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Analysis Of The Role Of Supervision Of Medicine Drinking On Compliance With Hypertension Medicine At Pegasing Puskesmas, Pegasing District, Central Aceh Regency In 2021

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ABSTRACT

Hypertension is a disease that is defined as a persistent increase in blood pressure. A person is said to have hypertension if his blood pressure is above 140/90 mmHg. Pegasing health center data shows that the largest increase in the number of hypertension cases was 1,115 cases in 2018, 1,074 cases in 2019, 1.15 cases in 2020. The largest number of hypertension cases that recovered after treatment experienced an increase in 2018 which was 1056 cases compared to 2019 which was 1032 cases and in 2020 as many as 1077 cases, but again decreased in 2020 as many as 1077. The purpose of this study was to analyze the role of drug-taking supervision on adherence to taking hypertension medicine at the Pegasing Public Health Center, Pegasing District, Central Aceh Regency. The research design used quantitative methods, analytic surveys were conducted with a cross sectional approach. The population in this study were 95 people with hypertension who came for treatment at the Pegasing Public Health Center. sample using purposive sampling system as many as 95 patients. data analysis using uvariant, bivariant and multivariant analysis. The results of this study indicate that there is an influence between education variables p = 0.000, knowledge p = 0.000, distance of residence p = 0.000, emotional support p = 0.000, duration of taking medication p = 0.000 and health education p = 0.005. while the dominant factor influencing adherence to taking hypertension medication was duration of taking medication p=0.017<0.005 and 90% CI=2.088-1614.65. The conclusion of this study is that there is an effect of education, knowledge, distance from residence, emotional support, duration of taking medication and health education on adherence to taking hypertension medication at the Pegasing Public Health Center, Pegasing District, Aceh Tenagh Regency. It is suggested to the Pegasing Health Center to further improve the performance of health workers in implementing policies and intervening in adherence to taking hypertension medication and PMO so that the objectives of the program are implemented and are expected to reduce the number of hypertension cases.

INTRODUCTION

Hypertension is a disease defined as a persistent increase in blood pressure. Generally, a person is said to have hypertension if the blood pressure is above 140/90 mmHg. Hypertension is divided into two types, namely primary hypertension (essential) and secondary hypertension. Hypertension is triggered by several risk factors, such as genetic factors, obesity, excess sodium intake, dyslipidemia, lack of physical activity, and vitamin D deficiency. The prevalence of hypertension diagnosed by doctors in Indonesia is 25.8% and Yogyakarta is the third largest hypertension prevalence in Indonesia. The prevalence rate of hypertension is known to increase with increasing age and the prevalence tends to be higher in people with low levels of education or people who do not work (Sudarsono et al., 2017). The pattern of disease in Indonesia has undergone an epidemiological transition over the last two decades, from infectious diseases that were originally the main burden to non-communicable diseases. This tendency increases and begins to threaten from a young age. The main non-communicable diseases include hypertension, diabetes mellitus, cancer, and chronic obstructive pulmonary disease (KemenKes, 2015). Health development is essentially an effort carried out by all components of the Indonesian nation which aims to increase awareness, willingness, and ability to live healthy for everyone in order to realize the highest degree of public health, as an investment for the development of socially and economically productive human resources. economical. The success of health development is largely determined by the continuity between program and sector efforts, as well as continuity with the efforts that have been implemented in the previous period (Wua et al., 2021). Efforts to realize health development in Indonesia, carried out based on the Strategic Plan of the Ministry of Health 2015-2019 are: Maternal and child health, infant and toddler mortality, school age and youth, working age and old age, community nutrition, infectious diseases, non-communicable diseases, health environment, mental health and access and quality of health services. Infectious diseases in the 2015-2019 Ministry of Health Strategic Plan stated that priority is still focused on Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS), Pulmonary Tuberculosis (pulmonary TB), Malaria, Dengue Fever, Influenza and Bird Flu (Kemenkes, 2015). Hypertension is a condition of increasing systolic blood pressure of more than 140 mmHg and diastolic more than 90 mmHg after two separate measurements. Hypertension can be classified into two types, namely primary or essential hypertension whose cause is unknown and secondary hypertension which can be caused by kidney disease, endocrine disease, heart disease, and kidney disorders. Hypertension often causes no symptoms, while persistently high blood pressure over a long period of time can cause complications (Mardiana, 2021). Therefore, hypertension needs to be detected early, namely by checking blood pressure regularly (Nuraini, 2015)). The incidence of hypertension

