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## **Attitudes and Family Support of the Barrang Caddi Island Community Related to the Utilization of Hypertension Services in Achieving Minimum Service Standards (SPM)**

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### **ABSTRACT**

**Introduction:** Based on Makassar City health profile data in 2021, several aspects of health services and health management still have not achieved the SPM targets for Health and SDG's. At the Barrang Lompoa Community Health Center, only 46.2% of patients suffering from hypertension received health services in 2021, far from the target set at 100%.

**Objective:** To understand the correlation between individual attitudes and family support towards the use of hypertension services at Pustu Barrang Caddi in 2024.

**Method:** The type of research used is Cross Sectional Study. This research was conducted on Barrang Caddi Island, Makassar City in March - April 2024. The population in this study was 351 households. The sample in this study was part of the population on Barrang Caddi Island, that is 188 households.

**Result:** The results of data analysis include univariate analysis with frequency distribution and bivariate chi-square test. A total of 83 men (44.1%) and 105 women (56.9%) participated in filling out the research questionnaire. Data analysis was carried out bivariate using the Chi-Square test with a significance level of 5% ( $\alpha=0.05$ ). influence between attitude ( $p=0.000$ ), family support ( $p=0.000$ ). From the results of the Chi-Square test, a relationship was found between attitudes and family support on the use of hypertension services at Pustu Barrang Caddi in 2024.

**Conclusion:** There is a relationship between attitudes and family support on the use of hypertension services at Pustu Barrang Caddi in 2024.

**Keywords:** Attitude; Family Support; Hypertension

## INTRODUCTION

Health is a basic need for every human being and is the capital of every citizen and every nation in achieving its goals and achieving prosperity. A person cannot meet all his life needs if he is unhealthy, so being healthy is every individual's capital to continue living a decent life. The government has the responsibility to ensure that every citizen receives quality health services according to their needs. As a basic need, every individual is responsible for fulfilling the living needs of himself and the people he is responsible for, so that basically fulfilling the community's needs for health is the responsibility of every citizen. (Ipa et al., 2020)

Based on data from the World Health Organization, it is estimated that around 600 million people suffer from hypertension worldwide, with details of 3 million deaths every year. Hypertension ranks 3rd as one of the highest killers in Indonesia after stroke and tuberculosis, amounting to 6.8% of the proportion of causes of death at all ages. The World Health Organization (WHO) in 2013 stated that hypertension contributed 7% to the world's disease burden and resulted in 17 million deaths per year. The prevalence of hypertension (age  $\geq 18$  years) in the world is 22%. In Southeast Asia, the prevalence of hypertension is 24.7% with the figure based on gender being higher in men, namely 25.3% and in women 24.2%. (WHO, 2014)

Health Minimum Service Standards (SPM) are guidelines for Regency/City Regional Governments to provide minimum Health Services for every citizen. Implementation of Health SPM in the regions is non-negotiable. Every Regency/City Regional Government is required to provide Basic Health Services by these standards. However, based on Makassar City health profile data in 2021, there are still several aspects of health services and health management that have not met the SPM targets for Health and the SDGs. For example, at the Barrang Lompoa Community Health Center, only 46.2% of patients suffering from hypertension received health services in 2021, far from the target set at 100%.

Archipelagic areas have different characteristics from other areas, especially because they consist of a large ocean with small islands. The characteristics of communities in island areas are also different, with coastal communities tending to be aggressive and dynamic, while inland or mountain communities tend to be more passive and closed. Barrang Caddi Island, one of the islands in the working area of the Barrang Lompo Health Center, has a majority population of traditional fishermen. This condition affects hypertension services at the Barrang Lompo Community Health Center, so an analysis of the factors influencing the use of hypertension services on Barrang Caddi Island is needed.

## METHOD

The type of research used in this research is quantitative research using a Cross-Sectional Study approach, an approach by collecting various data and information or information from respondents to determine the relationship between the independent variables, attitudes and family support, to the dependent variable of hypertension services in the community in the Barrang Caddi Islands area. Teknik pengambilan sampel menggunakan accidental sampling. This research was carried out on Barrang Caddi Island, Makassar City in March - April 2024.

