday, 22 June 2025, from 13:30 to 16:30 WIB in one of the neighbourhood associations in Purworejo Regency with six elderly caregiver participants. This activity aimed to increase caregivers' knowledge about mental health in accompanying older people. Before the material was presented, participants completed a pre-test containing questions to assess their initial understanding of the topic. The psychoeducation material focused on introducing post-power syndrome in the elderly, including its definition, characteristics, and effects.

Next, participants received an explanation of the definition of caregiver and the importance of their role, along with a discussion of familiar sources of stress and psychological pressure. Coping strategies for maintaining mental health and practical guidelines for applying psychological first aid as an initial step in dealing with psychological emergencies were also presented. At the end of the session, participants completed a post-test to assess their increased understanding of the material. The material was delivered interactively through posters, educational videos, and simulations of the butterfly hug technique for stress management. During the activity, the implementation team documented the process through photos and videos for reporting and monitoring psychoeducation implementation.

## **Results and Discussion**

In the Indonesian sociocultural context, caregiving for elderly parents is often perceived as a moral and filial obligation rather than a negotiable responsibility. Such cultural expectations may discourage caregivers from expressing emotional exhaustion or seeking psychological assistance. Furthermore, caregiving roles are frequently assumed by women, increasing the risk of role conflict between domestic, occupational, and caregiving demands.

Community-based psychoeducation, therefore, plays a crucial role in normalising caregiver stress and legitimising self-care practices within collectivist social structures.

Quantitative analysis was conducted by calculating the pre-test and post-test scores for each participant, which were then used to obtain the difference in scores (gain score) and the percentage increase for each individual. This approach aimed to illustrate the increase in participants' understanding after participating in psychoeducation activities.

**Table 1. Knowledge Test Results**

<b>Name</b>	<b>Pre-test</b>	<b>Post-test</b>	<b>Gain Score</b>	<b>Percentage Increase</b>
<b>IN</b>	9	13	4	44.44%
<b>RA</b>	10	12	2	20.00%
<b>TN</b>	10	13	3	30.00%
<b>TU</b>	9	13	4	44.44%
<b>AD</b>	10	13	3	30.00%
<b>YN</b>	10	13	3	30.00%

Based on Table 1, the analysis shows that all participants increased their scores after receiving the intervention. Statistically, the average increase in participant scores was 3.17 points, indicating a relatively consistent change within the group. In terms of percentage, the average increase in understanding reached 33.15%, indicating that the psychoeducation provided was effective in increasing understanding of the material at a moderate to high level.

Analysis of the percentage increase for each participant shows that all individuals experienced positive changes in understanding after participating in psychoeducation, albeit with varying degrees of improvement. The most significant improvement was achieved by two participants, IN and TU, who each increased by 44.44%. This reflects significant progress in mastery of the material, especially given their initial scores (pre-test = 9), which indicate considerable room for improvement. TN, AD, and YN each experienced a 30.00% increase, demonstrating strengthening of their prior knowledge (pre-test = 10). Meanwhile, the lowest increase was recorded by participant RA, at 20.00%, which, although lower than the other participants, was still positive. The lower increase in RA's score did not fully reflect their level of understanding of the material presented. During the psychoeducation process, they remained engaged and demonstrated a good understanding through verbal explanations and visual displays, such as posters. However, during the post-test, the participant reported visual discomfort due to not wearing corrective lenses, which may have influenced the obtained score. This condition affected the test results, although their overall understanding of the material was quite good. These findings indicate that, in addition to the effectiveness of

psychoeducation in improving participants' understanding, individual factors during the evaluation process must also be considered to ensure that assessment results accurately reflect each participant's abilities.

Qualitatively, the results of this study show that the psychoeducation programme had a positive impact on all participants involved. Participants with lower initial scores appeared to experience greater improvements in understanding, indicating that this intervention was quite effective in overcoming initial knowledge limitations. Variation in improvement between individuals is likely related to several factors, such as motivation levels, psychological readiness, and prior experience with the material. Thus, in addition to demonstrating the success of psychoeducation, these results also underline the importance of tailoring the delivery method to each participant's conditions and needs to ensure more equitable and maximised learning outcomes. For further explanation, see Table 2, which compares the following cognitive aspects to show the impact of the intervention:

Qualitatively, participants' reflections and FGD results reinforce that caregivers experience emotional stress, confusion in dealing with behavioural changes in the elderly, and difficulties in providing care without adequate support. These findings are consistent with the ecological approach, which shows that stress stems from proximal factors (intensity of care, physical condition of the elderly), microsystem factors (lack of family support), and macrosystem factors (limited access to information and services)(Rafli et al., 2023).