worldwide reaches more than 1.3 billion people, which represents 31% of the world's adult population, which has increased by 5.1% greater than the global prevalence in 2000-2010. In the same year, the incidence of hypertension was higher in people in developing countries than in developed countries, even nearly 75% of patients with hypertension lived in developing countries (Mills, 2016) and an increase of 8.1%. Meanwhile, according to the results of the 2013 Riskesdas, the incidence of hypertension in Indonesia is ranked 6th out of 10 categories of chronic non-communicable diseases. The prevalence of hypertension in Indonesia obtained from the results of blood pressure measurements in people aged 18 years has decreased from 31.7% in 2007 to 25.8% (Arum, 2019). Treatment adherence is a health behavior itself that is influenced by many factors. The proportion of people with hypertension in Indonesia, especially Palembang is still quite high and this proportion continues to increase every year. One of the efforts that can be done to reduce the morbidity rate of hypertension is the consumption of antihypertensive drugs, but there are still few patients who adhere to this treatment. Thus, research on the determinants of patient compliance in treatment of hypertension and how it affects the control of patient's blood pressure is a fundamental aspect to be studied as an effort to find and determine better prevention and therapy strategies (Liberty et al., 2017).

Compliance with taking medication in patients with hypertension is very important because taking antihypertensive drugs regularly can control the blood pressure of people with hypertension. So that in the long term the risk of damage to important organs of the body such as the heart, kidneys, and brain can be reduced. According to the WHO report in 2003, the average patient adherence to long-term therapy for chronic diseases in developed countries is only 50% while in developing countries, the number is even lowerstable limit (Mutmainah & Rahmawati, 2010). Antihypertensive drugs play a role in reducing the incidence of complications that can occur due to unstable blood pressure in patients with hypertension. Success in the treatment of hypertension sufferers is influenced by many factors, one of which is the patient's compliance factor in taking medication. Compliance with hypertension patients in taking medication can control their blood pressure in a stable state. Low compliance is an inhibiting factor for good control (Anwar & Masnina, 2019). The success of treatment in hypertensive patients is influenced by several factors, one of which is compliance in taking medication, so that hypertensive patients can control blood pressure within normal limits. However, 50% of hypertensive patients do not comply with the advice of health workers to take medication, which causes many hypertensive patients to be unable to control their blood pressure and lead to the patient's death. Patient compliance in taking medication can be measured using various methods, one of the methods that can be used is the MMAS-8 Scale (Morisky Medication Adherence Scale) which consists of three aspects, namely the frequency of forgetting to take drugs,

intentionally stopping taking drugs without the medical team knowing, ability to control themselves to keep taking drugs (Udayana, 2013).

Based on the report on the number of Hypertension at the Pegasing Health Center, Pegasing District, Central Aceh Regency, it was found that the largest significant increase in hypertension was 1,115 cases in 2018, 1,074 cases in 2019, 1,115 cases in 2020. The largest number of hypertension cases that recovered after treatment had increased in 2018 as many as 1056 cases compared to 2019 of 1032 cases and in 2020 as many as 1077 cases, but again decreased in 2020 as many as 1077. The largest drop out cases of hypertension treatment occurred in 2018 as many as 59 cases of the largest number of hypertension cases of 59 cases and the smallest occurred in 2020 as many as 38 cases of treatment drop out.

