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Family support with self-care management in hypertension patients: A correlation study

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Abstract

Background: Self-care management can be very helpful in reducing the risk of hypertension complications, but the fact is that there are still many people with hypertension who are currently unable to do self-care management. Many patients are not routine in controlling blood pressure, do not take medication regularly, and do not apply a healthy lifestyle. One of the success factors of hypertension self-care management is family support.
Purpose: to determine the relationship between family support and self-care management in patients with hypertension.
Method: This type of research is quantitative research with a cross sectional design. The sample in this study amounted to 60 respondents who were selected using the nonprobability sampling method with purposive sampling techniques. The data was tested using the spearman rank correlation statistical test.
Results: The results of the study found that there was a significant relationship between family support and self-care management in patients with hypertension in the working area of the Kenten Health Center Palembang City with a p-value of 0.000 (p-value < 0.05). The correlation coefficient between family support and self-care management is 0.459 (quite strong).
Conclusion: Family support significantly influences sufferers in improving self-care management to maintain their health status.

Keywords: Family Support; Hypertension; Self-Care Management.

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INTRODUCTION

Hypertension is one of the Non-Communicable Diseases (NCDs) that is a serious health problem today and a major risk factor for cardiovascular disease. Hypertension is indicated by systolic blood pressure above 140 mmHg and diastolic blood pressure above 90 mmHg (Utami & Hudiyawati, 2020). Uncontrolled hypertension will have a dangerous impact and cause complications in people with hypertension (Anshari, 2020). The main complications that can occur are cerebrovascular diseases such as stroke or transientis-chemic attack. Hypertension can also cause other complications in the coronary arteries such as myocardial infarction or angina, kidney failure, dementia, or atrial fibrillation (Rikmasari, 2020). These complications will arise if people with hypertension do therapy irregularly, therefore people with hypertension need treatment continuously (Wahyuni, 2021).

The World Health Organization (WHO) estimates that the global prevalence of hypertension is currently 22% of the world's total population. The prevalence of hypertension is highest in Africa at 27%. Southeast Asia ranks 3rd highest with a prevalence of 25% of the total population. About 972 million people or 26.4% of the world's population suffer from hypertension, the figure will increase to 29.2% by 2025. Data from the 2018 Basic Health Research shows that the prevalence of hypertension in Indonesia is 34.1%. This figure has increased compared to the prevalence in 2013, which was 25.8% (Putri, Febriana, & Azam, 2024). Hypertension occurs in the age group of 31-44 years (31.6%), age 45-54 years (45.3%), age 55-64 years (55.2%) (Damayanti, & Isnaini, 2024).

The profile of the South Sumatra Health Office on the number of people with hypertension in the districts / cities of South Sumatra province shows that the percentage of hypertension has increased, namely from (39.6%) in 2020 and reaching (49.5%) in 2021 (Cicih, Kato, Nagatani, & Putri, 2024). Data from the Palembang City Health Office, the incidence of people with hypertension has increased from year to year. In 2020 there were 146,220 sufferers, in 2021 there were 224,471 sufferers, and in 2022 there were 411,520 sufferers. Data from the Kenten Health Center in Palembang City, the incidence of people with hypertension has also increased from year to year. In 2020 there were 5,600 sufferers, in 2021 there were 6,706 sufferers and in 2022 there were 13,088 sufferers (Azwaldi, Maksuk, Maharani, & Kumalasari, 2023).

Prevalence of hypertension in Indonesia reaches 31.7%, around 60% of people with hypertension will eventually experience complications such as stroke, and the rest resulting in heart disease, kidney failure, and blindness 21(Pramadaningati, Nurbadriyah, & Fikriana, 20). One of the efforts to prevent complications of hypertension needs to be increased prevention about hypertension. People with hypertension are advised to carry out self-care management as one of the disease management in daily life (Mahfud, Barasila, & Indrayani, 2019).

Self-care management is an action to change the behavior, thoughts and feelings of people with hypertension (Isnaini & Lestari, 2018). Hypertension self-care management is expected to have the potential to improve an individual's ability to control and manage hypertension independently and carry out self-care management to maintain individual health and quality of life (Mahfud et al., 2019). Optimal self-care management behavior is one component of achieving successful treatment of hypertension. The factors that influence self-care management behavior in people with hypertension are age, gender, education, work, family support, and duration of hypertension (Rozani, 2020). That one of the success factors of self-care management is family support (Romadhon, Aridamayanti, Syanif, & Sari, 2020). family support is needed in carrying out self-care management in people with hypertension, and can contribute to the success of hypertension treatment and affect the spirit of people with hypertension to maintain their health status by involving family members in the implementation of self-care management of people with hypertension (Dewi, Octavia, & Sari, 2024). Family is the main support for hypertension patients in maintaining health (Nyaaba,Stronks, Meeks, Beune, Owusu, Addo, & Agyemang, 2019).

