

## Original Article

### EVALUATION CHARACTERISTIC AND LEVEL OF FAMILY KNOWLEDGE REGARDING HOME CARE TREATMENT FOR STROKE PATIENTS

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#### ABSTRACT

**Background.** Home Care Nursing is a health service carried out by professionals in the patient's home with the aim of helping to meet the patient's needs, which is carried out by a team of professionals involving family members as supporters in the nursing process. Knowledge about home care treatment is very important because families who have good knowledge of caring for stroke patients can help speed up the recovery process. The aim of this study was to evaluate characteristic and the level of family knowledge regarding home care for stroke patients.

**Research Method.** The research design used a quantitative descriptive design. This study was conducted in the stroke unit room of RSUD Dr. Seodomo Trenggalek. The population of this study was 83 patients with a purposive sampling technique. The sample in this study was a family member who cared for patients at home or in a hospital, aged over 19 years, totaling 20 respondents. The instrument used was the Family Knowledge of Home Care Treatment Questionnaire.

**Findings.** The level of family knowledge about home care for stroke patients was mostly in the sufficient category. The characteristics of the respondents were that most of them were aged 31-59 years, male, worked as entrepreneurs, had a junior high school or high school education, had no care experience, received information about caring for stroke patients, and sources of information were from nurses.

**Conclusion.** Patients and families need to prepare for long-term care at home, and can improve the quality of care received.

**Keywords:** Home Care Treatment, Level of Knowledge, Stroke Patient.

#### BACKGROUND

Knowledge is the result of someone knowing an object through their senses. Stroke is a loss of brain function due to impaired blood flow to the brain and strokes are distinguished based on the duration of symptoms, medical records, and also syndromes that attack the anatomical area of the brain [1]. Family knowledge about stroke patient care is very important for everyone because stroke is the leading cause of death in hospitals and the leading cause of disability is the adult age group in Indonesia [2]. Families who have good attitudes and knowledge in caring for stroke patients will help speed up the recovery process [3]. Meanwhile, families with a low level of knowledge in caring for stroke patients can increase disability in treatment and the occurrence of recurrent strokes (Kurniasih, 2020). Based on research results shows that the level of family knowledge in stroke patients in the

sufficient category was 31.5% and lacking was 68.5%[4]. the results of other studies show, the level of family knowledge in caring for stroke patients at home was good for 7 people (23.33%), sufficient for 18 people (60%), and lacking for 5 people (16.66%)[5]. Based on the results of the researcher's observations when practicing in the stroke unit room of Dr. Soedomo Trenggalek Hospital, the patient's family paid less attention to patient care related to personal hygiene (lack of initiative to wash and perform oral hygiene), patient mobilization, and how to provide nutrition (afraid to feed through NGT). Based on the results of interviews about stroke care at home, families said that stroke patients sometimes still drink coffee, high-salt foods that have been reheated several times, poor sleep patterns, only one check-up (no more) and do not routinely take blood pressure medication.

According to WHO every year, 15 million people worldwide suffer from stroke. Of that number, 5 million people die and 5 million others are permanently disabled [6]. In Indonesia itself, based on the results of Rikesdas at 2018 [7], the prevalence of stroke increased compared to 2013, namely from (7%) to (10.9%). Nationally, the prevalence of stroke in Indonesia in 2018 based on a doctor's diagnosis in the population aged >15 years is estimated at 2,120,362 people. In East Java Province, based on the results of Rikesdas at 2018[7], the incidence of stroke was 12.4%, namely 113,045 people. Based on data from the Trenggalek Regency Health Office in 2018, the number of stroke sufferers in Trenggalek Regency reported by 22 health centers in Trenggalek Regency was 3,771 people out of a population of 693,104 people. Meanwhile, data at the dr. In 2021, 929 people suffered from stroke (Inpatient Register of Dr. Soedomo Hospital, 2021). Data at Dr. Soedomo Hospital, Trenggalek in 2022, 994 people suffered from stroke (Inpatient Register of Dr. Soedomo Hospital, 2022) with an average of 83 patients every month. And data at Dr. Soedomo Hospital, Trenggalek in 2023, 1,288 people suffered from stroke (Inpatient Register of Dr. Soedomo Hospital, 2023) with an average of 107 patients every month.

