

## The Influence of Family Support on Stroke Patient Compliance in Treatment at Blud RSU Ciamis

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### ABSTRACT

Family support is an important role for the recovery of stroke patients with family support from all sides, stroke patients will be motivated for their recovery. Family support is a form of affection given to loved ones so that everyone feels cared for and loved. This form of support can be in the form of words, behavior or material. Objective: to find out how the influence of family support on stroke patients in undergoing treatment at BLUD RSU Ciamis. Methods: The method used in this study is a quantitative method using descriptive design and cross-sectional research design. The sample in this study amounted to 32 respondents in stroke patients at BLUD RSU Ciamis. Results: The results of statistical tests with the chi square test obtained a value of  $p = 0.000 < \alpha = 0.05$  (5%) can explain that there is an influence of family support on the compliance of stroke patients in undergoing treatment at BLUD RSU Ciamis. Conclusion: family support for stroke patient compliance has an influence on undergoing treatment at BLUD RSU Ciamis.

### INTRODUCTION

Frequency of stroke worldwide According to WHO, Every year 15 million people worldwide suffer a stroke. About five million suffer permanent paralysis. In Southeast Asia, the prevalence of stroke is 4.4 million people. In 2020, it is estimated that 7.6 million people will die from this stroke (Kemenkes RI, 2018).

According to the 2018 Basic Health Survey (Riskesdas) Report, there are 0.6/1000 stroke patients aged 15-24 years. In Indonesia, where stroke is the second leading cause of death, data collected by Riskesdas (2018) showed that stroke increased by 7 percent to 10.9 per thousand of the Indonesian population. The province with the highest number of stroke patients

is East Kalimantan with 14.7 cases per thousand population, followed by Yogyakarta Special Region and North Sulawesi, while West Java Province ranks 12th in stroke patients. People over 75 years old had the highest number of stroke victims, at 50.2 cases per 1,000 people. These figures show an increase from the 2013 to 2018 report (MOH RI, 2018).

The prevalence of stroke in Ciamis Regency was 9.4% based on data diagnosed by health workers and 11.8% of symptoms diagnosed by affected health workers. It is known, the number of stroke patients in BLUD RSU Ciamis every month continues to increase. In the past year there were 355 stroke patients in the rose room, 177 stroke patients with ischemic and hemorrhagic stroke.

Stroke, also known as cerebral vascular disease (GPDO), is a syndrome caused by blood disorders in the brain, causing functional brain dysfunction in the form of nerve disorders or paralysis (Dinata et al, 2017). One of the main causes of stroke is vascular problems, stenosis, rupture, occlusion, aneurysms and arteriovenous deformities. Ischemic and hemorrhagic stroke are different. Ischemic stroke occurs when the blood vessels supplying blood to the brain are blocked. While hemorrhagic stroke occurs when a weakened blood vessel ruptures (Adi et al, 2022).

Family support is a form of affection given to loved ones so that everyone feels cared for, loved and loved. This form of support can be in the form of words, behavior or material (Ginting, 2019).

Obedience comes from the root word obey, which means obedient, willing to obey orders. Adherence is the extent to which patients carry out treatments and

behaviors recommended by doctors or others. Comfort is a change from inappropriate behavior to obedient behavior (Faradilla, 2020).

This is in accordance with pieces of QS. Yunus (10), the verse snippet explains According to M. Quraish Shihab in 2017, this verse emphasizes that the Qur'an is a tool for what is in a person's heart. The mention of the word Dada is interpreted with the heart and shows divine revelation acting as a cure for mental illnesses such as doubt, envy, pride and the like (Al-Quran, 2021).

There are still some families who are lacking in supporting stroke patients, so that these patients are not compliant in undergoing treatment and resulting in the recovery process being longer than the normal period of time. Based on the above background, the authors are interested in conducting research on this topic "The Effect of Family Support on Stroke Patient Compliance in Undergoing Treatment at BLUD RSU Ciamis."

## **METHOD**

Quantitative descriptive method using cross-sectional analytic design. Respondents totaled 32 people. Data collection tools carried out in this study observation sheets include the results of questionnaires that have been filled in by the patient's family. The preparation of a scale that has been prepared by researchers is a Likert scale consisting of several questions that support (favorable) and do not support (unfavorable). Conducted in March-April 2023, at BLUD RSU Ciamis.