The results of interviews with 15 respondents, the results showed as many as 12 respondents said that patients do not take medicine regularly because sometimes patients forget to take medicine or patients only take medicine when blood pressure is high, as many as 10 respondents said that patients do not routinely control health or take drugs to health

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services, as many as 5 respondents said that patients still consume saturated fats such as mutton, coconut milk and high-salt foods, and as many as 2 respondents said patients still smoke, and as many as 3 respondents had good behavior/habits in maintaining their health status.

The results of interviews regarding family support in 15 respondents, obtained as many as 8 respondents said that sometimes patients come to the public health center or to other health services usually come alone without being accompanied by their family when going to health control or drug collection, as many as 12 respondents said that the patient's family does not remind patients to the control schedule or the patient's medication schedule so that patients remember themselves when the control schedule or As many as 6 respondents said that families do not remind patients not to eat foods that trigger high blood pressure, and there are 3 respondents who have good family support.

RESEARCH METHOD

This research is a type of quantitative research using a correlation analytic approach to analyze the relationship between the independent variable and the dependent variable. The research design used in this study was a cross sectional design to determine whether there is a relationship between family support and self-care management in patients with hypertension in the working area of the Kenten Health Center in Palembang City. The population in this study is all patients with essential hypertension who underwent treatment in June 2023 in the working area of the Keten Health Center Palembang City, which amounted to 147 people with a large research sample taken, which was 60 respondents.

The sample in this study amounted to 60 respondents who were selected using the nonprobability sampling method with purposive sampling techniques. The measuring instrument used in this study was a standard, namely the Hypertension Self-Management Behavior Quitionnare (HSMBQ) consisting of 40 statements and a family support questionnaire adopted which amounted to 12 statement items using a Likert scale with positive statements. The data was tested using the spearman rank correlation statistical test (Elmasry, Mohammad, El-Dien, & Azer, 2018). Th einclusion criteria in this tudy are: 1) Patients with essential hypertension who are undergoing treatment in the working area of the Kenten Health Center Palembang City; 2) Hypertensive patients aged 26 years to 65 years; 3) Be illing to be a respondent; 4) Hypertensive people who live ith their families (parents, husband, wife, and children); 5) Long suffering from hypertension $\geq$ 1 year, the exlusion criteria were: patients who cannot read and write. This study connects the family support variable ith the self-care management variable where family support is an independent variable and self-care management as a dependent variable. The confounding variables in this study were age, gender, education, occupation, and length of suffering from hypertension. This study was conducted after obtaining ethical approval from the Research Ethics Commission Team of the Faculty of Medicine, Sriwijaya University No. 386-2023.

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RESEARCH RESULTS

Table Characteristics of Respondents (N=60)

Variables	Results	p-value	r
Age (n/%)			
(Mean±SD)(Range)(Year)	(37.75±14.62) (26-65)		
26-45 year	17/28.3		
46-65 year	43/71.7		
Gender (n/%)			
Man	17/28.3		
Woman	43/71.7		
Education (n/%)			
Elementary School	7/11.7		
Junior High School	9/15.0		
Senior High School	26/43.3		
Collage	18/30.0		
Employment (n/%)			
Housewife	27/45.0		
Self-employed	10/16.6		
Police/Army	1/1.7		
Employee/Civil Service	1/1.7		
Retired	14/23.3		
Other	7/11.7		
The Duration of Hypertension (n/%)			
1-5 years	43/71.7		
6-10 years	14/23.3		
11-15 years	1/1.7		
≥ 15 years	2/3.3		
Self-Care Management (n/%)			
Poor	15/25.0		
Moderate	22/36.7		
Good	23/38.3		
Family Support (n/%)			
Poor	7/11.7	0.000	0.459
Moderate	20/33.3		
Good	33/55.0		

Based on table 1, shows that the results of 60 respondents have the characteristics of the highest respondents, namely the age of 46-65 years with 43 respondents (71.7%), female gender with 43 respondents (71.7%), last high school education with 26 respondents (43.3%), unemployment/housewife with 27 respondents (45%), long suffering from hypertension 1-5 years with 43 respondents (71.7%).

