RELATIONSHIP OF FAMILY SUPPORT TO *SELF EFFICACY* OF HYPERTENSION TREATMENT IN THE ELDERLY

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ABSTRACT

Background: Hypertension is a chronic disease that is the main cause of death in the world. One of the implementations related to hypertension prevention and treatment programs is to use the concept of self-efficacy to increase one's self-confidence. Self-efficacy can be interpreted as an individual's belief in his own ability to be able to regulate behavior to achieve the expected goals. Actor factors that can affect self-efficacy of treatment in hypertensive patients in the elderly include family support.

Objective: To find out the relationship between family support and self-efficacy in treating hypertension in the elderly from a literature study?

Methods: research design using descriptive literature review. The journal criteria used were filtered based on keywords, namely family support, namely self-efficacy of treatment, and hypertension in the elderly. The number of samples was 11 journals consisting of 8 national journals and 3 international journals.

Results: From several literature review articles conducted, 11 articles were found, which related to self-efficacy support for hypertension treatment in the elderly. The article was analyzed according to the inclusion criteria, namely family support with self-efficacy for treating hypertension in the elderly. Journals found in the form of research, quantitative, cross-sectional explanatory and descriptive

Conclusion: family support for hypertensive patients in the elderly has a relationship with self-efficacy of treatment in hypertensive patients. This means that high family support increases self-efficacy and has an effect on the treatment of hypertension.

Keywords: Family Support, Hypertension, *Self efficacy* Treatment.

INTRODUCTION

Hypertension is a disease that is a problem in the world which is the highest cause of death after heart disease today. According to the World Health Organization, there are around 972 million people or 26.4% of people in the world suffering from this disease, and it is estimated that this will increase by 3% to 29% by 2025 (Pratama, 2016). In Indonesia, it is 34.11% with translation based on the age group 18-24 years (13.22%), 25-34 years (20.13%), 35-44 years (31.61%), 45-54 years (45.32%), 55 – 64 years (55.22%), 65 – 74 years (63.22%) and age > 75 years (69.53%) (Kemenkes RI, 2018) and in South Kalimantan province occupied the highest first position (44.13%) (Kemenkes RI, 2018).

The incidence of hypertension is influenced by two factors, namely internal factors including age, background, attitudes and emotions caused by the illness, and the personality of the patient (Anggina et al., 2010). While external factors include education and health, the relationship between patients and health workers and support from the social and family environment. Family support is an attitude, an act of family acceptance of family members, in the form of informational support, assessment support, instrumental support and emotional support. According to Friedman (2010) that the factors that influence family support include; income or occupation level, and education level. Based on research according to Irawan (2018), explaining that the factors that influence family support consist of age of family growth & development, family education or knowledge level, family emotional factors, family spiritual factors, family practice, family economic level, and background. culture in the family. According to Firmansyah, Lukman, & Mambangsari, (2017), it is stated that the factors that most influence support family, namely the level of family knowledge, family practice, and family economic level factors.

Reinforced by Satya & Putri (2015) which states that the factors that influence family support such as; family education level, family knowledge, economy, and parents' age. In addition, other factors that influence family support in preventing hypertension are the level of family knowledge, emotional factors, spiritual factors, economic level factors, and cultural background factors.

The existence of family support for the treatment of hypertension patients is expected to increase self-efficacy in the treatment of hypertension. Hypertension treatment that has fairly good self-efficacy may be able to help themselves for their relapse prevention efforts (Ariesti, 2018; Kawulusan, Katuuk, & Bataha, 2019), (Saputra, 2019).

According to Wang et al., (2017), suggesting that in helping clients achieve the ability to perform self-care, it is necessary to have motivation, cultural beliefs, *self-efficacy* and social support. Where, according to research by Sukamaningsih and Putra (2020) states that *self-efficacy* is an important key to its ability to perform a behavior to achieve a desired goal. Individuals who have *self-efficacy* tend to be full of confidence and have competence and are able to overcome their health problems. Prevention and control of hypertension is influenced by the community, the environment and the patient himself.

Family support is an attitude, an act of family acceptance of family members, in the form of informational support, assessment support, instrumental support and emotional support. According to Friedman (2010) that the factors that influence family support include; income or occupation level, and education level. In addition, the age of family growth & development, education or family knowledge level, family emotional factors, family spiritual factors, family practices, family economic level, and cultural background in the family can also affect family support (Irwan 2008), (Anggara, 2022). Of these factors that most influence family support, namely the level of family knowledge, family practices, and family economic level factors (Firmansyah, et al 2017), (Negara, 2018). Meanwhile, based on the results of research by Ida and Fatmawati (2020) it is stated that the factors that influence family support such as; family education level, family knowledge, economy, and parents' age. In addition, other factors that influence family support in preventing hypertension are the level of family knowledge, emotional factors, spiritual factors, economic level factors, and cultural background factors.

The existence of family support for the treatment of hypertension patients is expected to increase self-efficacy. *Self-efficacy* is a person's belief in his abilities that he is able to do something or overcome a situation that he will succeed in doing. In addition, according to research by Reilly, Dhingra, & Boduszek (2014),, states that *self-efficacy* is an important key to its ability to perform a behavior to achieve a desired goal. Individuals who have *self-efficacy* tend to be full of confidence

and have competence and are able to overcome their health problems.