The population in this study was 351 households located on the designated island, namely Barrang Caddi Island in the Makassar City area, South Sulawesi Province. The sample in this study was part of the population on Barrang Caddi Island, that is 188 households.

The sample size is determined using the Slovin formula, as follows:

$$n = \frac{N}{1 + N(e)^2}$$

$$n = \frac{351}{1 + 351 (0,05)^2}$$

$$n = 187,7$$

So, the number of samples in this study was rounded up to 188 samples.

Information:

N = population size

n = sample size

e = level of research accuracy

This research was carried out by conducting a direct survey by distributing paper questionnaires to the people of Barrang Caddi Island. The questionnaire format used is an open question to find out more deeply about the user's reasons. Closed questions to find out user characteristics such as gender, education, age, and others. Meanwhile, the scale questions for the main question use a Likert scale. The Likert scale used contains 5 points. The types of data collected are primary data and secondary data. Primary data is data obtained from the results of questionnaires

distributed to the sample. Secondary data is the collection of data obtained through reviewing documents or archives available at the Community Health Center, Makassar City Health Service.

Data analysis was carried out in two ways, namely univariate and bivariate analysis (chi-square test). The data that has been analyzed will then be presented in tabular form, namely frequency tables (one-way tabulation) and cross-tabulation (two-way tabulation) accompanied by a narrative in the form of an explanation regarding the frequency, relationship between variables, and the magnitude of the risk of each independent variable on dependent variable the factors that relate to the use of hypertension services in the community on Barrang Caddi Island.

## RESULTS

Based on the research that has been carried out, the following data was obtained

**Table 1.** Distribution of Respondent Characteristics in the Community on Barang Caddi Island

Variable	n	%
<b>Gender</b>		
Man	83	44,1%
Woman	105	56,9%
<b>Age</b>		
<35 years	90	47,9%
≥35 years	98	52,1%
<b>Last Education</b>		
Does not School	8	4,3%
Finished Elementary School	123	65,4%
Finished Middle School	22	11,7%
Finished High School	32	17%
Graduate from College	3	1,6%
<b>Work</b>		
Does not Work	69	36,7%
Government Employees	1	0,5%
Private Employees	5	2,7%
Fisherman	66	35,1%
Trader	11	5,9%
Etc	36	19,1%
<b>Distance</b>		
< 2km	100	100%
≥ 2 km	0	0%

Source: Primary Data, 2024

Based on the table above, it is known that the characteristics of respondents based on gender groups with the highest presentation are in the female group with 105 respondents or 56.9%. Then, the characteristics of respondents based on age with the highest presentation were in the older group (≥35 years) with 98 respondents or 52.1%. Then, the characteristics of respondents based on education, in general, at most 123 respondents graduated from elementary school (65.4%). Furthermore, the highest characteristics of respondents based on work were respondents who did not work, namely 69 people (36.7%). Then all respondents had access from houses to the Pustu Barrang Caddi, it is 188 people (100%).

**Table 2.** Relationship between attitudes and utilization of hypertension services in the community on Barang Caddi Island

Attitude	Utilization of Hypertension Service				Total	P Value (0.05)
	Utilise		Does not Utilise			
	N	%	n	%	n	%
Good	131	85,1	23	14,9	154	100
Poor	15	44,1	19	55,9	34	100
<b>Total</b>	<b>42</b>	<b>22,3</b>	<b>146</b>	<b>77,7</b>	<b>188</b>	<b>100</b>

Source: Primary Data, 2024

Based on the table above, shows that 154 respondents fall into the good attitude category. There were 131 respondents (85.1%) who fell into the good attitude category and utilized hypertension services. Meanwhile, respondents who fell into the good attitude category and did not utilize health services at the Pustu Barrang Caddi were 23 respondents (14.9%). Furthermore, 34 respondents fell into the poor attitude category. There were 15 respondents (44.1%) who fell into the category of poor attitudes and utilized hypertension services. Then the respondents who fell into the category of poor attitude and did not utilize the pustu hypertension services on Barrang Caddi Island were 19 respondents (55.9%). Furthermore, the Chi-Square test results obtained a value of  $p=0.000$  ( $p \leq 0.05$ ), this means that  $H_0$  is rejected, which means there is a relationship between attitude and the use of hypertension services in the community at the Pustu Barrang Caddi.

