



RESEARCH ARTICLESArticle URL: <https://ojs.poltekkes-malang.ac.id/index.php/HAJ/index>**Life Quality of the Elderly with Hypertension**

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ABSTRACT

Hypertension is one of the main problems among the elderly because it is one of the causes of serious complications that can be fatal, one of which is a decrease in quality of life. This research aims to determine the level of quality of life among hypertensive elderly individuals based on physical, psychological, social, and environmental aspects. The method employed is a descriptive, quantitative approach with a cross-sectional design. The sample in this study was 28 people suffering from hypertension at the Tresna Werdha Blitar Social Services UPT in Tulungagung, taken using a total sampling technique. The instrument used was the WHOQOL-BREF questionnaire. This questionnaire contains self-reports that assess 4 domains of quality of life (QOL): physical health, psychological health, social relationships, and the environment. The research results showed that 64.3% of respondents had a good quality of life. The quality of life of respondents in the physical aspect was 64.3% good, in the psychological aspect it was 57.1% good, in the social relations aspect it was 53.6% good, and in the environmental aspect it was 53.6% fair. From the 4 domains above, it shows that the physical health of most elderly people still has a good quality of life.

Keywords: Hypertension; quality of life; World Health Organization Quality of Life – BREF (WHOQOL-BREF)

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INTRODUCTION

Hypertension or high blood pressure is a very common health problem throughout the world. (World Health Organization, 2019) Noted that Indonesia is the 5th country as the largest contributor to hypertension in the world(1). WHO also estimates that there will be an increase in the number of hypertension sufferers throughout the world by 2025, with a figure reaching 1.15 billion. Among the elderly, hypertension is one of the main problems because it is often identified as the main cause of serious complications that can be fatal. Seniors suffering from hypertension should adhere to treatment instructions consistently to reduce symptoms and avoid dangerous fluctuations or changes in blood pressure(2). The level of patient compliance and several other factors, both internal and external to the patient, may be the cause of the increasing number of hypertension sufferers, one of the complications

of which is a decrease in quality of life.

According to (Resmiya & Misbach, 2019), quality of life is the level of well-being felt by an individual or group of people(3). Research on quality of life has increasingly developed in the last three decades, even WHO itself has also conducted research on quality of life by introducing an international collaborative project which developed a quality of life measuring tool in the form of a questionnaire or what is called WHOQOL (World Health Organization Quality of Life) BREF and is divided into in four aspects, namely physical health, psychological aspects, social relationships and the surrounding environment(4). This questionnaire is used to determine a person's level of quality of life through the final results of the questionnaire score.

Hypertension is a disease that affects the health and quality of life of the elderly. According to (Alifariki, 2021), low quality of life is one form of complication of hypertension(5). Improving the quality of life will reduce morbidity and mortality rates. Ratnawati (2023) said that hypertension in the elderly also has an impact on the quality of life in terms of physical, psychological health, social relationships and the surrounding environment(6).

The government's efforts to control hypertension are by increasing education related to compliance with taking medication and implementing CERDIK behavior by carrying out regular health checks, eliminating cigarette smoke and air pollution, regular physical activity, healthy diet, adequate rest, and controlling stress. Several factors such as a lifestyle that is difficult to change, lack of adherence to taking medication, social and family support, lack of attention to health education, not being serious enough when participating in physical training activities, and various other factors both internal and external to elderly people with hypertension cause programs that have been launched by the government are less than optimal and can affect the quality of life of elderly people with hypertension.

In the results of a research report (Aisyah, 2023), which were not published, there were 33 elderly people suffering from hypertension at the Tresna Werdha Blitar Social Services UPT in Tulungagung(7). The elderly who live at the Tresna Werdha Blitar Social Services UPT in Tulungagung also have different backgrounds, such as coming from the underprivileged category, living alone, or even being neglected, which also needs to be taken into account because it will affect the quality of life of elderly people with hypertension.

This research aims to determine the quality of life of hypertensive elderly at the Tresna Werdha Blitar Social Services UPT in Tulungagung based on the domains of physical, psychological health, social relationships and the surrounding environment.

