

## **HEALTH EDUCATION HYPERTENSION PREVENTION**

Siti Norkhalisa<sup>1</sup> Ayu Agustina<sup>2</sup>

<sup>1,2</sup>Cahaya Bangsa University, Banjar, 70122 Indonesia

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### **ABSTRACT**

**Background:** The prevalence of Hypertension is increasing and increasing worrying so that Hypertension is still a global problem. One way to be able to prevent Hypertension by controlling its risky behaviors, including by avoiding smoking, unhealthy diet (lack of consumption of vegetables and fruits as well as consumption of sugar, salt and excess fat), preventing the occurrence of obesity, lack of physical activity, excessive alcohol consumption and stress. One of the top priorities and one of the effective nursing interventions to increase the level of public awareness is the existence of health education programs. After participating in health education activities, it is expected that the public can know and be able to prevent the onset of hypertension. **Methods:** Health Education is carried out by means of lectures and discussions with the community, using LCD media accompanied by leaflet distribution and held on December 24, 2019 with the target of all citizens in Tawangsari village, Mojosongo Village, Jebres District. **Results:** Implementation of hypertension prevention health education followed by 20 participants. The activity went smoothly, the participants were enthusiastic and able to understand the material delivered where when the presenter evaluated the participants were able to answer well in accordance with the questions asked. **Conclusion:** hypertension prevention health education activities effectively open insights into the health knowledge of citizens, the creation of public awareness to implement a healthy lifestyle, check blood pressure regularly, and routinely consume hypertensive drugs.

**Keywords:** hypertension, health education, preventive, knowledge, behavior

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### **INTRODUCTION**

The prevalence of hypertension continues to increase and is increasingly worrying so that hypertension is still a global problem (Artiyaningrum et al., 2016). The incidence of hypertension reaches almost 1 billion people worldwide. It is estimated that there will be a spike in the prevalence of people with hypertension to 1.5 billion people in 2025 (Dulay & Simamora, 2017).

The high prevalence of hypertension, which is 34.1%, makes it a big challenge to reduce the incidence of hypertension in Indonesia. DataRiskasdas (2018) states that the prevalence of hypertension in the population aged 18 years is 34.1%, the highest incidence is in South Kalimantan (44.1%), while the lowest incidence is in Papua (22.2%). Based on age group, hypertension occurred at 31-44 years old (31.6%), 45-54 years old (45.3%), 55-64 years old (55.2%).

It is known that 8.8% of the prevalence of hypertension, 34.1%, was diagnosed with hypertension and 13.3% of people diagnosed with hypertension did not take medication and 32.3% did not take medication regularly.

This data shows that most people with hypertension do not know that they are being diagnosed with hypertension so they do not get treatment early because of late detection. Hypertension is referred to

as "The Silent Killer" because it is often without complaints, so the patient does not know he has hypertension and is only known after complications occur. Target organ damage due to complications of hypertension will depend on the magnitude of the increase in blood pressure and the duration of the undiagnosed and untreated blood pressure condition. Hypertension by controlling risky behavior, including by avoiding smoking, unhealthy diet (less consumption of vegetables and fruit and consumption of sugar, salt and excess fat), preventing obesity, lack of physical activity, excessive alcohol consumption and stress. For the population aged 15 years and over, data on risk factors for hypertension were found including 95.5% lack of vegetables and fruit, 35.5 % lack of physical activity, 29.3% smoking proportion, 31% central obesity proportion and 21.8% general obesity proportion. The data above shows an increase when compared to 2013. After participating in health education activities, it is hoped that the public will be able to know and be able to prevent the onset of hypertension.

### **METHOD**

Health Education was carried out by means of lectures and discussions with the community, using LCD media with leaflet distribution and was carried

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out 1 time, namely on December 24, 2019 with the target of 20 people in Tawang Sari village, Mojosoongo Village, Jebres District. In addition to providing health education to the community, we also provide free blood pressure checks to monitor the blood pressure of the local community before we provide education about hypertension. Blood pressure checks using a sphygmomanometer and a stethoscope.

## RESULTS

The results of the Implementation of Hypertension Prevention Health Education activities in Tawang Sari Village, Mojosoongo Village, Jebres District, Surakarta City were attended by 20 participants. The activity went smoothly, participants were able to understand the material presented where when the presenter did an evaluation as many as 17 participants were able to answer well according to the questions asked (the ability to answer questions). Participants had high enthusiasm to change their lifestyle to be healthier by consuming low-salt foods, reducing flavorings, increasing consumption of vegetables and fruit and doing light movements at home. This is evidenced by the number of participants who asked 14 questions and the questions related to foods that were safe to consume, foods that should be limited or avoided, and were there any additional supplements to prevent hypertension.

## DISCUSSION

Knowledge is the first step to change a person's behavior, especially in the health sector. If individuals do not know what to do to maintain their health, then behavior change is difficult to implement (Rasmussen, 2018). Knowledge is also a health strategy to change individual beliefs about something or change behavior (Gross, 2012), (Negara, 2021).

Knowledge alone is not enough to change one's behavior permanently, several other components are needed to change behavior, such as social support around the individual (Rasmussen, 2018). However, knowledge is very important given to the community. It is very important to explain to the public why changing behavior is important. For example, understanding the health risks associated with hypertension to make decisions to consume healthy foods and have regular health checks if there are signs of hypertension symptoms (Arlinghaus & Johnston, 2018), (Saputra, 2019).

There are several types of knowledge, including; general knowledge or information, knowledge to increase awareness, and knowledge to improve skills. For example, most people know that it is important to adhere to hypertension treatment

recommendations. There are some people who make decisions about the importance of continuing to take medication. After taking several drugs, one day you may feel better and no longer consider it important to continue taking hypertension drugs. The person at that time did not have the skills to abide by the rules in the long term. For example, they may forget to take their medication regularly. For these individuals, more knowledge is needed to raise awareness of its importance and to provide training on how to do it successfully. Once the symptoms subside, the common knowledge that they should continue to take their medication as directed is not enough. A higher level of awareness of why making recommendations to improve health personally is important for that individual to continue. Those who repeatedly forget to take their medication may need to be trained on how to develop a system to help them remember taking their medication. People need to fully understand why changes need to be made and how to make those changes (Arlinghaus & Johnston, 2018), (Negara, 2022).

Providing free blood pressure check facilities and providing education to the public is one strategy to change people's behavior so that they are more aware of their health conditions. With the information about healthy consumption that needs to be applied by the community, it is hoped that it can motivate the community and empower the community to pay attention to their health so that people have an optimal quality of life.

## CONCLUSION

Hypertension Prevention Health Education Activities in Tawang Sari Village, Mojosoongo Village, Jebres District, Surakarta City are effective in opening the knowledge of health knowledge of residents (participants). The creation of public awareness to implement a healthy lifestyle. The creation of awareness from the residents of Tawang Sari Village, Mojosoongo Village, Jebres District, Surakarta City to carry out routine blood pressure checks. Creating awareness from residents who have hypertension (increased blood pressure) for routine drug consumption and control. The majority of the sex respondents were female by 66.6%. The majority of respondents' knowledge of health education on animated children's songs is 56.7%, and after health education, the majority of children's songs have good knowledge of 73.3%. The results of the Wilcoxon test have a P value of 0.000 so that there is an effect of song animation on the knowledge of hand washing with soap (CTPS) for school-age children during the COVID-19 pandemic in Gembol Ngawi Village.

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