



THE ROLE OF SELF-EFFICACY AND FAMILY SUPPORT IN STABILIZING BLOOD PRESSURE OF PATIENTS WITH HYPERTENSION

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ABSTRACT	Keywords
Hypertension was a health problem for the majority of people in Indonesia. The Efforts to reduce the incidence rate of hypertension and controlling blood pressure are by changing the healthy lifestyle and by being in taking. To realize healthy lifestyle and behavior of hypertension, self-efficacy and support of the family as well as health care cooperation with the parties, the family, and society are required. The purpose of this research to know if self-efficacy and family support stabilizing blood pressure of patients with hypertension. This research is a pre-experimental research with One-Group Pre-Post test design approach. The study was conducted in 50 people with the proportional stratified random sampling technique in Ketawang Village, Gondang District, for 8 weeks. Measurement of the blood pressure was the Spignomanometer merk Onemed was given before and after the patients were given counseling self-efficacy and family support. The data was analyzed SPSS 21 Wilcoxon test. The Statistical test results obtained p value 0.000 to sistole and diatole so that there is a meaningful that self-efficacy counseling and family support stabilizing blood pressure of patients hypertension. Self-efficacy counseling and family support stabilizing blood pressure for patients with hypertension, so they needs to be developed to reduce hypertension complications.	Self-efficacy, family support, blood pressure, hypertension

INTRODUCTION

Hypertension was the major health problem of people in Indonesia. The incidence of hypertension in Indonesia is 8.4% of the population, 69.5% aged > 75 years, 8.8% consume drugs, 32.3% do not routinely consume drugs by making an excuse that they already feel healthy so that they tend to suffer from severe hypertension because they don't try to avoid it and they do not know the risk factors (Kesehatan, 2018).

The efforts to reduce the incidence rate of hypertension and controlling blood pressure of patients with hypertension are by

living the healthy lifestyle such as by reducing cigarette consumption, not consuming food that is a contributing factor in the occurrence of hypertension, avoiding alcoholic beverages, relieving stress and doing regular exercises as well as being discipline in taking medication (Svetkey, et al., 2009).

Lowering pressure blood with optimal values and controlling the occurrence of complications is a top priority of the public health service. someone's self-efficacy will affect self care management. Self care management of hypertensive sufferers is an

internal ability maintain effective behavior with the use of recommended drugs by a doctor, following a diet and exercise, control regularly and maintain coping emotional with the illness (Kate R, 2003).

Self-efficacy affects ability someone to do action behavior prevention and management for the disease. If Self efficacy developed in people with hypertension, will growing confidence in being able to comply hypertension management program so hypertension elderly can control blood pressure (Alwisol, 2006).

Family is the main support system that provides direct care for other family members both healthy and ill. Forms of family support include informational, assessment, instrumental and emotional support. Appraisal support in the form of providing support, appreciation and attention and even supervision of a therapy carried out on patients with family members. Emotional support is manifested in the form of affection, trust, attention, listening and being heard (Amila, 2018).

Families who care about their family members who suffer from hypertension, will pay attention to feeding, invite sports together, accompany and remind them to routinely have their blood pressure checked. The support provided by family members shows the care and concern of the family so that hypertensive patients will be motivated to undergo proper and correct treatment (Rottie & Colling, 2017).

In order to realize the healthy lifestyle and behavior, patients with hypertension are required to have self-efficacy and support of the family as well as health service cooperation with other parties involving various elements, including family and society. Increase understanding of the importance of self-efficacy and family in providing support social towards family members having hypertension with administration counseling of clients and

families. the counseling is a process of assistance problem solving client order can adjusts it self effectively with himself and with environment (Amila, 2018).

Counseling affects changes in individual behavior that are beneficial to him. Giving counseling is better given modules or manuals (Priyanto, 2009). The purpose of this research is to know if self-efficacy and family support stabilize the quality of life of patients with hypertension.

MATERIALS AND METHOD

This research is a pre-experimental research with the One-Group Pre-Post test design approach. This research in Ketawang Village, Gondang District, for 8 weeks at 11th April – 6th June 2020. The limitation in this research are patient with hypertention primer and living together with nuclear family.

The population of this research is 110 of patient with hypertention was spreading over 3 hamlets, at Ketawang Village. The research sample consisted of 50 of patient with hypertention at Ketawang Village, Gondang District. The sampling technique used is proportional stratified random sampling with inclusion and exclusion criteria determined by the researcher to get the number of samples from each hamlet, and then carried out simple random sampling of each hamlet.