## **RESULTS AND DISCUSSION**

Experience in dealing with family support

1. Family support
  - a. Emotional support

In this support, good results were obtained, namely 25 out of 32 respondents showed that the family gave the client confidence while undergoing treatment. The family also provides love and care for clients while undergoing treatment.

b. Informational support

In this support, good results were obtained, namely 27 out of 32 respondents showed that the family told the client that the treatment the client was currently receiving was important. The family also showed the client the right place to treat the stroke.

c. Ranking support

In this support, the results are not good because the family sometimes still cannot hear the client's complaints during treatment, but the family is not indifferent in making decisions when the client is undergoing treatment. The family is enough to encourage the client when in treatment.

d. Instrumental support

In this support, the family accompanies the client during treatment. The family helps take care of the daily needs of the Customer likes groceries and clothes. The family facilitates the client's transportation to the hospital if he is restrained. The family spends time educating the client about caregiving.

In this study there were differences in the results of family support and patient compliance. There were respondents with good results in family support, but poor compliance. Vice versa, there are respondents with poor family support results, but good patient compliance.

**TABLE 1. Family support for stroke patients in undergoing treatment**

No	Family Support	Frequency (f)	Percentage (%)
1	Good	15	46,9
2	Enough	13	40,6
3	Lack	4	12,5
	Total	32	100,0

Based on the table above, the family was found to support stroke patients during treatment, the highest frequency results were in the category of good family support as many as 15 respondents (46.9%) The category of "less family support" was found to be the least as many as 4 respondents (12.5%).

2. Compliance

Based on the results of the study, it was found that the compliance of stroke patients in undergoing treatment obtained the highest frequency results, namely the high compliance category as many as 16 respondents (50.0%) and the lowest prevalence was the low compliance category, namely. H. 3 respondents (9.4%). Compliance in this study may be due to patients and families carefully following the doctor's instructions during treatment to prevent recurrent stroke.

**TABLE 2. compliance in stroke patients in undergoing treatment**

No	compliance	Frequency (f)	Percentage (%)
1	High	16	50,0
2	Fair	13	40,6
3	Low	3	9,4
	Total	32	100,0

Based on the table above, it is found that the compliance of stroke patients in undergoing treatment obtained the results The highest frequency was achieved, namely. H. high compliance category, d. H. 16 respondents (50.0%), and the lowest category of low compliance, namely H. 3 respondents (9.4%).

3. The effect of family support on stroke patient compliance in undergoing treatment

The effect of good family support is also reflected in the number of patients requesting treatment and always following the direction of the medical team in the treatment program. The impact of this study

could be that the average patient is always accompanied by his family every time he is hospitalized. Also theoretically there is an influence, explaining that the factor that affects self-adjustment is family support.

The results of statistical tests with the chi-square test obtained a value of  $\delta = 0.000 < \alpha = 0.05$  (5%) Family support turned out to have an effect on compliance in stroke patients at BLUD RSU Ciamis.

Good adherence to therapy is always the benefit of regular family participation in all stages of patient treatment, be it taking medication, taking medication, reminding when the patient forgets to take medication, transportation to the hospital and always having family around when the patient is in need.

Family support is very important for patients because recovery in stroke patients takes a long time. Therefore, it requires deep understanding and patience from all parties, especially from the family. Families expect to be able to talk and interact with stroke patients at all times, as their psychological motivation is very strong (Wiratri, 2018 & Mulia, 2018).

**TABLE 3. The Effect of Family Support on Compliance of Stroke Patients in Undergoing Treatment at BLUD RSU Ciamis**

No	Family Support	Stroke Patient Adherence to Treatment						Total	
		High		Moderate		Low		F	%
		f	%	f	%	f	%		
1	Good	13	86,6	1	6,7	1	6,7	15	46,9
2	Enough	1	7,7	11	84,6	1	7,7	13	40,6
3	Lack	2	50,0	1	25,0	1	25,0	4	12,5
	Total	16	50,0	13	40,6	3	9,4	32	100

From the table above, it is known that 15 respondents with family support for stroke patients in undergoing treatment as many as 13 people (86.6%) stroke patients have high compliance in undergoing treatment and 4 respondents with family

support for stroke patients in undergoing treatment as many as 1 person (25.0%) stroke patients have low compliance in undergoing treatment.