Prevention and control of hypertension is influenced by the community, the environment and the patient himself. Treatment of hypertensive patients is a long process, which requires a management strategy for the disease (Kawulus, 2019; Prabasari, 2021). The hypertension disease control program has also involved families and health workers with sufferers. To achieve treatment success through patient involvement in self-management, so that hypertensive patients can actively participate in the treatment and care of diseases that can be influenced by individual behavior, drug use compliance, attention to changes in the severity of hypertension (Putri et al., 2020), (Negara, 2021).

Based on the description above, researchers are interested in understanding more about the topic, so the researchers took the title of the study "Literature Review of the Relationship of Family Support to *Self-Efficacy* of Hypertension Treatment in the Elderly". Because according to Firmansyah, Lukman, & Mambangsari, (2017), it is stated that the factors that most influence family support are the level of family knowledge, family practices, and family economic level factors. The existence of family support for the treatment of hypertension patients is expected to increase self-efficacy in the treatment of hypertension. Hypertension treatment that has good enough self-efficacy may be able to help themselves for their relapse prevention efforts (Ariesti, 2018; Pontangan, 2019; Putri, Anita & Bataha, 2019), (Lestari, 2022). Sukamaningsih and Putra (2020) state that *self-efficacy* is an important key to its ability to perform a behavior to achieve a desired goal. Individuals who have *self-efficacy* tend to be full of confidence and have competence and are able to overcome their health problems. Prevention and control of hypertension is influenced by the community, the environment and the patient himself.

RESEARCH METHODS

This research method is carried out with a Literature review search strategy using an electronic based that is accredited / indexed by sinta such as Biomed Central, Garuda Portal, Google Scholar, Elsevier and PubMed. Search *Literature review* in this study using the keywords family support, hypertension, *self efficacy* This research was conducted by means of a literature review, conducted from July to September 2022 at the Cahaya Bangsa University, Banjarmasin. the data used is secondary data.

RESULTS

After collecting journals using accredited journal sites such as Google Scholar, Proquest and Biomed Central by making a selection by entering several keywords "Hypertension" + " Medication *Self efficacy* " + "Family support". Furthermore, screening is carried out by looking at the title, year of publication, suitability of research objectives, and ease of access, available in full text. Then the search results obtained 905 journals were identified and the eligibility criteria were carried out. Then after it was filtered, 865 journals were obtained, then excluded studies were carried out and 40 journals were obtained. After that, excluded studies were again based on inclusion criteria so that the total articles that were eligible for review were 11 journals.

The results of the literature review method contain literature that is in accordance with the purpose of writing. The presentation of the results in writing a literature review final project contains a summary of the results of the research on each selected article, and is summarized in the form of an explanation in the form of a paragraph regarding the meaning of the table and includes the trend (Hariyono, 2020).

The literature collection process is carried out by selecting the number of journals or articles from 124 literatures into 11 literatures, 11 international and national journals regarding "The Relationship of Family Support to *Self efficacy* of Hypertension Treatment in the Elderly". The search process is carried out through an indexed electronic based such as Google Scholar.

Author ; Susanto, Tantut Rasny, Hanny Susumaningrum, Latifa Aini Yunanto, Rismawan Adi, 2018. Title; Prevalence of hypertension and predictive factors of self-efficacy among elderly people with hypertension in institutional based rehabilitation in Indonesia.

This study states that changes in the aging process will affect the body's physical functions which are generally associated with hypertension. Associated with various factors such as age, weight (obesity), lower level of education, unbalanced diet, regular drinking and non-comorbidity (Yang et al., 2017). Therefore, behavioral management and self-efficacy are needed to maintain blood pressure and its factors in the elderly to keep hypertension problems under control. Self-care management is urgently needed to control the blood pressure of the elderly (Friedberg et al., 2015), (Negara, 2018).

Therefore, *self-efficacy* is needed to control or change the factors that affect blood pressure in the elderly with. The sample in this study were 64 elderly people who participated in this study. This research method uses a cross-sectional design approach based on the sampling technique using convenience sampling.

The results of this study stated that the prevalence of systolic and diastolic hypertension in the elderly living in IBR was 31.30% and 45.30%, respectively. The predictors of self-efficacy of the elderly against systolic hypertension were spiritual activity, length of stay, education, occupation of the elderly before entering rehabilitation, and dementia; During daily activities, the risk of falls, pain, and depression, anxiety and stress are significant predictors of self-efficacy in older people with diastolic hypertension.

Writer; Farazian, F., Moghadam, ZE, Nabavi, FH, & Vashani, HB (2019). Title: Effect Of Self Care Education Designed Based On Bandura's Self-Efficacy Model On Patients With Hypertension: A Randomized Clinical Trial.

Hypertension is a disease that can be controlled and can increase confidence in living with this chronic condition. Self-efficacy or people's confidence regarding their own ability to engage in a particular behavior can affect the amount of effort they put into achieving that goal, and consequently their overall performance in this endeavor. Increased self-efficacy can lead to improved physical and mental health of patients by changing behavior and treatment acceptance.

