

The Influence of Health Counseling on Patients' Knowledge about Hypertension in the Working Area of the Jongaya Makassar Puskesmas

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Abstract

This study aims to determine the effect of health education on sufferers' knowledge about hypertension in the Jongaya Makassar Health Center Working Area. The method used in this research is an experimental method using a "one group pretest-posttest design". The aim is to determine the effect of health education on sufferers' knowledge about hypertension in the Jongaya Makassar Community Health Center Working Area. From the results of this study, it can be concluded that health education is very influential for hypertension sufferers because with health education, hypertension sufferers will better understand the disease they are suffering from and can take preventive measures to avoid more severe complications of the disease.

Keywords: Health, Health Education, Hypertension Sufferers

Introduction

Hypertension or high blood pressure is a medical condition characterized by increased contraction of the arteries, resulting in resistance to blood flow which increases blood pressure against the walls of the blood vessels. Hypertension can increase the risk of stroke, heart attack and kidney damage (Junaedi, et, al, 2013). Hypertension is divided into primary and secondary hypertension. Primary hypertension tends to be influenced by hereditary factors. Meanwhile, secondary hypertension occurs as a result of complications from other diseases such as kidney disease and tumors of the adrenal glands. The World Health Organization (WHO) estimates that the number of hypertension sufferers will continue to increase as the population grows. In 2025, it is projected that around 29% of the world's population will suffer from hypertension. In 2011, WHO recorded that there were one billion people affected by hypertension (Ministry of Health of the Republic of Indonesia, 2013).

The World Health Organization (WHO) states that hypertension is the number one cause of death in the world. Data from the Joint National Committee on Prevention, Detection, Evaluation, and treatment on High Blood Pressure VII says that almost one billion people in the world suffer from hypertension (Prasetyaningrum, 2014).

The prevalence of hypertension in Indonesia is around 31.7% or 1 in 3 adults have hypertension, 76.1% are not aware that they have hypertension. Increased prevalence of hypertension based on interviews (have you ever been diagnosed with a health worker and taken hypertension medication) from 7.6% in 2007 to 9.5% in 2013 (Ministry of Health of the Republic of Indonesia, 2014). Riskesdas results in 2013, the prevalence of hypertension in South Sulawesi obtained through measurements at ages ≥ 18 years was 28.1%, the highest in Enrekang (31.3%), followed by Bulukumba (30.8%), Sinjai (30.4%) and Gowa (29.2%). The prevalence of hypertension in South Sulawesi obtained through questionnaires diagnosed by health workers was 10.3%, those diagnosed by health workers or who were taking medication was 10.5%, so there were 0.2% who took their own medication (Ministry of Health of the Republic of Indonesia, 2013).

Health education in health promotion is needed as an effort to increase knowledge and awareness, in addition to knowledge, attitudes and actions. Therefore, efforts are certainly needed to provide and convey information which is an area of health education (Maulana, 2009). The results of research conducted by Sulchan Chris Wardana (2012), with the research title "The Effect of Health Education about Hypertension on Knowledge about Hypertension at the Gelatik posyandu in the work area of the Pundong Community Health Center, Bantul Regency", obtained research results using the Wilcoxon test which found $P=0.000$. Because $P < 0.05$, H_0 is rejected while H_1 is accepted. So it was concluded that counseling about hypertension had an effect on the knowledge of hypertensive patients at the Gelatik posyandu in the work area of the Pundong Community Health Center, Bantul Regency. The results of another research conducted by Mega Tri Susanti (2011), at the Pandanaran Community Health Center, Semarang," obtained research results using the Wilcoxon Signed Ranks Test. The results of the knowledge variable before and after being given health education were 0.000 ($p < 0.05$). This shows that there is a significant effect before and after providing health education about hypertension.

Based on the above background, the research problem was formulated as to whether there is an influence of health education on sufferers' knowledge about hypertension in the Jongaya Makassar Health Center Working Area. The aim of this research is to determine the effect of health education on sufferers' knowledge about hypertension in the Jongaya Makassar Health Center Working Area.

Methods

This type of research is experimental research using a "one group pretest-posttest design", namely a research design carried out by giving a pretest (initial observation) to determine the respondent's knowledge before being given health education, then after being given health education a posttest (final observation) is carried out to determine the respondent's knowledge after being given health education. This research was carried out in the Jongaya Makassar Health Center Working Area. The samples in the study were hypertension sufferers who sought outpatient treatment in the Jongaya Makassar Health Center Working Area, namely 15 people. Sampling used a non-probability sampling method with accidental sampling technique, namely with respondents who had inclusion criteria such as hypertension sufferers who sought outpatient treatment in the work area of the Jongaya Makassar Health Center, were willing to be respondents and could communicate well, as well as exclusion criteria such as not being able to take part in the research process starting from the pretest. until the posttest and refused to be a respondent. The data processing process includes editing, coding, data entry and cleaning steps. The types of data analysis used are univariate analysis and bivariate analysis.

Results and Discussion

Bivariate Analysis

Table 1. Paired Statistical Samples Before and After Extension in the Jongaya Makassar Community Health Center Working Area

Knowledge Respondent	n	Mean	p-value
(Pretest)	15	1,33	0,000
(Posttest)	15	1,93	

Source: Primary Data

Table 1 shows that the average value of respondents' knowledge before being given health education was 1.33%, and after being given health education, respondents' knowledge increased with an average value of 1.93%.