The results of statistical tests using the chi-square test obtained a value of  $\delta = 0.000 < \alpha = 0.05$  (5%), it can be said that family support affects the compliance of stroke patient therapy at BLUD RSU Ciamis.

### Respondent Characteristics

#### 1. Family support

##### a. Age of respondents

Ciamis found that the age of respondents varied between 42 and 83 years, with an average age of 59.56 years. Based on information regarding the age distribution of respondents, most of the respondents were in the age group 50-65 years. This research is in line with the research of Rosiana (2018) and Nastit (2018), where the age of most respondents is between 51 and 65 years. Whereas in Nurmalasar's research (2018), most respondents were aged > 65 years. Age can affect a person's risk of stroke. The older a person is, the greater the risk of stroke, so stroke is a degenerative disease. However, along with technological advances, many young people who are still productive begin to experience strokes (Mulyatsih and Ahmad, 2020).

##### b. Gender

Based on the results of research conducted at BLUD RSU Ciamis, it is known that the majority of respondents were male, namely 17 people (53.1%). This research is in line with research by Wardhan and Santi (2015) and Laily (2017) that most strokes occur in men. This is supported by Ghani's research (2016) which found that men have a higher risk of stroke than women. The high risk of stroke in men is mainly influenced by men's lifestyles, such as smoking, lack of exercise, and alcohol consumption (Ghani, 2016).

##### c. Occupation

Based on the results of research conducted at BLUD RSU Ciamis, it was found that the respondents' work situation, namely. H. the majority did not work, as many as 23 people. This is in accordance with Laily's research (2017) that the incidence of stroke, especially ischemic stroke, is highest in people who do not work. In addition, people who do not work are four times more likely to have a stroke, because being unemployed can cause them stress (Laily, 2017).

Good family support in this study, because most stroke patients are elderly men get full support from the family, especially the wife to recover from stroke. In addition, family support is offered to encourage patients to participate in the treatment program due to the length and duration of treatment.

## 2. Compliance

Based on the results of the study, it was found that the compliance of stroke patients in undergoing treatment obtained the highest frequency results, namely the high compliance category as many as 16 respondents (50.0%) and the lowest category was the low compliance category, namely. H.3 respondents (9.4%).

Compliance in this study may be due to the high level of awareness of patients and families following medical advice when treating patients with recurrent stroke. Also because the patients examined were mostly older men who would be more compliant with the treatment process carried out.

## 3. Stroke

Stroke or also called cerebrovascular disorder (GPDO) is a syndrome caused by blood disorders in the brain that cause brain dysfunction in the form of nerve disorders or paralysis (Dinata et al, 2017.) In addition, it can also cause blood vessels in the brain to burst as blood rushes to the brain. Thus, parts of the brain will be damaged. This can cause various symptoms such as paralysis or weakness, seizures of half the body, speech disorders,

asymmetrical face, dysphagia, and balance disorders (Indahningrum et al, 2020).

These cerebrovascular disorders cause various clinical manifestations such as difficulty speaking, difficulty walking, difficulty coordinating body parts, headache, facial muscle weakness, visual disturbances, balance problems, confusion, sensory disturbances, thinking disorders, and loss of motor control. Generalized movement can manifest as movement disorders such as hemiplegia (hemiplegia on one side of the body) and, in the worst cases, permanent paralysis (Wicaksana, 2016).

## CONCLUSIONS AND RECOMMENDATIONS

Based on the results of research on the influence of family support on the care of stroke patients in BLUD RSU Ciamis, the following conclusions were drawn:

1. Family support in stroke patients during treatment, the highest frequency is the category of good family support as many as 15 respondents (46.9%).
2. Compliance of stroke patients in undergoing treatment, the highest frequency is the high compliance category, as many as 16 people (50.0%).
3. There is an effect of family support on the compliance of stroke patients in undergoing treatment at BLUD RSU Ciamis with statistical test results  $p$  value  $< \alpha$  ( $p = 0.000 < 0.05$ ).

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