The American Dietetic Association (ADA) states that diet can lower blood pressure and also lower the risk of heart disease and stroke. The low-salt diet recommended by doctors follows the principles of the DASH diet. Dietary Approches to Stop Hypertension (DASH) is a diet therapy recommended by the American Heart Association (AHA). The results of a study in the United States conducted by Scott L. Hummel and colleagues in 2012 showed that blood pressure before diet therapy was 155/79 mmHg decreased to 138/72 mmHg after diet therapy. The results of research in Indonesia conducted by Heryudarini Harahap in 2009 showed that the modified DASH group for Indonesians accompanied by counseling played a role in weight loss of 3.7 kg and decreased systolic blood pressure of 11.7 mmHg and diastolic 9.3 mmHg in pre-pregnancy subjects. obese hypertension(Hairunisa, 2014).

METHODS

The research design used is an analytical survey with a Cross Sectional approach to analyze the relationship between the independent variable (independent) and the dependent variable (Irmawartini 2017). The purpose of the study was to analyze the influence of the role of drug taking supervision on adherence to taking hypertension medication at the Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021.

This research was carried out at the Pegasing Health Center, Pegasing District, Central Aceh Regency. The population is the entire research subject. The population in this study were hypertensive patients who came for treatment at the Pegasing Health Center, Pegasing District, Central Aceh Regency as many as 95 people.

RESULTS AND DISCUSSION

Characteristics of Respondents

Based on the results of the research, the identity of the respondents including gender, age and education can be seen in the following table:

Table 1. Distribution of Respondents Characteristics by Gender, Age and Education at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Age	Frequency (f)	Percentage (%)
1	33-38 Years	15	15,8
2	39-44Years	29	30,5
3	45-50 Years	32	33,7
4	51-56 Years	13	13,3
5	> 56 Years	6	6,3
No	Gender	**f**	**%**
1	Man	23	24,2
2	Woman	72	75,8
	Total	**95**	**100,0**

Table 1 shows that of the 95 respondents studied, the majority of respondents aged 45-50 years were 32 people (33.7%) and the minority aged > 56 years were 6 people (6.3%). Meanwhile, the majority gender is female as many as 72 people (75.8%) and the minority is male as many as 23 people (24.2%).

Univariate Analysis

After conducting research on the Analysis of the Role of Drug Taking Supervision on Compliance with Hypertension Taking Medicines at the Pegasing Health Center, Pegasing District, Central Aceh Regency, the following results were obtained:

Education

The results of research based on education can be seen in table 4.2 below:

Table 2. Distribution of Respondents' Education in Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Education	f	%
1.	Basic (SD-SMP)	32	33,7
2.	Intermediate (high school)	43	45,3
3.	Height (D3-S1)	20	21,1

	Total	95	100,0

Table 4.2 shows that of the 95 respondents studied, the majority have secondary education (SMA) as many as 43 people (45.3%) and the high minority (D3-S1) as many as 20 people (21.1%).

Knowledge

The results of research based on knowledge can be seen in table 4.3 below:

Table 3. Knowledge Distribution of Respondents at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Knowledge	f	%
1	Not enough	42	44,2
2	Enough	28	29,5
3	Well	25	26,3
	Total	95	100,0

Table 3 shows that of the 95 respondents studied, the majority have less knowledge as many as 42 respondents (44.2%) and the minority have good knowledge as many as 25 people (26.3%).

Residence Distance

The results of the study based on the distance of residence can be seen in table 4.4 below:

Table 4. Distribution of Respondents' Residence Distance at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Residence Distance	f	%
1	Near < 100 Km	24	25,3
2	Distance > 100 Km	71	74,7
	Total	95	100,0

Table 4 shows that of the 95 respondents studied, the majority had a distance of more than 100 km as many as 71 people (74.7%) and the minority had a distance of close to < 100 km as many as 24 people (25.3%).

Emotional Support

The results of research based on emotional support can be seen in table 4.5 below:

Table 5. Distribution of Respondents' Emotional Support at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Emotional Support	f	%
1	Not enough	53	55,8
2	Well	42	44,2
	Total	**95**	**100,0**

Table 4.5 shows that of the 95 respondents studied, the majority had less emotional support as many as 53 people (55.8%) and the minority had good emotional support as many as 42 people (44.2%).

