

The Influence Of The Role Of The Family On The Prevention Of Repeated Stroke In Medan Tuntungan Year 2020

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ABSTRACT

Cases of stroke in Indonesia continue to soar, in 2016 the results of research in several areas of Medan Tuntungan found 23,636 sufferers due to stroke and will continue to increase in 2020 as many as 500,000 Indonesians have had strokes and around 125,000 of them have died or been disabled for life. This type of research is cross sectional. The research was conducted in the Medan Tuntungan Region in 2020. The research was conducted in April - July 2020. The study population was all families of recurrent stroke patients in the Medan Tuntungan Region. The sample is a family of stroke sufferers, the research sample was taken by purposive sampling. The number of samples is 34 people. The data collection method taken is primary data. Data analysis was cross sectional, namely knowing the role of the family in efforts to prevent recurrent stroke, data processing was done by editing to check or ensure that the questionnaire sheet had been filled in properly. Then proceed with coding, namely by giving certain codes or numbers on the questionnaire sheet to facilitate data analysis. The results showed that the influence of the role of the respondent's family in preventing recurrent stroke was 5 people (14.7%) who did not give enough role, 21 people (61.8%) who gave enough family role, 8 people (23.5%) who gave a good family role.

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1. INTRODUCTION

Stroke is a disease caused by a disturbance in the blood vessels of the brain. The disorder is in the form of blockages and tears in the blood vessels of the brain (Hoesodo, 2015). According to the World Health Organization, stroke is the third leading cause of death after heart disease and cancer. In America stroke is one of the causes of death and every year stroke causes the death of more than 160,000 people and every year there are 750,000 new stroke cases and every 45 minutes there is one person in America who has a stroke. In an international stroke conference in Vienna, Austria recently revealed that stroke cases are increasingly widespread in the Asian region due to changes in people's lifestyles.

Cases of stroke in Indonesia continue to soar, in 2016 the results of research at several hospitals found that 23,636 people were hospitalized due to stroke and continued to increase in 2018 as many as 500,000 Indonesians had strokes and around 125,000 of them died or were disabled for life. According to Samino, a neurologist at RSCM said that stroke is the number 1 death in neurological cases.

There are several ways to prevent this disease, namely by avoiding the causative factors. According to the main plan of the NSW Stroke Recovery Association, several methods can be used to prevent stroke. Among others Proper diet and exercise (eat and exercise right), Reduce high blood pressure (reduce high blood pressure), Eliminate stress (get rid of stress), View diabetes and hit blood pressure hit risks (view diabetes and high blood pressure as a high risk), end smoking habit (end smoking), tell your doctor about the warning signs of stroke, Take your medicine as recipe (eat medicines given by prescription) (Lila Henderson, 2017).

According to Syamsudin Herman, Head of DKI Jakarta Indonesia Stroke Foundation (Yastroki), usually Stroke Individuals (IPS) feel that their disabled body condition causes them to be helpless and feel they need help from other family members. If they are not given encouragement, they will forever

depend on other family members and are not independent.

The family is the closest person to someone who has health problems when they are sick and the family is an indicator in society, whether the community is healthy or sick (Efendi, 2016). Given the importance of the role of the family in accordance with the functions and duties of the family in the health sector, it is necessary to understand and carry out the family, namely recognizing family health problems, deciding on appropriate health measures for the family, caring for members who experience health problems, modifying the family environment to ensure family health and utilizing health facilities. which exists.

The role of the family is needed by stroke sufferers, but stroke sufferers need to be careful because if they have had a stroke before, the patient has a higher risk of suffering from recurrent strokes, especially in the first years after the first stroke (Ahmad & Airiza, 2018) .

The occurrence of recurrent stroke requires a very important role from family members to assist in caring for and assisting all the needs of stroke sufferers, especially in carrying out daily activities. Families are involved because they have an important role in recovery because they need educational programs for families of stroke sufferers. This program is part of a patient discharge plan that is followed by a family member. Treatment at home must be carried out like in a hospital so that independent patients and their families need to be educated in an interesting way because sufferers depend on their families. And to prevent recurrent cases of stroke, families must pay attention to sufferers to lead a healthy lifestyle and regular medication.

Based on an initial survey conducted by researchers in the Medan Tuntungan Region, the problem of stroke is one of the problems that must be addressed. In 2020 people from January to December totaled 730 people or 87.6% and in 2020 stroke sufferers numbered 810 people or 97.2%.

The results of interviews conducted by researchers in the Medan Tuntungan Medan Region through interviews with 10 stroke sufferers were recorded that 7 patients said the stroke they were experiencing now was not the first stroke but repeated strokes because they could not control their lifestyle such as smoking, eating foods that contain lots of cholesterol , and did not do sports because there were no family members who helped them to do sports every day while 3 stroke survivors said that the stroke they had was the first time. From the description above, researchers are interested in conducting research on the influence of family roles on efforts to prevent recurrent stroke in the Medan Tuntungan Region in 2020.