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Shows the results that from 60 respondents with the majority of self-care management good amounted to 23 respondents (38.3%). Shows the results that from 60 respondents with the majority of good family support of 33 respondents (55%).

The results of the analysis using the spearman rank correlation test a p-value of 0.000 (p-value < 0.05) was obtained. The conclusion of the test is that H_1 is accepted, meaning that it can be concluded that there is a significant relationship between family support and self-care management in patients with hypertension in the working area of the Kenten Health Center Palembang City. The correlation coefficient is 0.459 which means that the level of strength of the relationship between family support and self-care management is 0.459 (strong enough) with a positive correlation direction which means that the better the family support, the better the self-care management.

DISCUSSION

Based on the results of the analysis Based on the results of research obtained by researchers on the relationship between family support and self-care management in patients with hypertension that from 60 respondents obtained as many as 33 respondents (55%) had family support in the good category and obtained 23 respondents (38.3%) had self-care management in the good category. The results of this study show that there is a significant relationship between family support and self-care management in patients with hypertension in the working area of the Kenten Health Center Palembang City using the spearman rank correlation test with a p-value of 0.000 (p-value < 0.05). The correlation coefficient between family support and self-care management is 0.459 (quite strong) with a positive correlation direction which means that the better the family support, the better the self-care management. Relationship between family support and self-care management with p value = 0.000 and r value = 0.518 (Juliana & Nisa, 2023).

The success of hypertension therapy is influenced by a number of factors, including the application of self-care management. Self-care management is a person's ability to carry out self-care activities to maintain health status, maximize and maintain individual welfare and health. Self-care management as a person's activity in controlling symptoms, carrying out treatment, psychology, and physical conditions or adjusting lifestyle to the disease experienced in order to maintain the health and welfare of sufferers. Self-care management in this study consists of self-integration, self-regulation, interaction with health workers and others, blood pressure monitoring, compliance with recommended rules. That self-care management is an important step to take as an integral part of hypertension case management. Poor self-care management of hypertension correlates with an increased rate of disease complications (Salami, 2021).

Family support is the effort of family members both material and moral in the form of advice, motivation, real assistance and information. Family support can magnify self-esteem, support everyone forming family strengths, potentially as a way for first prevention for each family in overcoming the obstacles of daily life. Family support in this study consisted of emotional support, reward support, instrumental support, and informational support. Families play a role in providing health services, especially in the prevention and treatment of health disorders. Sick family members always need family support. This allows the sufferer to feel valued and loved, and the family to provide help and support actively to achieve the life goals that the sufferer wants to achieve. Thus, the role of family support for people with hypertension is important (Wahyudi & Nugraha, 2020).

The relationship between family support and self-care management in this study is related to age and length of suffering from hypertension. The elderly are more obedient to self-care management than the young age. Patients who have long suffered from hypertension and are elderly are more able to manage their own self-care management without support or assistance from family, such as in reminding when to schedule control and take medication and behaviors that can worsen the disease.

Very important to closely relate family support to self-care management. Good self-care management is strongly influenced by family support and vice versa, which means that if family support is more positive, then the patient's self-care management is also better. Self-care management is important to pay attention to in the elderly. Another problem faced by the elderly, namely reduced memory of something

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(senile) so that even though the family has tried to provide education, information, the elderly still tend to do something wrong or wrong so that it is expected that health workers make more home visits, provide education to families and people with hypertension so that they can increase knowledge of self-care management Hypertension. This is so that sufferers play an important role in caring for their own health and have a sense of responsibility for their own health (Nurfitasari, Handayani, & Asih, 2023).

Researchers assume that the patient's efforts in managing self-care management, maintaining behavior in dealing with the disease and support, advice, and motivation obtained from the patient's family members can affect the level of compliance of sufferers in improving self-care management to maintain their health status. The results of the research obtained, it can be concluded that people with hypertension who have good family support and good self-care management. This shows that people with hypertension have family support that can improve the patient's self-care management. Although there are still some sufferers who have family support and self-care management are lacking, due to several factors such as sufferers who do not control their own health properly, lack of knowledge, information and awareness of the disease they suffer, and families who do not play an active role in self-care management of people with hypertension.

CONCLUSION

There was a significant relationship between family support and self-care management in patients with hypertension in the working area of the Kenten Health Center Palembang City with a p-value of 0.000 (p-value < 0.05). The correlation coefficient between family support and self-care management is 0.459 (quite strong). Family support significantly influences sufferers in improving self-care management to maintain their health status.

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