METHODS

The respondents in this study were elderly people with hypertension at the Tresna Werdha Blitar Social Services UPT in Tulungagung, totaling 28 respondents using a total sampling technique. The time of the research was carried out in January - June 2024, while data collection was carried out in

January - February 2024. The place of this research was at the Tresna Werdha Blitar Social Services UPT in Tulungagung. Data analysis in this study used univariate data analysis. This study used the WHOQOL-Bref questionnaire with a total of 26 questions which were measured using an ordinal scale with score 1 = very bad/very unsatisfactory/not at all/never, score 2 = bad/unsatisfactory/rarely/a little, score 3 = mediocre/moderate/medium/ quite often, a score of 4 = good/satisfactory/very often/most of the time, and a score of 5 = very good/very satisfactory/to an excessive extent/completely experienced/always. After obtaining the results of the questionnaire, the results are converted into a (transformed score) scale of 0 – 100 so that they can be grouped into 0 – 20 = very bad, 21 – 40 = bad, 41 – 60 = moderate, 61 – 80 = good, 81 – 100 = Very good.

RESULT

General data

Table 1. General Data of Research Respondents on the Quality of Life of Hypertensive Elderly
at the Tresna Werdha Blitar Social Services UPT in Tulungagung
January – February 2024 (n=28)

Demographic Characteristics of Respondents	Frequency	Percentage
Age		
60 – 74 years old	20	71.4%
75 – 90 years	8	28.6%
Gender		
Man	9	32.1%
Woman	19	67.9%
Last education		
No school	4	14.3%
Elementary school	15	53.6%
Junior high school	5	17.9%
Senior high school	3	10.7%
College	1	3.6%
Hypertension Grade		
Grade I	21	75%
Grade II	6	21.4%
Grade III	1	3.6%
Take medicine		
YES	26	92.9%
NO	2	7.1%
Low Salt Diet		
NO	28	100%

Based on table 1, it is known that the majority of respondents 71.4% (20 respondents) were aged 60 - 74 years, more than half 67.9% (19 respondents) were female, more than half of the respondents 53.6% (15 respondents) had elementary school education, most of the respondents, 75% (21 respondents) suffered from grade 1 hypertension, 92.9% (26 respondents) took antihypertensive medication, and overall 100% of respondents (28 respondents) did not follow a low-salt diet.

Custom Data

Table 2. Quality of Life Score for Hypertensive Elderly at the Tresna Werdha Blitar Social Services UPT in Tulungagung January – February 2024 (n=28)

Score Range	Criteria	N	%
41 – 60	Currently	10	35.7%
61 – 80	Good	18	64.3%

Based on Table 2, it is known that less than half (35.7%) of the 10 respondents have a moderate quality of life and more than half (64.3%) of the 18 respondents have a good quality of life.

Table 3. Quality of Life Domain Scores for Hypertensive Elderly at the Tresna Werdha Blitar Social Services UPT in Tulungagung January – February 2024 (n=28)

Quality of Life Domain	Score Range	Criteria	N	%
Physical Health	21 – 40	Bad	2	7.1%
	41 – 60	Currently	8	28.6%
	61 – 80	Good	18	64.3%
Psychological	41 – 60	Currently	10	35.7%
	61 – 80	Good	16	57.1%
	81 – 00	Very good	2	7.1%
Social Relations	21 – 40	Bad	1	3.6%
	41 – 60	Currently	12	42.9%
	61 – 80	Good	15	53.6%
Environment	21 – 40	Bad	1	3.6%
	41 – 60	Currently	15	53.6%
	61 – 80	Good	12	42.9%

Based on table 3, the results of the quality of life of hypertensive elderly based on the physical health domain are mostly 64.3% (18 respondents) have a good quality of life, 28.6% (8 respondents) have a moderate quality of life, and 7.1% (2 respondents) have a poor quality of life. Meanwhile, according to the psychological domain, 57.1% (16 respondents) had a good quality of life, 35.7% (10 respondents) had a moderate quality of life, and 7.1% (2 respondents) had a very good quality of life. However, based on the social relations domain, 3.6% (1 respondent) had a poor quality of life, 42.9% (12 respondents) had a moderate quality of life, and 53.6% (15 respondents) had a good quality of life. Apart from that, based on the environmental domain, there were 3.6% (1 respondent) with poor quality of life, 53.6% (15 respondents) with moderate quality of life, and 42.9% (12 respondents) with good quality of life.

