



PSYCHOLOGICAL WELL-BEING RELATIONS WITH HYPERTENSION

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| ABSTRACT | Keywords |
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| <p>Stressors in life contribute to a person's blood pressure values. High blood pressure can be suffered if you are less able to adapt to these various stressors. Currently hypertension has become a major problem in world health. Based on Riskesdas 2018, the prevalence of hypertension in Indonesia is 34.1%. The aim of this research is to analyze the relationship between Psychological Well-Being and the Degree of Hypertension. This research is a correlational analytical with a cross sectional approach. Sampling used purposive sampling. The instruments used were the PWBS from Ryff and the degree of hypertension according to WHO. Data analysis used the Spearman Rho test with the results of the analysis obtained p value = 0.000 ($\alpha = 0.05$) and correlation coefficient = 0.708. There is a significant relationship between Psychological Well-Being and the respondent's degree of hypertension, with the strength of the relationship being strong and the direction of the relationship being positive, which means that the higher the Psychological Well-Being, the degree of hypertension or blood pressure is in the high normal category. It is hoped that respondents can carry out 10 behaviors that can increase Psychological Well-Being so that they can reduce the risk of hypertension.</p> | <p>Psychological Well-Being, Degree of Hypertension</p> |

INTRODUCTION

Blood Pressure is closely related to stressors. A person will suffer from hypertension if they are less able to adapt to stressors. Currently, hypertension has become a major problem in world health. *World Health Organization* (WHO) stated that from 2000 to 2008 the prevalence of hypertension continued to increase, with the world population affected by hypertension as many as 639 million cases or 26.4% of the population. Hypertension is often referred to as the "silent killer", because people with

hypertension often suffer from it for years years without feeling any disturbance or symptoms.

Hypertension has various risk factors. Risk factors for hypertension include genetics, race, age, gender, smoking, obesity, and psychological stress. Al-firdaus (2012 in Furqon, 2016) stated that an individual's excessive emotional condition also influences the development of hypertension. This shows that psychological factors have a big role in the process of developing hypertension. Negative

emotions can cause a decrease in physical and psychological health (Wells, 2010).

Stress and negative emotions can indicate that someone is experiencing a decline in Psychological Well-being. Psychological Well-Being is the full achievement of a person's psychological potential and a state when an individual can accept one's strengths and weaknesses as they are, have a life goal, develop positive relationships with other people, become an independent person, able to control the environment, and continue to grow personally (Ryff, 1989). So, in hypertensive patients who have problem with Psychological Well-Being such as stress, not being able to control the environment and oneself, anxiety, excessive emotions of anger have the potential to affect one's blood pressure.

METHOD

The research design used is correlational analytics with a cross sectional approach. The place for this research was carried out at the Posyandu for the Elderly using purposive sampling and obtained a sample size of 35 people.

Hypertension data was taken directly by measuring the respondent's blood pressure using a digital sphygmomanometer whose accuracy had previously been confirmed and then the systole figures obtained from each respondent were compared with the blood pressure classification according to WHO. Psychological Well -Being data was taken using a questionnaire from Ryff which includes components; Autonomy, Mastery of the environment, Personal growth, Positive relationships with others, Purpose in life, and Self-acceptance. Analysis was carried out using the SPSS spearman rho application with $\alpha \leq 0.05$.

RESULTS

Table 1: Psychological Well - Being

| Psychological Well - Being a Respondent | amount | Percentage (%) |
|---|--------|----------------|
| Very high | 6 | 17.1 |
| Tall | 8 | 22.9 |

| | | |
|-----------|----|------|
| Currently | 8 | 22.9 |
| Low | 10 | 28.6 |
| Very low | 3 | 8.6 |
| Amount | 35 | 100 |

Based on table 1 above, it is known that Psychological Well-Being Nearly half of respondents (28.6%) were in the low category, a small portion of respondents (17.1%) were in the very high category and a small portion of respondents (8.6%) were very low.

Table 2: Degree of Hypertension

| Respondent's Degree of Hypertension | Amount | Percentage (%) |
|-------------------------------------|--------|----------------|
| Normal high | 9 | 25.7 |
| Mild hypertension | 14 | 40 |
| Moderate Hypertension | 11 | 31.4 |
| Severe Hypertension | 1 | 2.9 |
| Amount | 35 | 100 |

Based on table 2 above, it is known that the degree of hypertension of almost half of the respondents (40%) is in the mild hypertension category, a small proportion of respondents (31.4%) are in the moderate hypertension category, a small proportion of respondents (25.7%) are in the high normal degree. and very few respondents (2.9%) had severe hypertension.