Stroke disease has a very detrimental impact on the sufferer. One of the impacts is physical and functional disorders due to stroke. Therefore, stroke requires comprehensive treatment including long-term recovery efforts, even throughout the rest of the patient's life. To be able to help fulfill stroke patient care, of course, knowledge from the family is needed. Family knowledge plays a very important role in the recovery phase so that the family is expected to be involved in patient care from the beginning of treatment. Patient recovery will be very helpful if the family provides encouragement to show trust and patient improvement, and allows patients to do as many things as they can and live as independently as possible [8]. In this case, the role of the family is very much needed. Along with its role,

knowledge is very important for families of stroke sufferers. Family knowledge will influence the family's attitude in caring for family members who have stroke. Good knowledge and attitude when caring for family members with stroke are expected to avoid recurrent strokes. Based on the problems above, the author is interested in researching the level of family knowledge about home care for stroke patients. This study examines how family knowledge about post-stroke patient care is as a description of family knowledge as a caregiver for patients so that it can provide a description of appropriate interventions to reduce the recurrence rate in stroke patients and add novelty by developing and validating a special instrument to measure family knowledge about post-stroke care that is appropriate to regional conditions.

## **RESEARCH METHOD**

The research design used in this study is a quantitative descriptive research design with data collection techniques using the survey method. The variables in this study use a single variable, namely the level of family knowledge about home care for stroke patients. This study was conducted in the Stroke Unit Room of Dr. Soedomo Trenggalek Hospital on March 7- 28, 2024. The population in this study were family members who cared for stroke patients in the Stroke Unit Room of Dr. Soedomo Trenggalek Hospital, totaling 83 people (average in one month, registration of Dr. Soedomo Hospital 2022). The 20 samples taken must meet the inclusion and exclusion criteria with the sampling technique used in this study is Purposive Sampling. The inclusion criteria in this study include, One family member is willing to be a respondent Able to read and write, Does not have visual impairment The age of the family who cares for is over 19 years. Not infected with Covid-19. Families who care for patients at home or in hospital. While the exclusion criteria include, One family member who does not provide care for stroke patients One family member who does not provide Family with stroke patients in critical condition/in the HCU room. The research was conducted after obtaining a research approval letter from the Director of the Dr. Soedomo Trenggalek Regional General Hospital with the number 070/129/406.010.001/18.00/2024 dated March 18, 2024. Data were analyzed using univariate analysis.

## **FINDINGS**

The following displays the frequency distribution data of the characteristics of respondents in this study, including age, gender, occupation, last education, experience of

caring for family members with stroke, experience of obtaining information about caring for stroke patients, sources of information obtained.

**Table 1. Respondent Characteristics (n=20)**

Characteristics	Frequency	Percentage
<b>Age</b>		
20 - 30 years	3	15%
31 – 59 years	13	65%
>60 years	4	20%
<b>Gender</b>		
Male	11	55%
Female	9	45%
<b>Work</b>		
Self-Employed	11	55%
Farmer	2	10%
Housewife	7	35%
<b>Last Education</b>		
Elementary	4	20%
School/equivalent	8	40%
Junior High School/equivalent	8	40%
Senior High School/equivalent	8	40%
<b>Experience Caring for a Family with Stroke</b>		
Yes	5	25%
No	15	75%
<b>Experience of Getting Information about Stroke Patient Care</b>		
Yes	14	70%
No	6	30%
<b>Source of Information Obtained</b>		
Electronic Media (TV/Mobile Phone)	1	5%
Friends/Neighbors	11	55%
Nurses/Health Workers	7	35%
Never		

Based on the table above, out of 20 respondents, 13 (65%) respondents were aged 31-59 years, 11 (55%) respondents were male, 11 (55%) respondents worked as self-employed, 8 (40%) respondents had a junior high school education and 8 (40%) respondents had a high school education, 15 (75%) respondents in the Stroke Unit had no experience caring for family members with stroke, 14 (70%) respondents had received information about stroke patient care and 11 (55%) respondents received information from nurses/health workers.

The Table 2 shows the frequency distribution data of the level of family knowledge about home care for stroke patients in the Stroke Unit of Dr. Soedomo Trenggalek Regional Hospital.