DISCUSSION

Quality of Life for Hypertensive Elderly

The results of the study stated that elderly people with hypertension at the Tresna Werdha Blitar Social Services UPT in Tulungagung had a good quality of life. This is in line with research by Nurlatifa et al., (2023) where there were 18 respondents (36.6%) with good quality of life, 17 respondents (34.0%) with moderate quality of life, and 15 respondents (30.0%) with poor quality of life. The assessment of

the respondent's quality of life can be influenced by various factors, including health, psychological conditions, social and family interactions, as well as spiritual and environmental conditions, which are found in holistic nursing.(8).

Most of the elderly at UPT PSTW Blitar in Tulungagung can live independently, for example the elderly can still walk to the kitchen to get food, wash their clothes and clean the guest house area. The data in Table 1 shows that the majority of respondents take anti-hypertension medication, which can affect the quality of life of hypertensive elderly people. However, the researchers saw that the level of independence of the respondents was still good and the level of dependence for daily life was still small, so it did not have much effect on the quality of life of the elderly.

Efforts that create a healthy environment, support strong social relationships, and promote acceptance of health conditions can be very beneficial in maintaining and improving the quality of life for older adults.

Quality of Life for Hypertensive Elderly Based on Physical Health Domain

The results of research based on the physical health domain of the elderly at UPT Social Services Tresna Werdha Blitar in Tulungagung show a good quality of life. This is similar to the research results of Andila et al. (2023) namely, 46 people (75.4%) had a good quality of life in the physical domain(9). Research conducted by Nurlatifa et al., (2023) The results shows that there is a fairly strong relationship between physical activity and the quality of life of the elderly. This is because the level of physical activity of elderly people varies greatly along with the physiological conditions they are experiencing. Elderly people who have a high level of activity indicate that there are no health problems that could hinder their activities(8).

According to researchers, the physical health of the elderly is greatly influenced by the level of physical activity they do. Therefore, it is important to encourage the elderly to remain physically active and provide the necessary support to manage the elderly's health conditions. Physical activity takes the form of regular exercise three times a week, walking around the guesthouse, or doing light activities inside and outside the guesthouse. Routine health checks carried out once a week can improve the health status of the elderly. If an elderly person has a complaint, they will immediately be given a solution in the form of medication or therapy which can be done independently by the elderly person themselves.

Efforts that focus on increasing physical activity and managing chronic disease can help improve the overall physical quality of life of older adults.

Quality of Life of Hypertensive Elderly Based on Psychological Domain

The results of research based on the psychological domain of the elderly at UPT Social Services Tresna Werdha Blitar in Tulungagung have a very good quality of life. Similar to research by Andila et al. (2023) the results showed that 50 people (86.9%) had good quality of life in the psychological domain(8). Although, based on research Sari et al., (2023) stated that the description of the quality of life of hypertension sufferers based on the psychology domain is lacking, seen from the sufferers often

feeling anxious, afraid, stressed and some sufferers lacking focus at work, putting things away and feeling dissatisfied with their health.(10).

According to researchers, the psychological quality of life of hypertensive elderly is greatly influenced by social and family support. The majority of elderly people at UPT PSTW Blitar in Tulungagung rarely feel lonely, anxious or hopeless because of the support from their friends at the homestead, officers, and students who practice at UPT PSTW Blitar in Tulungagung. Several elderly people at UPT PSTW Blitar who still have families and receive attention from their families appear to have a better quality of life than elderly people who do not receive attention from their families. This support is important to increase self-confidence and motivation to face problems and improve the quality of life of the elderly.