**Table 3.** Relationship between family support and utilization of hypertension services in the community on Barang Caddi Island

Family Support	Utilization of Services Hypertension				Total	P Value (0.05)
	Utilise		Does not Utilise			
	n	%	n	%	N	%
Good	137	84,6	25	15,4	162	100
Poor	9	34,6	17	65,4	26	100
<b>Total</b>	<b>146</b>	<b>77,7</b>	<b>42</b>	<b>22,3</b>	<b>188</b>	<b>100</b>

Source: Primary Data, 2024

Based on the table above, shows that 162 respondents fall into the good family support category. There were 137 respondents (84.6%) who fell into the category of good family support and utilized hypertension services. Meanwhile, there were 25 respondents (15.4%) who fell into the good family support category and did not utilize the hypertension services in Pustu Barang Caddi. Furthermore, 26 respondents were included in the poor family support category. 9 respondents were in the poor family support group category and utilized hypertension services (34.6%). Then the respondents who fell into the category of poor family support and did not utilize the hypertension services on Pustu Barrang Caddi were 17 respondents (65.4%). Furthermore, the Chi-Square test results obtained a value of  $p=0.00$  ( $p < 0.05$ ), this means that  $H_0$  is rejected, which means there is a relationship between the family support variable and the use of hypertension services in the Pustu Barang Caddi.

## DISCUSSION

Attitude is a person's reaction or response that is still closed to a stimulus or object that already involves opinion and emotional factors (Soekidjo Notoatmodjo, 2005: 52). Newcomb, a social psychologist, stated that attitude is readiness or willingness to act and is not the implementation of certain motives. In other words, the function of attitude is not yet an action (open reaction) or activity but is a predisposition to behavior or action (closed reaction) (Soekidjo Notoatmodjo, 2005: 52). Based on Table 5, it shows that 154 respondents fell into the good attitude category. There were 131 respondents (85.1%) who fell into the good attitude category and utilized hypertension services. Meanwhile, respondents who fell into the good attitude category and did not utilize health services at Pustu Barrang Caddi were 23 respondents (14.9%). Furthermore, 34 respondents fell into the poor attitude category. There were 15 respondents (44.1%) who fell into the category of poor attitudes and utilized hypertension services. Then the respondents who fell into the category of poor attitude and did not utilize hypertension services at Pustu Barrang Caddi were 19 respondents (55.9%). Furthermore, the Chi-Square test results obtained a value of  $p=0.000$  ( $p\leq 0.05$ ), this means that  $H_0$  is rejected, which means there is a relationship between attitude and the use of hypertension services in the community at the Pustu Barrang Caddi Community Health Center. The better the level of attitude, the better the level of utilization of hypertension services at Pustu Pulau Barrang Caddi. On the other hand, the lower the attitude, the lower the respondent's activeness in using hypertension services at Pustu Barrang Caddi. This can happen because people know the importance of Pustu Barrang Caddi in maintaining health. Pustu Barrang Caddi is the closest health service center to Barrang Caddi Island, so people first go to Pustu before going to other health service places. These results are in line with research by Fatimah and Indrawati (2019) which states that there is a significant relationship between the attitudes and the utilization of health services at the Kagok Health Center. Of the 106 respondents, 75 respondents (70.8%) had a good attitude, 22 respondents (20.8%) had a good attitude, and 9 respondents (8.5%) had a bad attitude. So it can be said that the greater the positive attitude, the higher the utilization of hypertension services. However, these results are not in line with research by Yuniar et al., (2020) which states that there is no relationship between attitudes and the use of Posbindu services in the working area of the Semplak Community Health Center. Of the 80 respondents, 61 respondents (76.25%) had a good attitude, and 19 respondents (23.75%) had a bad attitude. Respondents with unfavorable attitudes are more at risk of not utilizing posbindu services compared to respondents who have good attitudes. Knowledge, information, and education are determinants of respondents' attitudes in utilizing health services.

