

Abstrak

Hipertensi tidak terkontrol merupakan faktor risiko utama terjadinya stroke. Tingginya prevalensi hipertensi tidak terkontrol menyebabkan risiko stroke meningkat sehingga diperlukan upaya pencegahan stroke. Permasalahan yang dihadapi dalam pengendalian faktor risiko stroke meliputi pengetahuan yang tidak akurat, kepatuhan yang tidak optimal dan kesadaran risiko stroke yang kurang.

Tujuan penelitian adalah: 1) Mengidentifikasi faktor – faktor yang menyebabkan hipertensi tidak terkontrol pada pasien stroke; 2) Mengeksplorasi pengalaman pasien pasca stroke dengan riwayat hipertensi; 3) Mengidentifikasi pengaruh *peer group education* terhadap tekanan darah, pengetahuan, *self-efficacy*, dan perilaku *self-care* untuk pencegahan stroke pada kelompok hipertensi. Penelitian dibagi menjadi tiga tahap, tahap satu menggunakan sistematis review dan meta-analisis, tahap dua menggunakan desain kualitatif dan tahap tiga menggunakan desain penelitian *quasi experiment*. Variabel yang diukur adalah pengetahuan, *self-efficacy*, motivasi, perilaku *self-care* untuk pencegahan stroke dan tekanan darah. Instrumen yang digunakan adalah kuesioner yang berisi tentang data demografi, *Hypertension Knowledge Level Scale* (HKLS) dan *High Blood Pressure Self-care Profile* (HBP-SCP). Analisis tahap dua menggunakan analisis kualitatif metode Colaizi, sedangkan analisa data tahap tiga menggunakan *general linear model repeated measures* (GLM RM). Hasil tahap I berdasar 7 artikel yang direview diketahui faktor yang berhubungan kuat dengan hipertensi yang tidak terkontrol pada stroke meliputi : kepatuhan pengobatan (POR = 2.23[95% CI 1.71-2.89], $p = 0.342$; $I^2 = 6.7\%$), penggunaan obat antihipertensi (POR = 1.13[95% CI 1.19-1.59, $p = 0.001$; $I^2 = 90.9\%$), derajat hipertensi (POR = 1.14 [95% CI 1.02-1.27], $p = <0.001$; $I^2 = 97.1\%$), diabetes mellitus (POR = 0.71 [95% CI 0.52-0.99], $p = <0.001$; $I^2 = 96.5\%$), Atrial fibrillasi (POR = 1.74 [95% CI 1.48-2.04], $p = <0.001$; $I^2 = 93.1\%$), trigliserida (POR = 1.47 [95% CI 1.23-1.75], $p = 0.879$; $I^2 = 0\%$). Tema-tema yang ditemukan pada penelitian tahap II meliputi: pengalaman awal stroke, kebiasaan penyebab stroke, faktor pendukung kejadian stroke, alasan pengobatan tidak teratur, pengetahuan tentang pencegahan stroke, dukungan dari keluarga dan tenaga kesehatan dalam pencegahan stroke, faktor penghambat perilaku pencegahan stroke. dan harapan pasien setelah stroke. Hasil penelitian tahap III adalah *peer group education* efektif menurunkan tekanan darah sistolik ($p=0,000$) dan tekanan darah diastolic ($p=0,000$) serta meningkatkan pengetahuan ($p=0,001$), *self-efficacy* ($p=0,000$), motivasi ($p=0,000$) dan perilaku *self-care* ($p=0,000$). Terdapat perbedaan *clinical* yang signifikan antara kelompok intervensi dan kontrol. Kesimpulan: *peer group education* efektif menurunkan tekanan darah serta meningkatkan pengetahuan, *self-efficacy*, motivasi dan perilaku *self-care* penderita hipertensi.

Kata kunci: hipertensi tidak terkontrol, perilaku *self-care*, *self-efficacy*, motivasi, edukasi, *peer group*

Abstract

Uncontrolled hypertension is a major risk factor for stroke. The high prevalence of uncontrolled hypertension causes the risk of stroke to increase so that stroke prevention efforts are needed. The problems faced in controlling stroke risk factors include inaccurate knowledge, sub-optimal adherence and less awareness of stroke risk. The objectives of the study were: 1) To identify the factors that cause uncontrolled hypertension in stroke patients; 2) Exploring the experiences of post-stroke patients with a history of hypertension; 3) To identify the effect of peer group education on blood pressure, knowledge, self-efficacy, and self-care behavior for stroke prevention in the hypertension group. The study was divided into three stages, stage one using a systematic review and meta-analysis, stage two using a qualitative design and stage three using a quasi experiment research design. The variables measured were knowledge, self-efficacy, motivation, self-care behavior for stroke prevention and blood pressure. The instrument used was a questionnaire containing demographic data, Hypertension Knowledge Level Scale (HKLS) and High Blood Pressure Self-care Profile (HBP-SCP). The second stage analysis used the Colaizi method qualitative analysis, while the third stage data analysis used the general linear model repeated measures (GLM RM). The results of stage I based on 7 articles reviewed showed that the factors that were strongly associated with uncontrolled hypertension in stroke included: medication adherence (POR = 2.23 [95% CI 1.71-2.89], $p = 0.342$; $I^2 = 6.7\%$), use of antihypertensive drugs. (POR = 1.13 [95% CI 1.19-1.59, $p = 0.001$; $I^2 = 90.9\%$), degree of hypertension (POR = 1.14 [95% CI 1.02-1.27], $p = <0.001$; $I^2 = 97.1\%$), diabetes mellitus (POR = 0.71 [95% CI 0.52-0.99], $p = <0.001$; $I^2 = 96.5\%$), Atrial fibrillation (POR = 1.74 [95% CI 1.48-2.04], $p = <0.001$; $I^2 = 93.1\%$), triglycerides (POR = 1.47 [95% CI 1.23-1.75], $p = 0.879$; $I^2 = 0\%$). The themes that are found in phase II research include: initial stroke experience, stroke-causing habits, supporting factors for stroke incidence, reasons for irregular treatment, knowledge of stroke prevention, support from family and health professionals in stroke prevention, inhibiting factors for stroke prevention behavior and patient expectations after stroke. The results of the stage III research were that peer group education was effective in reducing systolic blood pressure ($p = 0,000$) and diastolic blood pressure ($p = 0,000$) as well as increasing knowledge ($p = 0.001$), self-efficacy ($p = 0,000$), motivation ($p = 0,000$) and self-care behavior ($p = 0.000$). There were significant clinical differences between the intervention and control groups. Conclusion: peer group education is effective in reducing blood pressure and increasing knowledge, self-efficacy, motivation and self-care behavior of hypertensive patients

Keywords: uncontrolled hypertension, self-care behavior, self-efficacy, motivation, education, peer group