The sample in this study was 60 respondents, in the city of Mashhad, Iran, during 2017 using the cross-sectional design method. The results of this study showed that the mean age was reported at 62.0±6.9 and 59.3±9.2 in the intervention and control groups, respectively. Repeated ANOVA measures showed significant differences between the two groups after the intervention in terms of adherence to the treatment regimen (P = 0.004), involvement in physical activity (P = 0.002), adherence to weight management goals (P = 0.006). A significant difference was observed between the two groups in terms of their total self-care scores immediately after the intervention and one month later (P = 0.002).

Writer; Rusmadi, Nurhidayati Pristianty, Liza Zairina, Elida, 2021. Title Validity and Rehabilitation of medication adherence questionnaire for elderly patients with hypertension based on the theory of the Health Belief Model.

Compliance with drug use in the elderly with hypertension is based on the concept of the Health Belief Model (HBM). Adherence to medication is often determined by patients' beliefs about their medication use and their health condition. The individual beliefs in question include perceived susceptibility, perceived severity,

perceived benefits, perceived barriers, and self-efficacy.

The sample in this study was 30 participants aged 60-79 years and were taking captopril or amlodipine at least in the last 3 months involved in this study. The research method used is quantitative with a cross sectional design. The results show that of the 45 question items in the questionnaire, there are 8 items that are not valid while the other 37 items are declared valid based on the Pearson Correlation value (> r table 0.361).

Writer; Supriyadi, f. I. (2020). Title Literature review: quality of life of the elderly with hypertension.

The research method used is quantitative with literature review. The results of this study indicate that the frequency of the elderly with low education, the elderly who work, and the elderly who are married is still high.

Writer; Erlyn, ER (2020) Negara (2022). Title: Effect of Deep Breathing Relaxation Therapy on Lowering Blood Pressure in Elderly Patients with Hypertension.

Hypertension is a non-communicable disease that is a serious health problem and needs to be watched out for. Hypertension is a condition in which a person experiences an increase in blood pressure above normal which is indicated by the systolic and diastolic numbers. Blood pressure was measured using a digital sphygmomanometer. High blood pressure in hypertensive patients can be treated with pharmacological and non-pharmacological therapies. One of the non-pharmacological therapies is deep breathing relaxation techniques. This type of research used is pre-experimental with a one-group pretest posttest design. The population in this study were all hypertensive patients with a sample of 25 respondents. The sampling technique used in this research is accidental sampling. The data obtained were then processed using a different test, namely the paired sample T-test with a confidence level of 95% with <5% (0.05). The results of the study with SPSS showed that there was a significant effect between blood pressure before and after deep breathing relaxation techniques were performed in hypertensive patients.

Writer; Novitasari, L., & Wakhid, A. (2018). Title: Relationship between Family Support and Efficacy in Elderly Hypertensive Patients

According to Bandura, self-efficacy is an individual's belief in his ability to organize and perform certain tasks needed to get the expected results. One source of self-efficacy related to family support is verbal persuasion. Where when a person is encouraged by others to manage problems related to illness. Increasing a person's understanding of his

illness, is when the closest person talks about his experience so that it affects others. The sample in this study were 104 people. Sampling technique used by all members of the population as a sample. The research method used is cross sectional. The results showed that most of the family support was in the good category of 32 (45.7%), the self-efficacy of hypertensive patients was mostly moderate, with 37 people (52.9%).

Writer; Puspita, E., Oktaviarini, E., & Santik, YDP (2018). Title; The role of families and health workers in adherence to treatment of hypertension sufferers at the Gunungpati Public Health Center, Semarang City.

Hypertension is a disease that requires long-term therapy, so patient compliance is required in undergoing treatment to control blood pressure and reduce the risk of complications. The rate of adherence to treatment at the Gunungpati Health Center in 2014 was only 13% and the non-compliance rate was 86%. Methods: Analytical descriptive research with cross sectional design. The population of this study amounted to 620 patients. The number of samples taken as many as 84 respondents by accidental sampling. Measurement of compliance was carried out using the MMAS (Modified Morisky Adherence Scale) questionnaire. Data analysis was univariate and bivariate (chi-square). Results: Family support (p-value; 0.005; 95 CI= 5.141) and health workers (p<95% CI=2.172-5.391) were associated with hypertension adherence in treatment.

Writer; Suprayitno, E., & Huzaimah, N. (2020). Title of Assistance for the Elderly in Preventing Complications of Hypertension.

Hypertension is a common chronic disease worldwide and a major risk factor for cardiovascular disease. The main causes of this disease are genetic factors, behavior and lifestyle. Low awareness of hypertension management is the main cause of stroke complications.

The incidence of hypertension in the elderly is very high, even the most posyandu visits are hypertensive patients reaching 70%. These elderly people also do not understand the long-term impact of hypertension such as stroke. Participants in this activity were 15 elderly people with hypertension. The methods in this activity are counseling, lectures and discussions. The success of this event can be seen from the enthusiasm and enthusiasm of the elderly. The elderly also play a very active role in answering the evaluation of the material that has been delivered. The implementation of service activities was carried out smoothly, Most of the 93% (14 elderly) increased their knowledge in the good knowledge category while 6.7% (1 person) in the category of sufficient knowledge in preventing

hypertension complications and committed to carrying out all the recommendations from the service team to prevent complications strokes.