Family support is the family's attitudes, actions, and acceptance of family members who are supportive, and always ready to provide help and assistance if needed. In this case, the recipient of family support will know that other people care, appreciate, and love him. (Friedman, 2010). The results of research conducted by Ria & Sari (2019) show that family members who provide good support and show a caring attitude towards family members who suffer from hypertension have an important role in compliance with treatment. The attention of family members, starting from taking them to health services, helping with treatment costs, and reminding them to take medication, has been proven to be more compliant with treatment compared to hypertension sufferers who receive less attention from their family members. Based on Table 6, it shows that 162 respondents are included in the good family support category. There were 137 respondents (84.6%) who fell into the category of good family support and utilized hypertension services. Meanwhile, respondents who were included in the good family support category and did not utilize hypertension services at Pustu Barrang Caddi were 25 respondents (15.4%). Furthermore, 26 respondents were included in the poor family support category. 9 respondents were included in the poor family support group category and utilized hypertension services (34.6%). Then the respondents who fell into the category of poor family support and did not utilize hypertension services at Pustu Barrang Caddi were 17 respondents (65.4%). Furthermore, the Chi-Square test results obtained a value of  $p = 0.000$  ( $p > 0.05$ ), this means that  $H_0$  is rejected, which means there is a relationship between the family support variable and the use of hypertension services in the community at Pustu Barrang Caddi. The better the level of family support, the better the level of utilization of hypertension services at Pustu Pulau Barrang Caddi. On the other hand, the lower the family support, the lower the utilization of hypertension services at Pustu Pulau Barrang Caddi. This is because the people of Barang Caddi Island are mostly families but live in different houses because they are married, so the bonds between the people of Barrang Caddi Island are strong. Most female respondents said that they pay attention to the health of their husbands who work as fishermen because their husbands are the source of the family's income. This research was conducted by Sumendap (2020), saying that there is a relationship between family support and the use of health services at Posbindu in the Tareran Community Health Center working area. Of the 88 respondents, 58 respondents (65.9%) received good family support, and 30 respondents (34.1%) received less support. However, this result is not in line with research conducted by Cahyani (2020), saying that There is no relationship between family support and utilization of services at the Trucuk I Health Center, Klaten Regency. Of the 84 respondents, there were 74 respondents (88.09%) with a good level of family

support and there were 10 respondents (11.91%) with a less supportive level of family support. In this study, respondents with families who were less supportive were due to lack of time and lack of family attention.

## CONCLUSION

Based on the results and discussion described above, family attitudes and support influence the use of hypertension services in the community on Barrang Caddi Island, Makassar City for the period March – April 2024. The suggestion in this research is that it is hoped that hypertension sufferers should routinely carry control of blood pressure once a month and live a healthy lifestyle, to minimize the possibility of hypertension. Improving management in patient examinations during the implementation of Posbindu PTM on Barrang Caddi Island, starting from the use of tools to technical implementation in the field and this research can be material for future researchers if they want to research hypertension again. One variable that can be developed is the level of knowledge and attitudes of health workers.