Respondents who have Psychological Well-Being very high, most of them had normal high blood pressure, while respondents who had Psychological Well-Being very low have moderate degrees of hypertension. However, there was one respondent who was Psychological Well-Being he has a severe degree of hypertension. Based on the results of the Spearman Rho analysis test, the p value = 0.000 ($\alpha = 0.05$) with a correlation coefficient of 0.708 and a positive direction of relationship. This means that there is a significant relationship between

Psychological Well-Being with the degree of hypertension of the respondent, with the strength of the relationship being strong and the direction of the relationship being positive, which means that the higher the *Psychological Well-Being*, the degree of hypertension or blood pressure of the respondent is in the normal category.

DISCUSSION

Hypertension is a cardiovascular disease that is often suffered by elderly people in Indonesia. Hypertension is also a chronic disease that requires intervention over a long period of time, even for life. Some of the risks that cause hypertension include genetics, race, age, gender, smoking, obesity, and psychological stress. Elderly people often experience psychological stress caused by decreased physical function which causes limitations in carrying out daily activities and becomes dependent on other people. Physical limitations in the elderly will ultimately lead to changes in independence in meeting daily needs. For elderly people who have adequate sources of support, it will be easy to adapt to these physical limitations and it may not have much effect on their emotional and psychological condition. On the other hand, elderly people who do not have adequate sources of support will experience psychological stress because there is no one to help them adapt to limited conditions and ultimately find it difficult to accept themselves, which has an impact on their psychological well-being (Santrock, 2013 in Azijah et al., 2021).

This research shows that elderly people who have high and very high *Psychological Well-Being* have their blood pressure in the high normal range and have mild hypertension. This is in line with the research results of Ramadi et al., (2017) in (Azijah et al., 2021) which shows that *Psychological Well-Being* can improve health status where respondents with good *Psychological Well-Being* have a 10.125 times higher chance of controlling their blood pressure.

Psychological Well-Being is full achievement of psychological potential somebody And something circumstances k individual ethics can accept strength And weakness self What existence, own life goals, developing relationships be positive with others, be a person Which independent, capable control environment, And Keep going grow in a way personal (Ryff, 1989 in Ramadi et al., 2017). Hypertension sufferers Which have problem *Psychological Well-Being* like stress, Nocapable control environment and himself, worried, emotions excessive anger will affect pressure his blood. But If hypertension sufferers own ability *Psychological Well-Being* the high ones will capable develop potency in self as well as capable For own And create environment Which in accordance with condition physical, so pressure blood will be well controlled (Wells, 2010 in (Ramadi et al., 2017).

The relationship between unfavorable psychological factors such as depression and stress and hypertension is very clear. Evidence from research results shows that good *Psychological Well-Being*, which includes positive thoughts and feelings such as purpose in life, optimism and happiness, has an independent relationship to reducing the risk of hypertension (Ramadi et al., 2017). Stress can cause activation of the sympathetic nervous system which can lead to increased release of nor-epinephrine from sympathetic nerves in the heart and blood vessels, which causes increased cardiac output and increased systemic vascular resistance. Next, the adrenal medulla secretes more catecholamines (epinephrine and norepinephrine). Activation of the sympathetic nervous system can increase circulation of angiotensin II, aldosterone and vasopressin which can increase systemic vascular resistance. Prolonged elevations in angiotensin II and catecholamine can lead to cardiac and vascular hypertrophy both of which can contribute to sustained increases in blood pressure (Amira et al., 2021).

Ramadi et al (2017) said that *Psychological Well-Being* has a relationship with behavioral factors that are risk factors for hypertension, namely smoking, physical

activity, diet and *Body Mass Index*. From the research results, it was found that someone has *Psychological Well-Being* those who were tall had a lower likelihood of smoking, had a greater likelihood of engaging in recommended levels of activity such as regular exercise, had a tendency to consume more fruit and vegetables, consumed less sugary foods and processed meats. There is a two-way relationship between *Psychological Well-Being* and physical activity and healthy diet patterns. High *Psychological Well-Being* will encourage regular physical activity and a healthy diet pattern. Likewise, regular physical activity and a healthy diet pattern can also improve physical well-being.

CONCLUSIONS

There is a significant relationship between *Psychological Well-Being* and the respondent's degree of hypertension, with the strength of the relationship being strong and the direction of the relationship being positive, which means that the higher the psychological well-being of the respondent, the degree of hypertension or blood pressure of the respondent is in the high normal category.

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