# THE EFFECT OF DIET EDUCATION ON DIET COMPLIANCE IN HYPERTENSION PATIENTS IN THE WORKING AREA OF PUSKESMAS INSTITUTIONSIN KEMBANG MUMPO SELUMA DISTRICT IN 2020

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#### ABSTRACT

The pattern of non-communicable diseases in Indonesia tends to increase and begins to threaten at a young age, one of the non-communicable diseases is hypertension. According to data from the World Health Organization (WHO) in 2015, nearly 1 billion people worldwide have high blood pressure. This study aims to see the effect of diet education on dietary compliance in hypertension sufferers in the working area of the Kembang Mumpo Puskesmas inpatient in Seluma Regency in 2020. The method used is the design used in this study is the Pre Experimental Design (The One Group Pre Test-Post Test Design). The population in this study were aged 20-44 in 2019, totaling 113 people at the Kembang Mumpo Puskesmas inpatient in Seluma Regency and the sample used was 23 respondents, with the sampling technique using purposive sampling technique. The results of the univariate test analysis were obtained that most of the respondents (65.2%) were female, most of the respondents (60.9%) had high school education, most of the respondents (56.5%) were farmers, most of the respondents (65.2%) with the category of dietary adherence not adhering, before education was carried out, and most of the respondents (56.5%) with the category of dietary adherence were obedient after education. While the bivariate analysis test with the *Paired T-test* statistical test results obtained  $\rho = 0,000$  from  $\rho \le 0.05$ . So it was concluded that there was an effect of dietary education on dietary compliance in hypertensive patients in the working area of the Kembang Mumpo Puskesmas in Seluma District. It is suggested to provide health education about the hypertension diet so that it can further increase the knowledge of hypertensive patients about the implementation of the hypertension diet which is useful for patients to control blood pressure to maintain the patient's health status.

Keywords: Diet Education, Compliance with Hypertension Diet.

# **INTRODUCTION**

Hypertension or better known as high blood disease is a condition in which a person's blood pressure is above the normal or optimal limit, namely 120 mmHg for systolic and 80 mmHg for diastolic. (Kurniawati, 2016).

Data from the World Health Organization (WHO) in 2015 showed that nearly 1 billion people worldwide have high blood pressure. In Indonesia, based on basic health research in 2018, the number of cases of hypertension was 63,309,620 people, while the death rate in Indonesia due to hypertension was 427,218 deaths (Kemenkes RI, 2018). In Bengkulu, based on data obtained from the health office of Bengkulu Province, the number of hypertension cases from 2014-2018 has always increased significantly, in 2018 there were 10,257 cases (Dinkes Bengkulu Province, 2018). Based on data from the Kembang Mumpo inpatient

puskesmas, the number of hypertensive patients from January to December 2019 was 525 people (Kembang Mumpo Inpatient PKM Medical Record, 2019).

Hypertension that lasts for a long time and is not controlled will cause complications in other organs (Ulya, 2017). Controlling blood pressure and preventing complications of hypertension can also be influenced by patient knowledge about hypertension. In addition, regulating hypertension diet compliance is very helpful in hypertension management (Novitasari, 2018).

One of the efforts to improve patient compliance with the hypertension diet and improve hypertension diet behavior is by means of health education or it can be called education (Novitasari, 2018), by providing health education about the hypertension diet, it is expected that there will be changes in knowledge, attitudes and skills in controlling hypertension. One way to measure changes in behavior and attitudes can use measurements of one's knowledge about the hypertension diet (Nuridayanti, 2016)

Hypertension diet is carried out by sufferers throughout their life so that patient willingness and compliance are required to run the diet properly and diligently and comply with the advice of doctors and health workers. Hypertension diet and medication are directed to control blood pressure so that normal blood pressure is achieved.

## **RESEARCH DESIGN AND METHODOLOGY**

This type of research is an analytical study with a Pre Experimental Design research method with the type of The One Group Pre Test-Post Test Design (Sulistyaningsih, 2011). The population in this study amounted to 113 people, the sampling technique used was purposive sampling with a sample size of 23 people with criteria aged 20-44 years. This research was conducted on 27 June 2020 to 08 July 2020, in the Work Area of Inpatient Puskesmas Kembang Mumpo Seluma Regency.

