

Family Support in Controlling Hypertension among the Elderly in Lhokseumawe City: A Descriptive Phenomenological Study

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ABSTRACT

Family is the main support system in caring for its members, including the elderly with hypertension. Treatment of the disease in old people is through help from a spouse, child, or close relatives because they often live with their families. Therefore, this study aims to determine the form of family support in controlling hypertension among the elderly, including physiological, psychological, socio-cultural, and spiritual supports. The qualitative method was used with a descriptive phenomenological approach. The respondents consist of eight family members who cared for the elderly with uncomplicated hypertension during the past year. The themes found include responding to hypertension with traditional ingredients, the existence of quality time with the elderly, being free to select the activities they like, and prioritizing themselves to worship a lot. Based on the results, efforts are needed from community nurses to provide health promotion education on the importance of family support in controlling hypertension among people.

Keywords: Elderly, Family Support, Hypertension Control

INTRODUCTION

Globally, there is a continuous increase in the proportion of the elderly population. In 2020, a total of 727 million people in the world were aged ≥ 60 , and this figure is expected to rise by 16% before 2050¹. Based on data from the Central Statistics Agency (BPS) in 2020, Indonesia is entering an aging population period, with an increase in life expectancy and the number of elderly people. Furthermore, the country had a total of 16 million aged people in 2020, which account for 5.95% of the total population, namely 270.2 million. This number is expected to increase to 48.2 million in 2035, namely 15.77% of the total population².

The population of the elderly increases along with the number of households occupied by them. The percentage of households with aged people in 2020 was 28.48%, of which 62.28% were headed by them. This has become a major concern, specifically the availability of economic and social support ideally provided by the family². Furthermore, families make a significant contribution to the lives of the old members because the continuation of their social life mostly occurs and is provided within the family scope³.

The health of the elderly is an important aspect of their quality of life and social life. They often experience changes in psychosocial, cultural, spiritual, and physical aspects,

which can affect their body, including the cardiovascular system⁴. Health problems caused by aging and degenerative process are very common in this system, such as hypertension⁵. Treatment of hypertension in the elderly is often through help from the family, including partner, child, or close relatives because they often live with their families⁶.

Bisnu (2017) reported that family has a major influence on the physical health of the members. Dysfunction can cause several health problems, specifically for relatives undergoing treatment therapy and this cannot be separated from support provided by other members⁷. Measurement of the effectiveness of family support for the health of the elderly was developed in Thailand using the Thai Family Support Scale for Elderly Parents (TFSS-EP). This instrument assesses the help rendered to the elderly living with their families and in orphanages. The specified domains were financial, emotional, instrumental, and friendship supports. The results showed that there are 3 dominant domain factors including instrumental (22%), financial (17.6%), and emotional (17.3%) supports. They were considered relevant for improving the health of the elderly living in Thai culture⁸.

Another important factor that can control hypertension is spiritual factors. Spiritual beliefs can affect the level of health and behavior of the elderly as well as their families, which serve as a source of support, strength, and healing. Furthermore, there is a significant relationship between spirituality level and blood pressure, the higher the spiritual level, the more the elderly can control their blood pressure⁹.

In controlling hypertension, families and aged people need a process of adapting to the approach, namely accepting changes in body functions, avoiding stress, and requiring treatment assistance¹⁰. The nursing theory proposed by Betty Neuman stated that adaptation is a process of a system that works in the client's scope. The client in this case is the family, which is a system related

to physiological, psychological, growth and development, socio-cultural, and spiritual variables¹¹. The purpose of the Neuman model system is to maintain the stability of a system. One of the roles and functions of the family in the model theory is providing care for sick members. They are expected to provide care in the form of support needed by the elderly in controlling hypertension as well as comfort during therapy¹².

METHOD

This study was carried out in the working area of the Mon Geudong Public Health Center, Lhokseumawe City. The data collection process began on January 3 to 30, 2022. Furthermore, this is a qualitative study with a phenomenological approach, which was carried out to determine the effect of the type of family support in controlling hypertension in the elderly. Family was considered a client system, which is related to physiological, psychological, growth and development, socio-cultural, and spiritual factors.

The participants used were family members who lived with the elderly aged 55-65 years with uncomplicated hypertension in the last 1 year and provided primary care. A purposive sampling method was used, where they were recruited and identified using data on old people's visits to the Mon Geudong Health Center in the chronic disease management program (Prolanis). Data saturation was achieved from the 8th participant.