**Table 2. Comparison of Participants' Cognitive Aspects Before and After Psychoeducation**

No	Measured Aspects	<i>Pre-test</i>	<i>Post-test</i>
1.	Understanding of post-power syndrome	The majority are unfamiliar with the term	Able to explain the definition and symptoms
2.	Awareness of the role as a caregiver	Considering it a personal duty	Understanding the responsibilities as a caregiver
3.	Knowledge about stress and its symptoms	Difficulty distinguishing symptoms of stress	Recognising the physical & psychological symptoms of stress
4.	Healthy coping strategies	Do not know	Can name several adaptive strategies
5.	The need for social support and self-care	Neglecting the importance of self-care	Realising the importance of rest and sharing

The session 'Caregivers: Heroes Behind the Scenes' offered participants a space to reflect on and strengthen their positive identity as caregivers for the elderly. They were invited to look back on the fundamental contributions they had made in caring for their elderly

parents or relatives. Many participants realised that their work had never been emotionally appreciated. The psychoeducational session facilitated the development of a positive caregiver identity, fostering increased self-efficacy and role affirmation. In addition, group discussions created space for empathy and mutual support among caregivers, aligning with Setiawan (2021) view that caregivers play a significant role in maintaining the physical and emotional well-being of the elderly.



**Figure 1. Presentation Session on Post Power Syndrome**

This psychoeducation activity also raises awareness of the importance of self-care and mental health, which were previously often neglected due to the demands of caregiving. Hurlock (In Hasan et al., 2024) notes that older adults face significant changes that affect their psychological well-being, and that caregivers, as their primary companions, need to understand these dynamics to avoid excessive stress. Participants began to realise that caring for others does not have to mean neglecting themselves. They were taught various simple coping and relaxation techniques that can be incorporated into their daily routines. One of the most memorable was the butterfly-hug simulation, which helped participants calm themselves when stress arose. This technique is not only easy to apply but also strengthens the emotional connection with oneself.



**Figure 2. Butterfly Hug Technique Roleplay Session**

Psychoeducation, delivered with an interactive approach and hands-on experience, has been proven effective in equipping caregivers with stress management skills. These findings reinforce Trisanti and Nurwati (2022) argument that psychoeducation not only conveys information but also builds coping skills in facing psychological challenges. Participants felt better prepared to address the psychological dynamics of the elderly. They also showed an increased awareness that their role is very meaningful to their families and communities. Therefore, interventions such as this can serve as a model for community-based caregiver empowerment efforts, especially amid Indonesia's ageing population trend (BPS, 2024).

It is important to emphasise that the present evaluation primarily measured cognitive improvement through knowledge-based assessments. Although qualitative reflections indicated enhanced confidence and emotional readiness, these outcomes were not quantitatively assessed using validated psychological instruments. Future studies are encouraged to incorporate standardised measures of caregiver burden, stress, or self-efficacy to obtain a more comprehensive evaluation of intervention impact. This study has several limitations. First, the small sample size ( $n = 6$ ) limits the generalisability of findings beyond the specific community context. Second, the intervention was delivered in a single session without long-term follow-up, preventing assessment of sustained behavioural change. Third, the evaluation relied primarily on short-term cognitive measures rather than validated psychological scales. Therefore, findings should be interpreted as preliminary evidence within a pilot community-based intervention framework.

## **Conclusion**

Psychoeducation activities provided to elderly caregivers have been proven effective in improving participants' understanding, mental preparedness, and ability to manage stress. The average increase in participants' scores reached 3.17 points or 33.15%, indicating a positive change after participating in the activities. As a result, participants demonstrated a better understanding of post-power syndrome, their role as caregivers, and the importance of self-care and social support. In addition, participants also felt more confident and able to apply simple coping strategies such as the butterfly hug technique. This psychoeducation not only increased their knowledge but also strengthened caregivers' psychological resilience in facing emotional challenges when caring for the elderly. For sustainability, psychoeducational modules may be adapted into routine community health programmes through collaboration with local health cadres or neighbourhood associations. Periodic follow-up sessions and peer-support initiatives further strengthen caregiver resilience and ensure long-term impact at the

community level. Therefore, in the future, it is highly recommended that psychoeducation be implemented in ways that take into account participants' characteristics and needs to support equitable outcomes and sustainable impact.

### Recommendations

Further research should involve a larger number of caregivers to obtain more comprehensive results that reflect a wider range of conditions. In addition, further exploration of unexplored social environmental factors is needed.

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