The intervention of this research each respondent gets a counseling and moduls about self-efficacy and family support. Monitoring is carried out every weeks by visiting respondent and measurement of the blood pressure at respondent's house.

Collecting data in this research is a Blood pressure measurement observation sheet. Measurement of the blood pressure was the Spignomanometer merk Onemed was given before and after the patients were given self-efficacy and family support. The data were analyzed using SPSS 21 with

Wilcoxon Test because the data distribution scale is not normal.

The ethical problem in nursing research is a critical issue, because in nursing research they are related to humans. An ethics that must be considered are informed consent, autonomy, confidentiality, beneficent, non-maleficent, justice and fidelity. Research ethics was carried out at the health research ethics committee Institute Of Health Science STRADA Indonesia.

RESULTS

Characteristics of respondents are include age, gender, education, profession, long suffered and living together. The Univariate analysis to find the relationship of respondents' characteristics with blood pressure sistole and diastole

Based on table 1, the researched people with hypertension ranging from 66-70 years old are 13 respondent (26%). Almost all respondents are woman are 44 respondent (88%) and elementary school are 46 respondent (92%). Most hypertensive sufferers work as housewives are 23 respondent (46%), long suffered 0-1 years are 14 respondent (28%) and living together with husband are 22 respondent (44%).

Table 1. Characteristics of respondents (n=50)

Variable	n	%	p-value sistole	p-value diastole
Age				
50-55 Years	6	12,0	0,378	0,402
56-60 Years	9	18,0		
61-65 Years	10	20,0		
66-70 Years	13	26,0		
71-75 Years	6	12,0		
76-80 Years	6	12,0		
Gender				
Man	6	12,0	0,359	0,464
Woman	44	88,0		

Education				
No school	0	0	0,995	0,820
Elementary School	46	92,0		
Middle School	3	6,0		
High School	1	2,0		

Profetion				
Housewife	23	46,0	0,855	0,614
Farmer	21	42,0		
Trader	3	6,0		
No work	1	2,0		
Etc	2	4,0		

Long Suffered				
0-1 Years	14	28,0	0,044	0,551
1-2 Years	12	24,0		
2-3 Years	9	18,0		
3-4 Years	9	18,0		
>4 Years	6	12,0		

Living Together				
Husband	22	44,0	0,444	0,014
Wife	4	8,0		
Childs	14	28,0		
Grandchild	7	14,0		
Etc	3	6,0		

Table 2. The Blood Pressure Pre and Post Self-Efficacy and Family Support (n=50)

Blood Pressure	n	Median	Min	Max	p-value
Sistole pre	50	140	130	200	0,000
Sistole post		135	125	170	
Diastole pre	50	90	70	110	0,000
Diastole post		80	70	90	

Based on table 2, The statistical test result shows that there is the blood pressure value before and after self-efficacy and family support are provided in 8 weeks. The result of Wilcoxon test p-value sistole and diastole 0,000.

DISCUSSION

The research people with hypertension ranging from 66-70 years old. This research is in accordance with the Gadi's research, which states that hypertension increased with increasing age. The majority of people with hypertension are > 65 years old at 65%. This is due to the increasing age of large blood vessel structures, narrower lumen and blood vessel walls become stiff and thickened, resulting in increased systolic blood pressure (Gadi, 2017).

Almost all respondents are female. According to Suryani's research, sufferers of hypertension are mostly (52.4%) female. Women who experience menopause will have a higher risk of hypertension (Suryani, 2018). Hormonal changes that occur in female menopause are the main contributing factors. Women who experience menopause have lower estrogen and lower levels of high density lipoprotein (Lumbantobing, 2008).

Most hypertensive sufferers work as housewives. Women who do not work or only as housewives are at higher risk of suffering from hypertension than women who work. This is probably due to the lack of activities carried out by the housewives. With so many busy housewives, they feel they don't have time to exercise which causes a lack of physical activity so that they are at risk of suffering from hypertension because it increases the risk of being overweight. People who do not get enough physical activity also tend to have a higher heart rate, so their heart muscle has to work harder with each contraction. The harder and often the heart muscle has to pump, the more

pressure is placed on the arteries. Increased blood pressure caused by inadequate activity will cause complications such as coronary heart disease, impaired kidney function, stroke (Anggara & Prayitno, 2013).

The results of this study are in line with the research conducted with Suryani's research. Long time suffering from hypertension > 3 years. The longer suffering from hypertension will increase the occurrence of complications, namely the kidney in the form of nephrosclerosis which is a direct result of ischemia due to narrowing of the intrarenal blood vessels (Suryani, 2018).