Duration of taking medicine

The results of the study based on the duration of taking the drug can be seen in table 4.6 below:

Table 6. Distribution of Respondents Taking Drugs at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Duration of taking medicine	f	%
1	Not enough	76	80,0
2	Well	19	20,0
	Total	**95**	**100,0**

Table 6. shows that of the 95 respondents studied, the majority with the duration of taking medication less as many as 76 people (80.0%) and the minority with the duration of taking good medication as many as 19 people (20.0%).

Health Education

The results of research based on health education can be seen in table 4.7 below:

Table 7. Distribution of Respondents Health Education at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Health Education	f	%
1	Not enough	52	54,7
2	Well	43	45,3
	Total	**95**	**100,0**

Table 7 shows that of the 95 respondents studied, the majority with less health education are 52 people (54.7%) and the minority with good health education are 43 people (45.3%).

Medication Compliance

The results of the study based on medication adherence can be seen in table 4.8 below:

Table 8. Distribution of Respondents Medication Compliance at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Medication Compliance	f	%
1	Not obey	62	65,3
2	Obey	33	34,7
	Total	**95**	**100,0**

Table 8 shows that of the 95 respondents studied, the majority of non-adherent medication adherence were 62 people (65.3%) and 33 people (34.7%).

Bivariate Analysis

After the univariate analysis of the results of the study was carried out by bivariate analysis, namely by using the Chi-Square test, the relationship between the independent variable and the dependent variable with the statistical significance limit of p value (0.05), then the following results were obtained:

The results of the study with cross tabulation of education on adherence to taking hypertension medication can be seen in table 4.9 below:

Table 9. The Effect of Education on Compliance with Taking Hypertension Drugs at the Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

Education	Medication Compliance				Total		Nilai p
	Not obey		**obedient**				
	f	%	f	%	f	%	
Basic (SD-SMP)	15	15,8	17	17,9	32	33,7	
Intermediate (high school)	27	28,4	16	16,8	43	45,3	0,000
Height (D3-S1)	20	21,1	0	0,0	20	21,1	
Total	**62**	**65,3**	**33**	**34,7**	**95**	**100,0**	

Based on table 9, it can be seen that from 95 respondents with low education (SD-SMP) with medication adherence, 15 people did not comply (15.8%) and 17 people obeyed (17.9%). Meanwhile, those with secondary education (SMA) with medication adherence were not compliant as many as 27 people (28.4%)

and 16 people were compliant (16.8%). Meanwhile, those with higher education (D3-S1) with adherence to medication did not comply as many as 20 people (21.1%) and did not comply.

The results of the Chi-Square Analysis in the Continuity Correction test table between the effect of education on adherence to taking hypertension medication, it is known that the probability value (0.000) < = 0.05, so it can be said that education has a significant effect on adherence to taking hypertension medication at the Puskesmas. Pegasing, Pegasing District, Central Aceh Regency.

The results of the study with cross tabulation of knowledge on adherence to taking hypertension medication can be seen in table 4.10 below:

Table 10. Effect on Compliance with Hypertension Medication at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

Knowledge	Medication Compliance				Total		Nilai p
	Not obey		obedient				
	f	%	f	%	f	%	
	17	17,9	25	26,3	42	44,2	0,000
Not enough	26	27,4	2	2,1	28	29,5	
enough	19	20,0	6	6,3	25	26,3	
Well	**62**	**65,3**	**33**	**34,7**	**95**	**100,0**	

Based on table 10, it can be seen that of the 95 respondents who have less knowledge with adherence to taking medication, 17 people are not compliant (17.9%) and 25 people are obedient (26.3%). Meanwhile, 26 people (27.4%) who had sufficient knowledge with adherence to taking medication did not comply and 2 people (2.1%). While those with good knowledge with adherence to medication were not compliant as many as 19 people (20.0%) and 6 people were obedient (6.3%).

The results of the Chi-Square analysis in the attachment of the Continuity Correction test table between the effect of knowledge on adherence to taking hypertension medication, it is known that the probability value is (0.000) < = 0.05, so it can be concluded that knowledge has a significant effect on adherence to taking hypertension medication at the Puskesmas. Pegasing, Pegasing District, Central Aceh Regency.