To improve the psychological quality of life of hypertensive elderly people, it is important to ensure that elderly people receive adequate social support and interventions that can help manage stress and anxiety. Programs that provide emotional support, as well as psychological therapy or counseling, can be effective strategies for improving the psychological well-being of hypertensive elderly people.

Quality of Life for Hypertensive Elderly Based on Social Relationship Domain

The results of research based on the social relations domain of the elderly at the Tresna Werdha Blitar Social Services UPT in Tulungagung show a good quality of life. Based on research Andila et al. (2023), stated that 53 people (86.9%) had a good quality of life in the social domain(9). This is because there is positive support from friends, which makes elderly people more motivated in carrying out daily activities and feel that their lives are more meaningful and appreciated.

According to researchers, to improve the quality of social life of elderly people, there needs to be encouragement and participation of other people in social and community activities. Good social relationships can influence the psychology of the elderly at UPT PSTW Blitar. For example, the elderly at UPT PSTW Blitar in Tulungagung can support each other by reminding each other to take medication, reminding each other when there are activities, and helping each other. The presence of positive peer support makes the elderly more motivated in carrying out daily activities, then as a result of social support it also makes the elderly feel that their lives are more meaningful and appreciated, thus influencing the elderly's response and behavior towards the quality of their life. Support from family and friends is important to ensure seniors feel appreciated and motivated in living their daily lives.

Programs that provide opportunities for seniors to interact and build strong social relationships can help reduce social isolation and improve their overall well-being.

Quality of Life for Hypertensive Elderly Based on Environmental Domains

The research results based on the environmental domain around the elderly at UPT Social Services Tresna Werdha Blitar in Tulungagung, the majority have a good quality of life. Similar to research conducted by Andila et al. (2023) stated that 55 elderly people (90.2%) had a good quality of life in the environmental domain. This is because the environment where the elderly live is quite healthy

and the average elderly person accepts the conditions in which they live, thus creating a prosperity that encourages the elderly to have a good quality of life. (9).

According to researchers, the quality of life of the elderly in the environmental domain is greatly influenced by the conditions and acceptance of the elderly's residence. A healthy, safe, comfortable environment and good access to health services are very important in improving the quality of life of the elderly. So, efforts are needed to improve environmental conditions, such as cleanliness, security and better access to health facilities. Programs that help seniors feel more connected and satisfied with their surroundings can play an important role in improving overall well-being.

The living conditions for the elderly at UPT PSTW Blitar in Tulungagung are very clean and well-maintained. The guest house rooms are cleaned every day, so that the elderly feel comfortable living at UPT PSTW Blitar in Tulungagung. Access to health services is also very easy, elderly people only need to walk to the service room near the guest house to get a routine check-up once a week by the Sembung Community Health Center. UPT PSTW Blitar itself is also equipped with various medical devices and medicines to support health services outside of routine examination schedules. Even in question number 12 in the WHOQOL-BREF Questionnaire "do you have enough money to meet your needs?" On average, respondents answered "a little", which affects the quality of life of hypertensive elderly people, aspects of the surrounding environment.

CONCLUSION

Research states that the quality of life in the orphanage is good where the majority of elderly people have grade 1 hypertension because they have a good level of independence and little dependence in daily activities so that it has not had a negative impact on the quality of life. Based on the physical health domain, it was found that the majority of elderly people still have a good quality of life. Research finds that elderly people who are physically active have a better quality of life, but it is still influenced by physiological conditions. Based on the Psychological domain, it was found that elderly people have a good quality of life. Research finds that seniors who have strong emotional support have a better quality of life because seniors feel more motivated and have fewer negative feelings. Based on the social relations domain, it was found that the majority of elderly people still have a good quality of life. Research finds that elderly people who participate in social and community activities have a better quality of life. Based on the social environment domain, it was found that the majority of elderly people still have a moderate quality of life. This research found that the elderly's acceptance of the conditions in which they live affects their quality of life. The higher the acceptance, the better the quality of life demonstrated.

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