Statistical results using the paired sample t-test obtained a p value = $0.000 < 0.05$, meaning that there is an influence of health education on sufferers' knowledge about hypertension in the Jongaya Makassar Health Center Working Area.

The Influence of Health Education on Sufferers' Knowledge about Hypertension

Health education is an effort to change human behavior carried out through an educational approach. The main goal of health education is to increase people's knowledge, attitudes and behavior, as well as improving people's health status.

The research results showed that of the 15 respondents who were studied before being given counseling (pretest), it showed that the majority had insufficient knowledge about hypertension, namely 10 people (6.7%). This is due to the lack of information that respondents know about hypertension. This can be seen in the results of the summary of respondents' answers to the questionnaire, where respondents who have less knowledge do not know the causes, normal blood pressure values, risk factors, healthy eating patterns, and efforts to prevent hypertension. However, it was found that 5 people (33.3%) had sufficient knowledge. This was because the respondents had received information through health service officers at the community health center when controlling blood pressure, and had also attended counseling about hypertension before.

Before being given health education about hypertension, of the 15 respondents studied only 5 people (33.3%) had sufficient knowledge, but after being given health education almost all respondents knew and understood quite well about hypertension, namely 14 people (93.3%). This means that there were 9 respondents whose knowledge increased after being given the counseling, while for the 5 respondents who already had sufficient knowledge before the counseling, there was an increase in knowledge of around 7-10% after being given the counseling. Their knowledge and understanding of hypertension improved after receiving additional information from the health education provided. This is in accordance with the aim of the counseling carried out, namely to provide health education to respondents about hypertension in order to increase sufferers' knowledge about hypertension. Knowledge is a learning process using the five senses that a person carries out on certain objects to produce knowledge and skills. Although there is still 1 person (6.7%) who does not understand the material that has been given well enough. This is possible because when the counseling was carried out, the respondent did not listen properly to the information given, causing the respondent to still not understand the material provided well.

Statistical results using the paired sample t-test obtained a p value = $0.000 < 0.05$, meaning that there is an influence of health education on sufferers' knowledge about hypertension in the Jongaya Makassar Health Center Working Area. Good knowledge about hypertension will influence patients to be able to overcome recurrence or take precautions to avoid complications. So knowledge about hypertension is something that is very important to have, in order to be able to overcome hypertension itself. One of the efforts made to increase knowledge and understanding of hypertension sufferers is by providing health education. Counseling is a planned effort to spread messages, instill confidence, so that hypertension sufferers are not only aware, know and understand, but also willing and able to carry out recommendations that are expected to improve health status, prevent the risk of complications,

maintain health status, maximize function. and the role of sufferers during illness, and helping sufferers and their families overcome health problems (Purwati, 2014).

The results of research conducted by Sulchan Chris Wardana (2012), with the research title "The Effect of Health Education about Hypertension on Knowledge about Hypertension at the Gelatik posyandu in the work area of the Pundong Community Health Center, Bantul Regency", obtained research results using the Wilcoxon test which found $P=0.000$. Because $P < 0.05$, H_0 is rejected while H_1 is accepted. So it was concluded that counseling about hypertension had an effect on the knowledge of hypertensive patients at the Gelatik posyandu in the work area of the Pundong Community Health Center, Bantul Regency.

Someone takes action because of the knowledge they have. The knowledge referred to in this research is the patient's knowledge about hypertension. This knowledge can be obtained from the learning process, one of which is through health education. According to Budiman & Riyanto A (2013), the learning process is influenced by various internal factors, such as motivation and external factors in the form of available information facilities, as well as socio-cultural conditions.

Knowledge is a learning process using the five senses that a person carries out on certain objects to produce knowledge and skills. Knowledge is closely related to education, so the person's knowledge will become broader. Health education in health promotion is needed as an effort to increase knowledge and awareness, in addition to knowledge, attitudes and actions. Therefore, efforts are certainly needed to provide and convey information which is an area of health education (Maulana, 2009).

According to Notoatmodjo (2003), quoted in Purwati (2014), health education cannot be separated from the media, the messages are conveyed easily, and are more interesting. Media can also avoid misperceptions, clarify information, facilitate understanding, reduce verbalistic communication, and facilitate communication. In this way, the target can learn the message and be able to decide to adopt behavior in accordance with the messages conveyed. Health education for the public or wider community can be done through mass media, while for smaller communities, for example in hospitals, health centers or private practice doctors, brochures or leaflets can be made.

Conclusion

From the results of this research, it can be concluded that health education is very influential for hypertension sufferers because with health education, hypertension sufferers will better understand the disease they are suffering from and can take preventive measures to avoid more serious complications of the disease. Before being given counseling, most respondents had insufficient knowledge about hypertension, namely 10 people (6.7%), but after being given counseling, almost all respondents had sufficient knowledge about hypertension, namely 14 people (93.3%), and there was an influence health education on sufferers' knowledge about hypertension in the Jongaya Makassar Health Center Working Area, with a value of $p = 0.000 < 0.05$.

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