2. METHOD

This type of research is cross-sectional to determine the role of the family in preventing recurrent stroke using primary data. The research was conducted from April to July 2020. The population in this study were all families of recurrent stroke patients in Medan Tuntungan District. The sample is a family of stroke sufferers, the research sample was taken using the Nonprobability Sampling technique, namely by purposive sampling with the category of nuclear families of stroke patients who recovered from disabilities. The number of samples is 34 people.

3. RESULTS AND DISCUSSION

Table 1 Frequency and Percentage Respondents Based on Demographic Data

| No | Characteristics | Frequency | % |
|----|------------------|-----------|------------|
| 1 | Age | | |
| | > 35 | 9 | 26,5 |
| | 35 – 45 | 18 | 52,9 |
| | > 45 | 7 | 20,6 |
| | TOTAL | 34 | 100 |
| 2 | Gender | | |
| | Man | 15 | 44,1 |
| | Woman | 19 | 55,9 |
| | TOTAL | 34 | 100 |
| 3 | Education | | |

| | | | |
|---|-------------------|----|------|
| | SENIOR | 9 | 26,5 |
| | HIGH SCHOOL | 18 | 52,9 |
| | DIII | 7 | 20,6 |
| | S1 | | |
| | TOTAL | 34 | 100 |
| 4 | Profession | | |
| | civil servant | 11 | 32,4 |
| | Private | 15 | 44,1 |
| | employees | 8 | 23,5 |
| | Self-employed | | |
| | TOTAL | 34 | 100 |
| 5 | Religion | | |
| | Christian | 14 | 41,2 |
| | Islam | 16 | 47,1 |
| | Hindu | 4 | 11,8 |
| | TOTAL | 34 | 100 |

The majority of respondents aged 35-45 years as many as 18 people (52.9%). Based on gender, the majority of respondents were female, 19 people (55.9%). Based on the table it can be seen that the majority of DIII education is 18 people (52.9%) while the work can be seen that the majority of private employees are 15 people (44.1%) and based on religion the majority of respondents are Muslim as many as 16 people (47.1%).

Table 2. InfluenceThe Role of the Family in the Prevention of Recurrent Stroke

| NO | ROLE OF EX | S | | KK | | TP | |
|----|--|----|------|----|------|----|------|
| | | F | % | F | % | F | % |
| 1 | Families recognize the signs and symptoms of a stroke such as limb weakness | 17 | 50 | 15 | 44,1 | 2 | 5,9 |
| 2 | The family provides time to tell stories about the sufferer after carrying out the control | 11 | 32,4 | 20 | 58,8 | 3 | 8,8 |
| 3 | Families use health facilities to control the patient's condition | 12 | 35,3 | 17 | 50 | 5 | 14,7 |
| 4 | The family provides tools at home such as canes for sufferers to use | 14 | 41,2 | 13 | 38,2 | 7 | 20,6 |
| 5 | The family regulates the patient's diet | 9 | 26,5 | 17 | 50 | 8 | 23,5 |
| 6 | The family pays attention to the patient's activity and rest | 14 | 41,2 | 15 | 44,1 | 5 | 14,7 |
| 7 | The family gives motivation to the patient to keep the spirit | 12 | 35,3 | 10 | 29,4 | 12 | 35,3 |
| 8 | The family assures the sufferer that the disease can be cured | 10 | 29,4 | 12 | 35,3 | 12 | 35,3 |
| 9 | The family advises the patient not to smoke | 13 | 38,2 | 11 | 32,4 | 10 | 29,4 |
| 10 | The family helps sufferers to solve the problems being faced by sufferers | 14 | 41,2 | 9 | 26,5 | 11 | 32,4 |
| 11 | Families provide entertainment to sufferers such as inviting sufferers to recreation | 7 | 20,6 | 19 | 55,9 | 8 | 23,5 |
| 12 | Families work together when dealing with sufferers' problems | 10 | 29,4 | 15 | 44,1 | 9 | 26,5 |
| 13 | The family advises the sufferer not to drink alcoholic beverages | 9 | 26,5 | 14 | 41,2 | 11 | 32,4 |

| | | | | | | | |
|----|--|----|------|----|------|----|------|
| 14 | Families develop plans to improve family health | 10 | 29,4 | 18 | 52,9 | 6 | 17,6 |
| 15 | The family provides funds for the patient's medical expenses | 10 | 29,4 | 12 | 35,3 | 12 | 35,3 |
| 16 | The family encourages the patient to take medication regularly | 9 | 26,5 | 21 | 61,8 | 4 | 11,8 |
| 17 | The family becomes a place to vent when sufferers ask questions | 10 | 29,4 | 17 | 50 | 7 | 20,6 |
| 18 | The family pays attention to the development of the patient's health | 6 | 17,6 | 18 | 52,9 | 10 | 29,4 |
| 19 | The family takes care of and keeps clean | 13 | 38,2 | 16 | 47,1 | 5 | 14,7 |