## REFERENCES

1. Agustianto, R.F., Mudjanarko, S.W., Prabowo, G.I., 2020. Tingkat Pendidikan Bukan Merupakan Prediktor Risiko Diabetes Berdasarkan Skoring American Diabetes Association. *Higeia J. Public Heal. Res. Dev.* 4, 157–167.
2. Agustina, S., 2019. Persepsi Sakit, Pengetahuan dan Kepuasan dengan Pemanfaatan Pelayanan Kesehatan di Puskesmas. *Higeia J. Public Heal. Res. Dev.* 3, 274–285.
3. Anindya, P. A., Jati, S. P., & Nandini, N. (2020). Upaya Menerapkan Standar Pelayanan Minimal di Bidang Kesehatan Berdasarkan Indikator Pelayanan Kesehatan Hipertensi di Puskesmas Kota Semarang. *Jurnal Ilmiah Mahasiswa*, 10(2), 30-33.
4. Ameina, F., 2022. Faktor yang Berhubungan dengan Pemanfaatan Pelayanan Kesehatan Masyarakat Kampung Cirimpak Rt 02 / 05 Desa Megamendung Pada Masa Pandemi Covid- 19 Tahun 2021. *Promot. J. Kesehat. Masy.* 5, 249–254.
5. Apriliani, Y., Naufal, A. F., & Perdana, S. S. (2022). Sosialisasi dan Pelayanan Fisioterapi Pada Lansia Dengan Hipertensi Di Desa Sarimulyo Boyolali. *BERNAS: Jurnal Pengabdian Kepada Masyarakat*, 3(1), 60-65.
6. Ariyanti, R., Preharsini, I. A., & Sipolio, B. W. (2020). Edukasi Kesehatan Dalam Upaya Pencegahan dan Pengendalian Penyakit Hipertensi Pada Lansia. *To Maega: Jurnal Pengabdian Masyarakat*, 3(2), 74-82.
7. Basith, Z.A., Prameswari, G.N., 2020. Pemanfaatan Pelayanan Kesehatan di Puskesmas. *Higeia J. Public Heal. Res. Dev.* 4, 52–63.
8. Bersukaria, B. (2022). Analisis Pelaksanaan Standar Pelayanan Minimal (Spm) Hipertensi Di Puskesmas Air Dingin Kota Padang Tahun 2022 (Doctoral dissertation, STIKES ALIFAH PADANG).
9. Cahyani, I.S.D., 2020. Pemanfaatan Pelayanan Antenatal Care di Puskesmas. *Higeia J. Public Heal. Res. Dev.* 4, 76–86.
10. Dinillah, N., Yudia, R.C.P., Fitriany, E., 2022. Hubungan Antara Persepsi Masyarakat dengan Pemanfaatan Pelayanan Kesehatan Nasional Puskesmas Sempaja. *J. Verdure* 4, 129–137.
11. Doko, H., Kenjam, Y., Ndoen, E.M., 2019. Determinan Pemanfaatan Kartu Jaminan Kesehatan Nasional (JKN) di Wilayah Kerja Puskesmas Manutapen Kecamatan Alak Kota Kupang. *Media Kesehat. Masy.* 1, 68–75. <https://doi.org/10.35508/mkm.v1i2.1951>
12. Haning, E., Rochmah, T.N., Aimanah, I.U., 2018. Analisis Need dan Demand Pelayanan Kesehatan pada Puskesmas Siwalankerto Kota Surabaya di Era JKN. *Bul. Penelit. Sist. Kesehat.* 21, 172–179. <https://doi.org/10.22435/hsr.v21i3.431>
13. Harmen, E. L., Assyahri, W., Zulfa, Z., & Yunanda, G. (2023). Pelayanan dan Edukasi Kesehatan Masyarakat tentang Hipertensi di Lapangan Kantin Wirabraja Kota Bukittinggi. *Suluah*
14. *Bendang: Jurnal Ilmiah Pengabdian Kepada Masyarakat*, 23(1).
15. Hasibuan, R. (2021) „Buku Ajar Perencanaan dan Evaluasi Kesehatan“, pp. 37–43.
16. Hidana, R., Shaputra, R., Maryati, H., 2018. Faktor-Faktor yang Berhubungan dengan Pemanfaatan Pelayanan Kesehatan Oleh Pasien Luar Wilayah di Puskesmas Tanah Sareal Kota Bogor Tahun 2018. *Promot. J. Kesehat. Masy.* 1, 105–115.
17. Idris, H., Misnaniarti, Budi, I.S., Ainy, A., Safriantini, D., 2021. The determinantsof health services demand in indonesia: An analysis of indonesia family life survey 5 (ifls). *J. Heal. Transl. Med.* 24, 48–60. <https://doi.org/10.22452/jummec.vol24no2.7>
18. Irawan, B., Ainy, A., 2018. Analisis Faktor-Faktor Yang Berhubungan Dengan Pemanfaatan Pelayanan Kesehatan Pada Peserta Jaminan Kesehatan Nasional Di Wilayah Kerja Puskesmas Payakabung, Kabupaten Ogan Ilir. *J. Ilmu Kesehat. Masy.* 9, 189–197. <https://doi.org/10.26553/jikm.v9i3.311>