Writer; Masnina, RR (2020). The title of the relationship between family support and blood pressure in the elderly with hypertension in the working area of the Air Putih Health Center, Samarinda.

Family support is very necessary, because it can reduce feelings of anxiety in patients, increase the spirit of life, the attachment of patients to carry out hypertension treatment so as to obtain the goals of hypertension treatment. Methodology: This research uses quantitative research, descriptive research design with Correlation study. The research is in the form of a cross sectional. The research population is 468 respondents with a sample of 83 respondents using the Accidental Sampling technique. Results: The results of the statistical test of the relationship between family support and blood pressure, emotional support with systolic blood pressure p-value 0.022 and diastolic pressure p-value 0.012. Support award with systolic blood pressure p-value 0.000 and diastolic pressure p-value 0.003. Information support with systolic blood pressure p-value 0.036 and diastolic pressure p-value 0.010. Instrumental support with p-value systolic blood pressure 0.000 and diastolic pressure p-value 0.001.

Writer; Widiandari, TD, Widiani, E., & Rosdiana, Y. (2018). The title of the Relationship between Family Support and Motivation of the Elderly in the Management of Hypertension at the Internal Polyclinic of RST Dr. Soepraoen Malang.

Reducing the risk of increasing blood pressure in the elderly can be done by adopting a healthy lifestyle such as exercise, regulating diet and checking blood pressure periodically. This requires strong motivation from the elderly with hypertension to manage hypertension so as not to cause complications of other diseases. The role of the family is very influential on the motivation of the elderly in carrying out the management of hypertension. This research uses correlation analytic method with cross sectional approach. The population in this study were 53 elderly people with hypertension. The sample size is 46 people with purposive sampling technique. Data analysis used the Pearson statistical test with a significance level of 0.05. Based on the results of the study, it was found that 52.2% of family support for the elderly in the management of hypertension was in the sufficient category, and 63% of the motivation of the elderly in the management of hypertension in the sufficient category. The results of the bivariate analysis showed the results of = 0.000 <0.05 then H1 was accepted, meaning that there was a

relationship between family support (emotional and appreciation, facilities, and informational) with the motivation of the elderly in managing hypertension.

DISCUSSION
Reviewing Articles About Family Support for Hypertension in the Elderly

According to the assumption of the researcher, the data shows that family support is high due to the high concern of the family towards the respondent after being given education. For clients who still have low family support, it may be due to a lack of caring family or providing motivation to clients so that clients feel less valued.

In addition, family support is also influenced by socio-demographics, including age, gender and marital status. The connection is if at that age the respondent's age increases, the respondent will start to guide himself and assess himself, and focus more on accepting the disease he is experiencing so that the respondent will have high motivation. This is in accordance with what was stated by Suprayitno & Huzaimah, (2020). Mention that older patients are more confident in their ability to manage and treat their illness. This can be because women usually have better coping mechanisms than men, besides that women are usually more independent than men. This is in accordance with what was stated by Widiandari, Widiani, & Rosdiana. (2018). Mention that women have better self-confidence than men. Women are considered more obedient in undergoing treatment and self-care than men.

In addition, there is also a relationship with marital status, most of the respondents in this study have marital status, with the marital status indicating that there are still life partners who can help and encourage respondents' belief or motivation in their ability to take treatment actions. As stated by Masnina. (2020). Mention that someone who is married and lives together has fewer psychological problems than someone who is not married (Bar, 2022).

The results of this study are comparable to the results of research conducted by Novitasari, & Wakhid, (2018). Shows that there is an influence on the client's family support after being given health education. The family is a place of health behavior and care. In other words, the family has the function of carrying out health promotion and care for sick family members (Friedman, 2010). Family support is very useful to increase respondents in treatment, so it can be said that if family support is good then the client's treatment will increase and vice versa if family support is lacking then the client's treatment will decrease. Therefore, family support is certainly

very much needed by hypertensive patients, in improving treatment.

Reviewing Articles Between *Self Efficacy* Against Hypertension in the Elderly

In patients with hypertension in addition to physical factors, it is also important to pay attention to psychological factors, including individual understanding that can influence individual perceptions. Hypertension is a classic example of a disease that not only has an impact on physical, but also mental and social changes.

Non-adherence to hypertension treatment becomes an obstacle in the success of treatment caused by inadequate motivation for treatment adherence, the large number of non-adherence to treatment will result in a high rate of treatment failure of hypertension sufferers with medication. Belief in *self-efficacy* plays an important role in the success of treatment through health promotion and disease prevention. *Self-efficacy* is related to adherence to care and self-medication. *Self efficacy* in medication adherence, is a significant predictor of quality of life of patients who are cognitively oriented in facilitating medication adherence.

Self-efficacy can increase motivation in adherence to medication, with the patient's emotional condition being decreased so that it will be easier to provide motivation or explanations so that they can achieve their goals. In the intensive phase, lack of motivation affects medication adherence, the large number of non-adherence to treatment will result in a high rate of treatment failure for patients with hypertension (Farazian, et al., 2021). In addition, *self-efficacy* can encourage the process of controlling individuals in maintaining the behavior needed by sufferers in self-care according to their abilities and self-confidence in achieving the level of success (Bar, 2022). *Self efficacy* has been shown to influence individual decisions to take action in increasing adherence interventions related to completeness of treatment through behavioral changes and participation of hypertensive patients in treatment.