The results of the study are in line with Gadi's research. Most of them live with their husbands. The family maintains a good support system to control life patterns, so that blood pressure is controlled (Gadi, 2017).

The statistical test result shows that there is a change in the blood pressure value before and after self-efficacy and family support are provided in 8 weeks. The Suryani's research, states that family counseling is effective against the stabilization blood pressure of hypertensive patients (Suryani, 2018). Based on Gadi's research, there is an effect of self-efficacy on blood pressure control in hypertensive patients. One of the factors that support the successful management of hypertension is controlling blood pressure. One of the factors that influence regular blood pressure control is self-efficacy (Gadi, 2017).

The results of the research of Farida and Susmadi, there was an effect of self-efficacy training on systolic blood pressure (0.01) but not effect on diastolic (0.07). Self-efficacy training in the elderly hypertension is constructed with 4 components, namely cognitive, motivational, effective and selection. Knowledge acquired from the training results used by the hypertensive elderly to adhere to the program

management. So that within 3-4 the following month the blood pressure can be controlled. The diastolic pressure does not change this happens because of measurement diastolic pressure is exerted during the condition the heart relaxes, while in the elderly, the organs heart including blood vessels already experience stiffness / less elastic so that at the end of the heart contraction does not can rilkes perfect. As a result of the moment a systolic blood pressure was measured remains high / above normal limits (Farida & Susmadi, 2019).

The Amila's research, also shows there was a correlation between self-efficacy and the lifestyle of patients with hypertension. Self-efficacy can improve support and self motivation towards healthy lifestyles that reduce the occurrence of complications (Amila, 2018). The result of Setyorini's research, indicates there is a correlation between self-care and self-efficacy management in the hypertension sufferers. Self-efficacy was needed by hypertensive sufferers to make themselves motivated to get a better degree of health through confidence in the management of self-care. Effective self-care management will reduce the occurrence of complications, increase satisfaction, increase confidence, and stabilization blood pressure of people with hypertension (Setyorini, 2018).

According to Bisnu's research, there were a relationship between family support and the degree of hypertension. Family support were a form of service behavior carried out by families in the form of emotional support, appreciation / assessment, informational and instrumental (Bisnu, Kepel, & Mulyadi, 2017). Suggests that the family is a safe and peaceful place to help recover from illness. This occurs because it is impossible for a person to meet physical or psychological needs alone. Individuals need social support where one of them comes from the family (Sinaga, 2015).

The results of this study are in line with research conducted by Rottie and Colling, on the Effect of Family Support on Compliance with Medication in Hypertensive Patients. Families who care about their family members who suffer from hypertension, will pay attention to feeding, invite sports together, accompany and remind them to routinely have their blood pressure checked. The support provided by family members shows the care and concern of the family so that hypertensive patients will be motivated to undergo proper and correct treatment (Rottie & Colling, 2017).

Family support needed by hypertensive patients who need long and continuous treatment. This supported by many theories that have explained the function of the family, one in the health sector, where it has been explained that if there is a family member who is sick, the family must immediately know about health problems, decide what actions should be given and use existing health facilities (Ningrum & Hendarsih, 2012).

The health promotion models theory describes that the self-efficacy of a person will influence the behavior and commitment in doing things. Self-efficacy of the sufferers of high chronic diseases will increase the expectations of great and clear goals. Patients with hypertension will obey and manage hypertension well if they have the confidence that the management makes their condition stable and minimizes complications. Patients with hypertension require a change in behavior to control blood pressure. This behavior change requires self-efficacy. Self-efficacy is the patient's confidence in the activity and that the patient behaves in accordance with the desired expectations. Self-efficacy affects behavioral change by influencing the way of thinking, motivating, and acting (Bandura, 2006).

The lifetime management of hypertension makes people feel lose self-motivation, it even raises depression and disobedience. Self-efficacy and family support are very important components for people with hypertension in conducting healthy lifestyle. High family Support but If the self-efficacy is not formed then the people with hypertension will not obedience and vice. Healthy lifestyle compliance minimizes complications and improves the quality of life of patients with hypertension. High self-efficacy still requires family support to run all the daily activities of the sufferer in doing self-care, there by improving the quality of his life. Self-efficacy and support of the family are able to perform maintenance optimally.

CONCLUSIONS

Self-efficacy cannot be optimal without the companion of the family support. Counseling self-efficacy and family support stabilizing blood pressure of patients with hypertension.

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