19. Katarina, Y., & Syamruth, Y. K. (2022). Sebaran Pelayanan Kesehatan Penderita Hipertensi Di Kabupaten Kupang Tahun 2020 Dengan Aplikasi QGIS. *Jurnal Kesehatan*, 11(2), 85-90.
20. Mandasari, L., 2020. Analisis Kualitas Pelayanan di Pusat Kesehatan Masyarakat (Puskesmas) Tanjung Raja Kabupaten Ogan Ilir. *J. Syntax Transform*. 1, 24– 29.
21. Mardiana, N., Chotimah, I., Dwimawati, E., 2022. Faktor-Faktor Pemanfaatan Pelayanan Kesehatan di Puskesmas Parung Selama Masa Pandemi Covid-19. *Promotor* 5, 59–74. <https://doi.org/10.32832/pro.v5i1.6129>
22. Megawati, E., Widjanarko, B., Nugraha, P., 2018. Faktor-Faktor yang Berhubungan dengan Pemanfaatan Pos Kesehatan Desa di Wilayah Kerja Puskesmas Ampana Timur. *Promot. J. Kesehat. Masy.* 8, 38. <https://doi.org/10.31934/promotif.v8i1.228>
23. Melani, N., Nurwahyuni, A., 2022. Analisis Faktor yang Berhubungan dengan Demand Atas Pemanfaatan Penolong Persalinan di Provinsi Banten: Analisis Data Susenas 2019. *J. Inov. Penelit.* 2, 3175–3183.
24. Mursyid, F., Ahri, R. A., & Suharni, S. (2022). Sistem Pelaksanaan Layanan Penderita Hipertensi Dan Diabetes Mellitus Terhadap Peningkatan Capaian Standar Pelayanan Minimal (SPM) di Puskesmas: Service Implementation System for Patients with Hypertension and Diabetes Mellitus to Improve Minimum Service Standards (SPM) in Primary Health Care (Puskesmas). *Journal of Muslim Community Health*, 3(1), 1-10.
25. Notoatmodjo, S. (2010). *Promosi Kesehatan Teori dan Aplikasi*. Jakarta, Rineka Cipta.
26. Nourazari, S., Davis, S.R., Granovsky, R., Austin, R., Straff, D.J., Joseph, J.W., Sanchez, L.D., 2021. Decreased hospital admissions through emergency departments during the COVID-19 pandemic. *Am. J. Emerg. Med.* 42, 203– 210. <https://doi.org/10.1016/j.ajem.2020.11.029>
27. Panggantih, A., Pulungan, R.M., Iswanto, A.H., Yuliana, T., 2019. Faktor-Faktor Yang Berhubungan Dengan Pemanfaatan Pelayanan Kesehatan Oleh Peserta Jaminan Kesehatan Nasional (Jkn) Di Puskesmas Mekarsari Tahun 2019. *Media Kesehat. Masy. Indones.* 18, 140–146.
28. Permenkes, R. I. (2020). *Peraturan Menteri Kesehatan Republik Indonesia Nomor 3 Tahun 2020 Tentang Klasifikasi Rumah Sakit*. Peraturan Menteri Kesehatan Republik Indonesia.
29. Putri, A. A., Mulyadi, A., & Sampurna, R. H. (2022). Evaluasi Kebijakan Standar Pelayanan Minimal Di Puskesmas Nagrak Kabupaten Sukabumi. *Jurnal Governansi*, 8(2), 91-98.
30. Sari, I. R., & Besral, B. (2022). Evaluasi Kinerja Dan Upaya Peningkatan Kualitas Data Standar Pelayanan Minimal (SPM) Bidang Kesehatan. *Journals of Ners Community*, 13(6), 723-731.
31. Rahayu, N.D., 2020. Pemanfaatan Posyandu Lansia di Wilayah Kerja Puskesmas.Higeia *J. Public Heal. Res. Dev.* 4, 448–459.
32. Ridzkyanto, R.P., 2022. Gambaran Kepesertaan Jaminan Kesehatan Nasional pada Kader di Kecamatan Mumbulsari Kabupaten Jember. *J. Ilmu Kesehat. Masy. Berk.* 4, 1–6
33. Wada, F. H., Maisaroh, D., Rahmah, N. M., & Puspitasari, I. (2022). Hubungan Pelayanan Edukasi dengan Tingkat Kepuasan Pasien Hipertensi di Poliklinik Penyakit dalam RS dr. Chasbullah Abdul Madjid. *JINTAN: Jurnal Ilmu Keperawatan*, 2(1), 33-39.