Table 3. Distribution of Frequency and Percentage Influence of Respondent's Family Role in Prevention of repeat Stroke

| No | Family Role | N | % |
|--------------|-------------|-----------|------------|
| 1 | Not good | 5 | 14,7 |
| 2 | Pretty good | 21 | 61,8 |
| 3 | Well | 8 | 23,5 |
| TOTAL | | 34 | 100 |

The majority of the influence of the role of the family on efforts to prevent recurrent stroke was quite good as many as 21 people (61.8%), and those that were not good were as many as 5 people (14.7%), while those who played a good role in preventing recurrent stroke were 8 people (23, 5%).

The influence of the role of the family in preventing recurrent stroke in Medan Tuntungan

The results showed that the influence of the role of the respondent's family in preventing recurrent stroke was 5 people (14.7%) who gave less role and 21 people (61.8%) who gave sufficient family role and 8 people (23.5%) who gave good family role. Prevention of recurrence of stroke should be a family priority as well as getting used to not giving food that is high in salt is something that can support preventing recurrence of stroke by reducing high blood pressure. This is also closely related to the seriousness of the family in caring for sick family members. This finding is in accordance with the opinion expressed (Misbach, 2014), that the family has a major role in efforts to prevent recurrent stroke. In addition (Ambarwati, 2017) argues that the role of the family greatly influences patients not to carry out lifestyle habits that can support stroke recurrence. With family support to avoid various taboos such as not smoking, dieting and creating a comfortable environment for clients. The role of the family is important to avoid re-increasing trigger factors for stroke recurrence and the family is expected to be able to provide invaluable motivation for the client's recovery.

The results showed that families made efforts to reduce the causes of stroke by reducing food servings to patients in the form of food made from goat, beef, pork and others, or reducing fatty foodstuffs. This habit is likely to be carried out because it is supported by a history of suffering from a stroke for a long time (2 years) so that the family is able to control the food consumed.

This is in line with findings (Gustiana, 2019), that on average families whose family members have had a stroke have been able to make reductions in high fats such as meat and some even did not allow family members who had had a stroke to eat these foods. According to (Madiono, 2017), that there are still many families who do not control the fatty foods consumed by post-stroke clients, this can lead to recurrent strokes.

The results of the study show that the family manages the patient's food with balanced nutrition, the patient is encouraged to exercise regularly such as walking and the family accompanies the patient during exercise. Influence The role of the family is important in managing balanced nutrition and caring for stroke-stricken families themselves so that a recurrence does not occur. The role of the family is a description of a set of interpersonal behavior, the nature of activities related to individuals in certain positions and situations. Families are interrelated and influence each other among family members and

will also influence the patterns of the surrounding families. This is in accordance with the findings (Friedman, 2017) that the role of the family in preventing stroke recurrence is to regulate a balanced diet and regular exercise, This is the key that must be supported by the family so that the client does not experience another stroke. From the results of the study indicate that the role of the family has been going well to prevent recurrence of stroke patients.

According to (Suprajitno, 2015), revealed that one of the components to prevent recurrent strokes is to regulate a balanced diet and regular exercise, this is an important aspect in preventing recurrent strokes to prevent an increase in high blood pressure and reduce levels of fat in the body. , in addition to the use of drugs. Stroke patients are also required to maintain healthy cholesterol levels and blood pressure. This is supported by the Stroke Prevention by Aggressive Reduction in Cholesterol Level (SPARCL) study conducted by drugmaker Pfizer. The study succeeded in proving that the cholesterol-lowering drug Atorvastatin 80 mg significantly reduced the risk of recurrent stroke.

The results showed that families provide moral support to patients by motivating them to recover, families accompany patients to check their health to health services and families provide motivation to patients to take medicines regularly. Providing motivation and moral support by the family can be a new spirit for patients to recover and this support is an illustration of family members' concern for the patient's recovery. This is in accordance with the findings (Setyawan, 2018) that moral support and motivation from family are invaluable for stroke patients to increase self-esteem and a sense that there are people who care about their health, so that patients have the motivation to carry out various treatments and post-stroke rehabilitation therapies.

4. CONCLUSION

The research was conducted in April - July 2020 with a total of 34 respondents in the role of the family in efforts to prevent recurrence in stroke patients in Medan Tuntungan. Shows that the level of family's role in preventing recurrence of stroke patients has a good family responsibility, but there are still some families who show less responsibility for preventing recurrence of stroke in family members whose family members have suffered a stroke. The role of the family that is expected to prevent recurrence of recurrent stroke is to avoid smoking family members who are sick, experiencing mental stress, drinking alcohol, experiencing obesity, consuming excessive salt, taking amphetamine, cocaine and the like, reducing cholesterol and fat in food. ,

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