Data was collected through in-depth interviews using a voice recorder and field notes. During the process, an interview guide was used, where questions have been prepared based on the concept. The data collected was analyzed with the Colaizzi method, which involves the use of participants to validate the results¹³.

RESULT

The themes found include responding to hypertension with traditional health services, the existence of family time with the elderly,

freedom to select the activities they like, and prioritizing themselves to worship.

Responding to hypertension with traditional health services

This theme was formed from the family sub-theme using traditional elements as the first treatment for hypertension. The responses are represented in the following statement:

- *“They are given fruit to eat... namely cucumber..” (Participant 2)*
- *“First I buy jipang pumpkin in which the fruit is small.... By boiling it, the effect will be apparent fast...” (Participant 8)*
- *“Honey water... and... ginger with sencang wood...” (Participant 6)*
- *“I give ginger water added with honey” (Participant 2)*

Another response that emerged was that the family restricted the elderly from consuming fatty, sweet, and salty foods. This was represented in the following statement:

- *“I limited him on sweet foods, even fatty foods with coconut milk is not consumed anymore.” (Participant 5)*
- *“I reduced the use of salt when cooking..” (Participant 8)*

Existence of family time with the elderly

This theme explains the existence of family time with the elderly. In this case, the support provided was in the form of family presence accompanying the elderly. This theme was formed from a sub-theme that the elderly have quality time with their other members. It was stated as follows:

- *“We take him for recreation to make him happy, hence, he does not feel alone and bored. Furthermore, the most important thing is to worship together.” (Participant 1)*

Some families realized that their presence around the elderly helps them realize the assistance that can be used either as a helper when sick or as a friend to talk to when they want to convey the complaints felt. This was observed from the participants' responses as follows:

- *“[...] he is expecting someone who is taking care of him, is close to him, and hears his complaints.....” (Participant 3)*
- *“If he needs some help, we are here...” (Participant 5)*

Another response that formed this theme was giving positive affirmations as an encouragement to the elderly. The respondents understood that at certain times, they experience a decrease in enthusiasm to go through the day. Therefore, the family provides support by providing affirmation words that are expected to make them happy and improve their overall health. The responses are presented in the following participant statements:

- *“Yes, we provide basic affirmation words to make them happy [...]” (Participant 1)*
- *“To make Dad happy in his old age, we make him happy.” (Participant 2)*

Elderly are free to select the activities they like

This theme explains family support through various routine activities. The respondent revealed that the elderly's participation in these activities can help them to stay active and avoid boredom at home. Therefore, the family agrees and supports the elderly to participate in every activity they love. This was represented by the statement as follows:

- *“[...] because mom has always been active, hence, even if there is no such activity, we are afraid that mom will get bored. Mom also likes to participate in such activities. She does not like it when she is at home all the time..” (Participant 4)*
- *“If mom wants to join, we provide her to make decisions...” (Participant 7)*
- *“[...] We just follow mom's word, no prohibition, and coercion. It is up to mom..” (Participant 6)*

Although the elderly have the desire to continue to be active and participate in every religious and community activity, their health condition remains the main priority for family members. When their condition supports

activities, they are allowed to participate. This was clarified from the results of participant interviews as follows:

- “[...] if he really can go, we go. if he is not in good health, and he does not want to go, then we do not go..” (Participant 3)

The elderly prioritize themselves to worship a lot

This theme explains that the elderly prioritize religious activities or activities that can improve their relationship with God Almighty. Furthermore, it was formed from the sub-theme, namely the priority of participating in religious activities, such as recitation events that are often carried out outside the home together with the local community. However, religious activities are also carried out by the elderly when they are at home, such as listening to lectures on television or videos on *youtube* channels that can be accessed with mobile phones. This was stated in the following response:

- “Sometimes, we play *da’wah*, and recitation at home ..” (Participant 1)
- “This religious knowledge can be a reminder... hence, he remembers the affairs of the hereafter more, and the worship is more powerful...” (Participant 7)

Some family members stated that in an attempt to get closer to God, the elderly want these activities to be accomplished solemnly and quietly. Therefore, they prefer to limit their participation in activities outside the home and engage in more worship at home. This was presented in the following statement as follows:

- “[...] Now, he is more concerned about worship” (Participant 1)
- “Not anymore (not taking part in the *wirid*/recitation) [...] he is often sick such this..[...]” (Participant 5)

DISCUSSION

Family support in controlling hypertension among the elderly produced a theme, which describes the dynamics of change in the

family. The use of traditional health services in Indonesian society is an alternative medicine involving the use of local ingredients, herbs, or plants that are believed to have efficacy in curing several diseases, including hypertension. However, the use of these alternatives must be supervised and the users need to be aware of its potential side effects¹⁴.