Self-efficacy acts as a mediator between changes in quality of life, symptoms and physiological function on medication adherence. *Self efficacy* can predict a person's adherence to self-care. *Self-efficacy* measurement is designed to test an individual's belief to carry out the chosen activity as a desired effort. The level of *self-efficacy* of a person's treatment in undergoing treatment is influenced by several factors including experience, age, education and supported by facilities. A person's knowledge is very important to support his health and self-care, knowledge of *self-efficacy* supports a person to be able to increase confidence

in treatment and pay attention to his health with regular treatment.

Self-efficacy of hypertensive patients such as the types of drugs consumed and a good diet, foods that should be avoided and well consumed can really help to improve health. Age can also affect knowledge where the average age of the elderly has relatively low knowledge and young people have dominant or high knowledge. Higher education will increase knowledge because it absorbs a lot of information. Access to information about health is also supported by social media that can provide knowledge for readers.

Analysis of the relationship between *self-efficacy* of treatment for hypertension shows that there is no relationship between knowledge and *self-efficacy* of treatment (Novitasari & Wakhid, 2018). On the other hand, if *self-efficacy* is low, they will believe that they do not have the ability to achieve what they want and expect. The level of education can determine a person absorbs and understands the knowledge obtained. Meanwhile, research according to Agastiya et al., (2020) shows that the more influential factor in *self-efficacy* is patient knowledge. Because knowledge is closely related to education which can affect his lifestyle. Based on this, it can be concluded that the high and low knowledge of a person can be influenced by several factors that can increase knowledge in the treatment being undertaken.

Analyzing the Relationship of Family Support to *Self Efficacy* of Treatment for Hypertensive Patients

Family involvement in the treatment of hypertension has a very important contribution and as a reinforcement related to patient compliance.

Family support itself is defined as the readiness of the family to provide assistance which includes aspects of emotional support, instrumental support, informative support and appreciation support. Family support can have an impact on *self-efficacy* of hypertensive patients, where with the form of family support, hypertension patients can pay more attention to their health, maintain their diet, get support that they are loved by their families. Because family is the closest person. So that the *self-efficacy* of hypertensive patients can increase because there is family support provided, such as reminding them to take medication, taking them to health services, providing education related to their disease, maintaining and caring for routine hypertension treatment.

The slightest thing that the family does will be very valuable for hypertension patients and they realize that they are needed and loved. The results in this study indicate that there is a relationship

between family support and *self-efficacy* of treatment in hypertensive patients. The results of this study are in line with research by Arvida (2022) which says that being with family can increase *self -efficacy* related to verbal persuasion. This statement is also supported by Suwarda (2022) who says that the right form of family support is social support, one of which is physiological and time support given by family members on a regular and regular basis. This component increases *self-efficacy* and psychosocial behavior and methods used to deal with stress under certain conditions, supporting one's ability to control one's health.

Likewise, research conducted by Kurniati et al, (2019), that there is a relationship between family support and *self-efficacy* in patients with chronic diseases. According to research by Liya et al, (2018) there is a relationship between family support and self-efficacy in chronic disease patients. Family support plays a very big role in caring for patients at home, especially hypertension, maintaining a good lifestyle for sufferers is the most appropriate step in preventing more severe complications. If blood pressure increases, it can result in stroke and other complications. In line with this, it is expected that families can pay attention to family members with hypertension problems, so that maximum treatment and good health conditions are achieved (Susanto, et., al, 2018).

The results of this study indicate that there is a relationship between family support and treatment *self-efficacy* and is the most dominant factor because family support shows the largest Beta value (0.527), so it can be concluded that family support has a dominant effect on treatment *self-efficacy* in hypertension patients in Paku Village Natural. The results of this study are in line with the research conducted by Listi et al, (2021) showing that family support has a significant relationship as a dominant factor in treatment.

Family support is certainly very much needed by hypertensive patients, hypertensive patients who receive good family support will increase *self-efficacy* in terms of realizing compliance with treatment and paying attention to health. In the smallest scope, the family is the closest person and knows individual habits. The attention given regularly can be an encouragement for hypertensive patients. Meanwhile, hypertension patients who receive low family support have an impact on their *self-efficacy* for the disease they are experiencing (Farazian, Moghadam & Nabavi, 2019). So it is hoped that the family can contribute to improving good health for people with hypertension.

CONCLUSION

Based on the results of the search and discussion of journals, it can be concluded that there is a relationship between an increase in the score or category of knowledge of family support and *self-efficacy* of treating hypertension in the elderly to be better than before the intervention of providing counseling with the android application. The results of the analysis of the journals used as literature in this study showed a relationship between family support and *self-efficacy* of treatment for hypertension in the elderly. So that the quality of life is better and *self-efficacy* towards oneself increases.

Based on the 11 journals reviewed, it is stated that the family support intervention on *self-efficacy* has a relationship with the treatment of hypertension in the elderly.