**Table 2. Level of Family Knowledge About Home Care For Stroke Patients**

Knowledge	Frequency	Percentage
Good	9	45%
Sufficient	11	55%
Less	0	0%

Based on the table above, it shows that out of 20 respondents, most of the families who care for stroke patients in the Stroke Unit of Dr. Soedomo Trenggalek Regional Hospital have a sufficient level of knowledge, as many as 11 (55%) respondents.

## **DISCUSSIONS**

Based on the results of the study of family characteristics in the Stroke Unit of RSUD dr. Soedomo Trenggalek from 20 respondents, 65% of respondents were aged 31-59 years, 55% of respondents were male, 55% of respondents worked as entrepreneurs, 40% of respondents had a junior high school education and 40% of respondents had a high school education, 75% of respondents in the Stroke Unit had no experience caring for family members with stroke, 70% of respondents had received information about stroke patient care and 55% of respondents received information from nurses/health workers. And most of the families who care for stroke patients in the Stroke Unit of RSUD dr. Soedomo Trenggalek have a sufficient level of knowledge of 11 (55%) respondents.

Based on the study, the characteristics of age, gender, last education and occupation cannot be a benchmark in family knowledge about home care for stroke patients without other factors such as experience in caring for family members with stroke and experience in getting information from anywhere and anyone. This study was conducted when stroke patients in the Stroke Unit were in better condition and had received direction from neurologists, nurses, physiotherapists, nutritionists about stroke and all its treatments, so that when filling in the family more or less knew how to answer the questions on the questionnaire. However, in this study the results of the study obtained sufficient results. According to the researcher, this shows that many families of patients do not yet know that the importance of family knowledge about stroke care at home can be seen from the way family members who have strokes. Families of stroke sufferers need time to be able to adapt

in carrying out stroke care. The time spent caring for stroke patients is influenced by the family's experience in caring, sometimes family caregivers feel helpless and tired because they have to care for a long time, but they try to be sincere and pray for their family members who have had a stroke. Families who provide care at home for stroke patients must gain skills in hospitals or other health service facilities, because families who provide care are not experienced in providing proper care, some stroke patients suffer from recurrent illnesses that cause complications and further strokes. When receiving health education, families with good knowledge will provide more effective home care. Therefore, to increase knowledge and positive attitudes in stroke rehabilitation at home will be more effective if there is interpersonal coordination between health workers, families, and stroke patients. The results of this study are in accordance with the results of previous studies where it was found that the level of family knowledge in caring for stroke patients at home was high as many as 7 people (23.33%), moderate as many as 18 people (60%), low as many as 5 people (16.66%)[17]. In line with one study which stated that almost half of the respondents had less knowledge as many as 13 people with a percentage (34.3%). Based on observations made, one of the factors that influence family knowledge in caring for stroke patients is age and education [18]. Another study stated that the level of family knowledge in stroke patients in the sufficient category was 31.5% and less as many as 68.5% [20]. The results of community service showed that before being given education, families who had a good level of knowledge were 4 people (26.7%) and after being given education, the majority of families, namely 13 people (86.7%) had good knowledge. The conclusion of this activity is that health education about stroke and post-stroke care at home can improve family knowledge in caring for post-stroke patients so that patient recovery increases optimally[19]. Therefore, it is expected that nurses are able to provide maximum health education for families and patients from the beginning when patients enter the hospital or every time they do a health check after returning from the hospital. Education is based on a detailed counseling program unit and is accompanied by appropriate methods and media in the form of leaflets specifically for stroke patient care at home.

## **CONCLUSION**

Based on research on the level of family knowledge about home care for stroke patients that has been conducted in the stroke unit of Dr. Soedomo Trenggalek Hospital, it can be concluded that the characteristics of families who care for family members who have strokes in the stroke unit of Dr. Soedomo Trenggalek Hospital are mostly aged 31-59 years, male,

self-employed and have a last education of junior high school and high school. In addition, most families do not have experience in caring for family members who have strokes, most get information about stroke patient care and most of the sources of information are obtained from nurses/health workers. And most have a sufficient level of knowledge.

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**Conflict of Interest** statement. There are no conflict of interest during research and release of the article.

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