The results showed that traditional herbs are used as the first treatment to lower blood pressure, as well as prevent and overcome the symptoms experienced by the elderly due to increased levels. Some herbal plants, such as ginger are often used to reduce the symptoms of dizziness caused by increased blood pressure. The ginger is boiled, mixed with honey, and then consumed one or two times a day or until the symptoms disappear.

One of the responsive reactions by family members to control hypertension in the elderly is to change the diet by limiting the consumption of foods with high fat, sugar, and salt. Ismuningsih (2013) stated that some foods have a significant role in increasing blood pressure, such as excessive intake of sodium, carbohydrates, protein, and fat¹⁵.

Aristi et al., (2020) in Jember Regency reported that the frequent consumption of biscuits, salted fish, milk, coffee, tea, and food seasonings (MSG) was associated with the incidence of hypertension by 33.1%. The type of chips and fish often consumed have a high-sodium, which can lead to the occurrence of the disease¹⁶. This is in line with a study carried out in the coastal area, where the main occupation of the residents was fishing. One participant stated that consuming salted fish is very common among people in the community. Therefore, the family members in this study admitted that salty foods, such as salted fish are very limited and must be removed from the elderly’s diet.

Family is the closest relatives who are always around aged people, and their presence is beneficial when the elderly have difficulties and need friends to exchange stories. The

respondents revealed that the aged members love to enjoy their old age with the family, be close, and do many activities together. This is a form of psychological support, which makes them feel close to their family and not lonely. Loneliness is the most common psychological problem, such as feeling isolated, excluded, and separated from others due to the feeling of being different¹⁷. Efforts to avoid this feeling include taking them on vacation together, performing worship activities together, asking about their condition frequently, caring for them when they are sick, taking time to gather with family, playing with grandchildren, and listening to their advice or complaints.

Another psychological support provided by families is giving positive affirmations, which can serve as motivation. Positive statements can enhance better health behavior, motivate the elderly to remain enthusiastic about aging, be ready when facing health problems, and give a feeling of happiness¹⁸. Harris et al., (2017) stated that self-affirmation has a positive effect on cognitive behavioral change. Positive thinking can replace negative thoughts, which help people to make decisions, achieve realistic goals, and have control over their powerlessness by controlling situations that can still be accomplished¹⁹.

The results showed that the elderly can still carry out their daily activities independently, such as cleaning the house, cooking, shopping, or basic self-care. Aged people with high independence have a good quality of life²⁰. This can be influenced by social interactions experienced, such as relationship with the environment and surrounding community. This association is often established through participation in every activity in the community, including religious activities. The family understands this need, hence, they do not prohibit or limit the elderly from participating in any activity.

The spiritual changes experienced by the family are expressed in how they provide care to the aged members based on their beliefs and how the elderly perceive hypertension.

Furthermore, these changes can affect the health of all members, and they respond to this situation by believing that caring for the elderly is an obligation or the child's responsibility to parents. They take care of themselves with sincerity, expecting for rewards, and the children can feel how parents take care of the family. Acceptance of this condition cannot be separated from spiritual influence. A good spiritual level makes people more prepared to face problems by surrendering to God. Spirituality is also an inner motivation, which helps to give meaning to life, interpret life goals broadly, and serve as a source of strength²¹.

Based on the result, the best form of family support is to prioritize the elderly's religious activities, such as attending recitations, playing videos or broadcasts of lectures at home, and listening to *murottal*/ audio recitation of the Qur'an. This is expected to strengthen the motivation of all members to control hypertension, as well as provide peace and steadfastness in the family and for the elderly themselves when they are sick.

CONCLUSION

Family support in controlling hypertension among the elderly includes responding to hypertension with traditional health services, spending time with them, allowing the elderly to freely select the activities they like, and prioritizing worship activities.

Efforts are needed from community nurses to provide education on the importance of families in managing the disease. This can be carried out as an activity in the health promotion program at the Public Health Center, which is integrated with the Prolanis program. Furthermore, it is necessary to increase the skills of health workers in conducting training on the prevention and control of hypertension in old people through assistance during Prolanis. Provision, installation, and dissemination of health promotion media in the form of banners, posters, and booklets about managing the disease with family support can be provided at health centers and

distributed to public places. This is expected to increase the knowledge of the community, specifically families who care for the elderly with hypertension.

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Conflict of Interest: Nil

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