All of the journals that were sampled in this study were some of the results of experimental research and narrative reviews. There are 6 journals that use a cross sectional design, 2 studies that use a narrative review or literature review, 1 study that uses a cross-sectional method, 1 uses a controlled clinical trial method, and 1 uses a lecture and discussion method.

Of the 11 journals that have been reviewed, all apply counseling interventions in an effort to prevent or reduce the degree of hypertension in the elderly.

The population used in 11 research journals is elderly hypertension sufferers. The number of samples from the 11 journals reviewed has differences in each method used.

References

Angga Irawan, Ns., M. K. (2016). Faktor Yang Berhubungan Dengan *Self efficacy* Dan Perilaku Pengobatan Pasien TB Dikabupaten Garut. Universitas Padjadjaran Bandung. [Diakses: 24/November/2021].

Anggara, N., & Negara, C. K. (2022). HEALTH EDUCATION HYPERTENSION PREVENTION. JOURNAL of EDUCATIONS, 1(1).

Anggina, L.L., Hmzah, A.& P. (2010). Hubungan Antara Dukungan Sosial Keluarga dengan Kepatuhan Pasien Hipertensi dalam Melaksanakan Program Diet dimPli Penyakit Dalam RSUD Cibabat Cimahi. Jurnal Penelitian Kesehatan Suara Forikes, I 1-9.

Ariesti, E. (2018). Self efficacy, Kepatuhan, Hubungan *Self efficacy* Dengan Tingkat Kepatuhan Pengobatan Hipertensi Di

Puskesmas Bareng Kota Malang. Jurnal keperawatan malang, 3(1), 39-44.

Bandura, D. (2010). Teori Kognitif Sosial Albert Bandura. Universitas Pendidikan Indonesia. Bandung.

Bar, A. (2022). Dukungan Keluarga dan Self Efikasi terhadap Self Manajemen Penderita Hipertensi. Jurnal Keperawatan Silampari, 5(2), 750-757.

Bender, A., & Ingram, R. (2018). Connecting attachment style to resilience: Contributions of self-care and self-efficacy. Personality and individual differences, 130, 18-20.

Bonsaksen, T., Sadeghi, T., & Thørrisen, M. M. (2017). Associations between self-esteem, general self-efficacy, and approaches to studying in occupational therapy students: a cross-sectional study. Occupational Therapy in Mental Health, 33(4), 326-341.

Dewi, W. N., & Lestari, W. (2021). Efektifitas konsumsi jus mentimun terhadap penurunan tekanan darah pada pasien hipertensi. Jurnal Ners Indonesia, 2(2), 124-31.

Elvianna Cyinthia Putri, C. P. (2020). penerapan terapi refleksi pijat kaki terhadap tekanan darah pada pasien hipertensi Ny. L di koto baru jorong tigo surau baso tahun 2020 (Doctoral dissertation, Universitas Perintis Indonesia).

Fadhli, W. M. (2018). Hubungan antara gaya hidup dengan kejadian hipertensi pada usia dewasa muda di Desa Lamakan Kecamatan Karamat Kabupaten Buol. KESMAS, 7(6).

Falah, M. (2019). Hubungan Jenis Kelamin dengan Angka Kejadian Hipertensi Pada Masyarakat Di Kelurahan Tamansari Kota Tasikmalaya. Jurnal mitra kencana keperawatan dan kebidanan, 3(1), 85-94.

Farazian, F., Emami Moghadam, Z., Heshmati Nabavi, F., & Behnam Vashani, H. (2019). Effect of Self-Care Education Designed Based on Banduraâ s Self-efficacy Model on Patients with Hypertension: A Randomized Clinical Trial. Evidence Based Care, 9(2), 44-52.

Firmansyah, R. S., Lukman, M., & Mambangsari, C. W. (2017). Faktor-faktor yang berhubungan dengan dukungan keluarga dalam pencegahan primer hipertensi. Jurnal Keperawatan Padjadjaran, 5(2).

Friedman, M.M, Bowden, O & Jones,M,(2010). n Keluarga: teori dan praktek: alih bahasa,Achir Yani S,Hamid…(et al): editor edisi bahasa Indonesia, Estu Tiar, Ed.5,Jakarta:EGC.

Haneysti, I. (2017). Hubungan Efikasi Diri Dengan Kepatuhan Diet Rendah Garam Pada Pasien Hipertensi Di Rumah Sakit dr. Soepraoen Malang (Doctoral dissertation, Universitas Brawijaya).

Hanum, P., Lubis, R., & Rasmaliah, R. (2018). Hubungan Karakteristik dan Dukungan Keluarga Lansia dengan Kejadian Stroke pada Lansia Hipertensi di Rumah Sakit Umum Pusat Haji Adam Malik Medan. JUMANTIK (Jurnal Ilmiah Penelitian Kesehatan), 3(1), 72-88.

Hardiyanti, F. (2017). Hubungan Antara Dukungan Keluarga Dalam Penatalaksaan Hipertensi Dengan Tekanan Darah Pada Lansia Hipertensi Di Wilayah Kerja Puskesmas Purwokerto Selatan (Doctoral Dissertation, Universitas Muhammadiyah Purwokerto).