# FINDINGS AND DISCUSSION

## **A. Findings**

From the data that has been collected, the following results are obtained:

## Univariate Analysis

Characteristics of Respondents	Frequency (f)	Percentage (%)		
Respondent Age				
26-35	5	21.7		
36-45	18	78.3		
Total	23	100		
Gender				

## Table 1.Frequency Distribution of Respondents Characteristics

Male	8	34.8
Female	15	65.2
Total	23	100
Education		
SMP	4	17.4
SMA	14	60.9
College	5	21.7
Total	23	100
Occupation		
Farmer	13	56.5
Entrepreneur	7	30.4
PNS	3	13.0
Total	23	100

Based on the table above, it is known that almost all of the respondents' characteristics (78.3%) with ages 36-45 years, most of the respondents (65.2%) are female, most of the respondents (60.9%) with high school education, some Most of the respondents (56.5%) work as farmers.

Table 2. Overview of Diet	Compliance in	Patients	with	Hypertension	before	being	given
Hypertension Diet E	ducation						

Diet Compliance Before education	Frequency (f)	Percentage (%)	
Not Obey	23	100.0	
Total	23	100	

Based on the table above, it can be seen that all respondents (100%) with the dietary

adherence category were not obedient prior to education.

Table 3. An overview of dietary address	dherence to	hypertension	sufferers	after	being given
hypertension diet education	i <b>on</b>				

Diet Compliance After education	Frequency (f)	Percentage (%)	
Not Obey	10	43.5	
Obey	13	56.5	
Total	23	100	

Based on the table above, it can be seen that most of the respondents (56.5%) with the category of dietary adherence were obedient after education, and almost part of the respondents (43.5%) with the category of dietary adherence were not obedient after education.

#### **Bivariate Analysis**

 Table 4. Differences in average dietary adherence in hypertensive patients before and after diet education.

No	Diet Compliance			Mean	SD	Min	Max	T- test
1	Diet	Compliance	Before	16.00	1.382	13	18	
	education							
2	Diet	Compliance	After	36.83	6.110	23	45	0.000
	education							0.000
	Difference			-20.826				
	averag	ge (Mean)						

Based on the table above, it can be seen from the results of the Paired T-test statistical test that the results of  $\rho = 0,000$  from  $\rho \le 0.05$ , which means that there is a significant effect of

dietary education on dietary compliance in patients with hypertension in the working area of the Kembang Mumpo Puskesmas inpatient in Seluma Tahun Regency. 2020.

#### **B.** Discussion

From the results of this study, almost all of the respondents (78.3%) were aged 36-45 years, in line with the results of Fitrina's research (2014). This study shows that respondents who are young adults are more obedient than respondents who are late adults, this is This is because young adult respondents have a higher desire to live healthy, because young adult respondents still have a longer life expectancy than late adulthood.

In terms of gender, most of the respondents (65.2%) are female, with regard to the role of life and different behaviors between men and women in society, because women are more active in the kitchen or cook more often often tasting any cooked food which can affect the level of dietary adherence.

Based on education, most of the respondents (60.9%) are with high school education, where the level of education can affect the learning process or the process of absorbing a person's information and can affect a person's ability to determine healthy living behaviors, so that when given education about the hypertensive diet, respondents can find it difficult absorbing information or difficulties in determining healthy lifestyle behaviors, which can affect the only behavior that does not comply with the hypertension diet.

Based on occupation, most of the respondents (56.5%) were farmers. where a farmer's job is work that is on farmland every day so that respondents who work as farmers often neglect to maintain their health because they are busy working on the land and have little income.

From the results of the Paired T-test statistical test, it was found that the average difference (mean) before and after education was 20.826. which increased from 16.00 to 36.83, the increase (Mean) shows that there is also an increase in hypertensive dietary behavior, which is caused by various factors, which is in line with the results of research by Anisa (2017) which explains that many factors affect a person's adherence to diet hypertension such as age, education, occupation and gender. And, with the Paired T-test statistical test, the results obtained  $\rho = 0.000$  from  $\rho \le 0.05$ , which means that there is a significant effect of dietary education on dietary compliance in hypertension sufferers in the working area of Kembang Mumpo Puskesmas in Seluma District 2020.

## CONCLUSION

From the results of research, can be concluded that there is an effect of dietary education on dietary compliance in hypertensive patients in the Kembang Mumpo Puskesmas inpatient in Seluma Regency in 2020.

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