Hidayat, N., & Ginanjar, E. (2021). Hubungan Jenis Kelamin dengan Intensitas Hipertensi pada Lansia di Wilayah Kerja Puskesmas Lakbok Kabupaten Ciamis. Mutiara Medika: Jurnal Kedokteran dan Kesehatan, 16(2), 46-51.

Ida, M., Prihatin, K., & Fatmawati, B. R. (2020). Pengaruh self-efficacy dan dukungan keluarga terhadap kepatuhan menjalani terapi pada penderita hipertensi. Jurnal Keperawatan'Aisyiyah, 7(2), 1-6.

Kaakinen, J. R., Coehlo, D. P., Steele, R., & Robinson, M. (2018). Family health care nursing: Theory, practice, and research. FA Davis.

Kawulusan, K. B., Katuuk, M. E., & Bataha, Y. B. (2019). Hubungan Self-Efficacy Dengan Kepatuhan Minum Obat Hipertensi Di Puskesmas Ranotana Weru Kota Manado. Jurnal Keperawatan, 7(1).

Kementerian Kesehatan RI. 2018. Hasil Riset Kesehatan Dasar (Riskesdas) 2018. Jakarta: Badan Penelitian dan Pengembangan Kesehatan Kementerian RI.

Kootker, J. A., van Mierlo, M. L., Hendriks, J. C., Sparidans, J., Rasquin, S. M., de Kort, P. L., ... & Geurts, A. C. (2016). Risk factors for symptoms of depression and anxiety one year poststroke: a longitudinal study. Archives of physical medicine and rehabilitation, 97(6), 919-928.Lutfiana, D. A., & Margiyati, M. (2021). Penerapan terapi bekam kering dalam menurunkan tekanan darah pada lansia dengan hipertensi di wilayah binaan puskesmas rowosari semarang. Jurnal keperawatan sisthana, 6(2), 61-70.

Kozlova, T. A., Hardy, B. P., & Levin, D. B. (2018). The combined influence of

24-epibrassinolide and 3-indoleacetic acid on growth and accumulation of pigments and fatty acids in the microalgae Scenedesmus quadricauda (CPCC-158). Algal research, 35, 22-32.

Lestari, A. Ariyani, H., Hartanto, D., & (2018). Kepatuhan pasien hipertensi setelah pemberian pill card di rs x banjarmasin. JCPS (Journal of Current Pharmaceutical Sciences), 1(2), 81-88.

Lestari, A., Apriyanti, R., & Negara, C. K. (2022). Low-salt dietary intake reduces hunger in patients with chronic renal failure. Jurnal EduHealth, 13(01), 195-203.

Lo, S. H., Chau, J. P., Woo, J., Thompson, D. R., & Choi, K. C. (2016). Adherence to antihypertensive medication in older adults with hypertension. The Journal of cardiovascular nursing, 31(4), 296.

Luszczynska, A., Schwarzer, R., Lippke, S., & Mazurkiewicz, M. (2011). Self-efficacy as a moderator of the planning–behaviour relationship in interventions designed to promote physical activity. Psychology and Health, 26(2), 151-166.

Masnina, R. R. (2020). Hubungan Dukungan Keluarga Dengan Tekanan Darah pada Lansia Penderita Hipertensi di Wilayah Kerja Puskesmas Air Putih Samarinda. Borneo Student Research (BSR), 1(3), 1693-1704.

Moenadjat, Y. (2020). Jenis Penelitian. Penelitian Bedah Seri 2: Penelitian, 2, 5.

Natasya, D. E. (2018). Pengaruh Pemberian Edukasi Kesehatan pada Kader Posyandu Lansia Terhadap Peran Kader dan Kepatuhan Minum Obat Pasien Hipertensi yang Mengikuti Posyandu Lansia (Doctoral dissertation, Universitas Brawijaya).

Negara, C. K. (2018). The Effect of Discharge Planning on Treatment Adherence among The Elderly with Hypertension in Banjarmasin, South Kalimantan. In 4th International Conference on Public Health (pp. 237-237).

Negara, C. K. (2021). SPORTS ACTIVITIES WITH A DEGREE OF LEVEL HYPERTENSION DURING THE COVID-19 PANDEMIC. j-HIMEL, 2(2), 5-8.

Negara, C. K., & Pandin, M. G. R. (2022). The Habits of the Indonesian People by Drinking Coffee with the Incidence of Hypertension.

Negara, C. K., Erna, E., & Anna, A. (2018). The effect of cucumber juice (cucumis sativus) toward hypertension of elderly at tresna werdha budi sejahtera social institution of

banjarbaru south borneo 2017. IJNP (Indonesian Journal of Nursing Practices), 2(1), 16-21.

Neuman, B. M., & Fawcett, J. (2011). The Neuman systems model.

Novitasari, L., & Wakhid, A. (2018). Hubungan dukungan keluarga dengan efikasi diri pasien gagal ginjal kronik yang menjalani hemodialisa di rsud kabupaten semarang. Jurnal Keperawatan dan Kesehatan Masyarakat Cendekia Utama, 7(2), 154-165.

Nuraini, B. (2015). Risk factors of hypertension. Jurnal Majority, 4(5).

Perdana, E. N. K., Karyus, A., & Nasution, S. H. (2019). Penatalaksanaan Holistik Pasien Diabetes Melitus Tipe 2 dan Retinopati Diabetik serta Hipertensi dengan Pendekatan Dokter Keluarga. Jurnal Majority, 8(2), 283-291.

Prabasari, N. A. (2021). Self Efficacy, Self Care Management, Dan Kepatuhan Pada lansia Hipertensi (Studi Fenomenologi). Jurnal keperawatan malang, 6(1), 1-10.

Pramana, G. A., Dianingati, R. S., & Saputri, N. E. (2019). Faktor-Faktor Yang Mempengaruhi Kepatuhan Minum Obat Pasien Hipertensi Peserta Prolanis Di Puskesmas Pringapus Kabupaten Semarang. Indonesian Journal Of Pharmacy And Natural Product, 2(1), 52–58. Https://Doi.Org/10.35473/Ijpnp.V2i1.196. [Diakses: 9/Desember/2021].

Puspita, E., Oktaviarini, E., & Santik, Y. D. P. (2017). Peran keluarga dan petugas kesehatan dalam kepatuhan pengobatan penderita hipertensi di Puskesmas Gunungpati Kota Semarang. Jurnal Kesehatan Masyarakat Indonesia, 12(2), 25-32.

Puspita, T., & Rismawan, D. (2019). Hubungan Efikasi Diri dengan Kepatuhan Diet pada Penderita Hipertensi. Jurnal Kesehatan Indra Husada, 7(1), 32-32.

Putri, A., Atmojo, J. T., Fajriah, A. S., & Akbar, P. S. (2020). Pendidikan Kesehatan Pencegahan Hipertensi. Jurnal Empathy Pengabdian Kepada Masyarakat, 1(2), 172-181.

Rusmadi, N., Pristianty, L., & Zairina, E. (2021). Validitas dan Reliabilitas Kuesioner Kepatuhan Pengobatan Pasien Lansia dengan Hipertensi berdasarkan Teori Health Belief Model. Jurnal Sains Farmasi & Klinis, 8(1), 60-68.

Saputra, M., Negara, C. K., Afida, A. M., Puspasari, H., & Murjani, A. (2019).

Correlation of Blood Cholesterol Levels and Hypertension with The Incidence of Stroke in The Provincial Hospital of Banjarmasin. INDONESIAN NURSING JOURNAL OF EDUCATION AND CLINIC (INJEC), 4(1), 55-60.

Sijabat, F., & Sinuraya, E. (2019). Hubungan antara kepatuhan pengobatan hipertensi dengan kualitas hidup pasien stroke di rsu sari mutiara medan 2018. Jurnal Health Reproductive, 4(1).

Sujarweni, V. W. (2014). Metodologi Penelitian Keperawatan.

Sukmaningsih, A. K., Putra, G. N. W., Sujadi, H., & Ridayanti, P. W. (2020). Hubungan *Self efficacy* Dengan Kepatuhan Minum Obat Pada Penderita Hipertensi Di Wilayah Kerja Puskesmas Tejakula 1. MIDWINERSLION: Jurnal Kesehatan STIKes Buleleng, 5(2), 286-293.

Sumiyati, S., Yuliana, Y., & Meiliani, R. (2019). Penyuluhan Kesehatan Tentang Hipertensi Di Wilayah RT 03 Kelurahan Murni. Jurnal Abdimas Kesehatan (JAK), 1(3), 180-184.

Suprayitno, E., & Huzaimah, N. (2020). Pendampingan lansia dalam pencegahan komplikasi hipertensi. SELAPARANG Jurnal Pengabdian Masyarakat Berkemajuan, 4(1), 518-521.

Supriyadi, F. I. (2020). Literatur riview: Kualitas Hidup Lansia dengan Hipertensi.

Susanto, T., Rasny, H., Susumaningrum, L. A., Yunanto, R. A., & Nur, K. R. (2019). Prevalence of hypertension and predictive factors of self-efficacy among elderly people with hypertension in institutional-based rehabilitation in Indonesia. Education, 21(1), 14-21.

Wang, Z., Lin, Gao, J., & You, X. (2017). Proactive personality and job satisfaction: The mediating effects of self-efficacy and work engagement in teachers. Current Psychology, 36(1), 48-55.

Wicaksana, K. E., Surudarma, I. W., & Wihandani, D. M. (2019). Prevalensi hipertensi pada orang dewasa menengah dengan overweight di denpasar tahun 2018. Intisari Sains Medis, 10(3).

Wichit, N., Mnatzaganian, G., Courtney, M., Schulz, P., & Johnson, M. (2017). Randomized controlled trial of a family-oriented self-management program to improve self-efficacy, glycemic control and quality of life among Thai individuals with Type 2 diabetes. Diabetes research and clinical practice, 123, 37-48.

Widiandari, T. D., Widiani, E., & Rosdiana, Y. (2018). Hubungan Dukungan Keluarga terhadap Motivasi Lansia dalam Pengelolaan Penyakit Hipertensi di Poli Interna RST Dr. Soepraoen Malang. Nursing News: Jurnal Ilmiah Keperawatan, 3(1).