The results of the study with cross tabulation of residence distance on adherence to taking hypertension medication can be seen in table 4.11 below:

Table 11. The Effect of Living Distance on Compliance with Taking Hypertension Drugs at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

Residence Distance	Medication Compliance				Total		Nilai p
	Not obey		obedient				
	f	%	f	%	f	%	
Distance > 100 Km	58	61,1	13	13,7	71	74,7	
Near < 100 Km	4	4,2	20	21,1	24	25,3	0,000
Total	62	65,3	33	34,7	95	100,0	

Based on table 11, it can be seen that of the 95 respondents who live far away > 100 Km with non-adherent medication adherence as many as 58 people (61.1%) and 13 people who obey (13.7%). Meanwhile, those who live close to < 100 Km with adherence to taking medication are not compliant as many as 4 people (4.2%) and obedient as many as 20 people (21.1%).

The results of the Chi-Square analysis in the attachment of the Continuity Correction test table between the effect of residence distance on adherence to taking hypertension medication, it is known that the probability value is (0.000) < = 0.05, so it can be concluded that the distance of residence has a significant effect on drinking compliance. hypertension medication at the Pegasing Health Center, Pegasing District, Central Aceh Regency.

The results of the study with cross tabulation of emotional support on adherence to taking hypertension medication can be seen in table 4.12 below:

Table 12. The Effect of Emotional Support on Compliance with Taking Hypertension Drugs at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

Emotional Support	Medication Compliance				Total		Nilai p
	Not obey		obedient				
	f	%	f	%	f	%	
Not enough	26	27,4	27	28,6	53	55,8	
Well	36	37,9	6	6,3	42	44,2	0,000
Total	62	65,3	33	34,7	95	100,0	

Based on table 12, it can be seen that of the 95 respondents who had less emotional support with non-adherent medication adherence as many as 26 people (27.4%) and 27 people (28.6%) obedient. Meanwhile, 36 people (37.9%) and 6 people (6.3%).

The results of the Chi-Square analysis in the attachment of the Continuity Correction test table between the effect of emotional support on adherence to taking hypertension medication, it is known that the

probability value (0.000) < = 0.05, so it can be concluded that emotional support has a significant effect on adherence to taking hypertension medication. at the Pegasing Health Center, Pegasing District, Central Aceh Regency.

The results of the study by cross tabulating the duration of taking medication on adherence to taking hypertension medication can be seen in table 13 below:

Table 13. The Effect of Long Taking Medicines on Compliance with Taking Hypertension Drugs at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

Duration of taking medicine	Medication Compliance				Total		Nilai p
	Not obey		obedient				
	f	%	f	%	f	%	
Not enough	61	64,2	15	15,8	76	80,0	
Well	1	1,1	18	18,9	19	20,0	0,000
Total	62	65,3	33	34,7	95	100,0	

Based on table 4.13, it can be seen that of the 95 respondents who took medication for a long time, 61 people (64.2%) were not compliant and 15 people were compliant (15.8%). While the long time to take good medicine with adherence to medication was not compliant as many as 1 person (1.1%) and obedient as many as 18 people (18.9%).

The results of the Chi-Square analysis in the attachment of the Continuity Correction test table between the effect of long taking medication on adherence to taking hypertension medication, it is known that the probability value (0.000) < = 0.05, so it can be concluded that the duration of taking medication has a significant effect on adherence to drinking. hypertension medication at the Pegasing Health Center, Pegasing District, Central Aceh Regency.

The results of the study with cross tabulation of health education on adherence to taking hypertension medication can be seen in table 4.14 below:

Table 14. Effect of Health Education on Compliance with Taking Hypertension Drugs at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

Health Education	Medication Compliance				Total		Nilai p
	Not obey		obedient				
	f	%	f	%	f	%	

Not enough	27	28,4	25	26,3	52	54,7	
Well	35	36,8	8	28,4	43	45,3	0,005
Total	**62**	**65,3**	**33**	**34,7**	**95**	**100,0**	

Based on table 4.14, it can be seen that of the 95 respondents who lacked health education with adherence to taking medication, 27 people did not comply (28.4%) and 25 people obeyed (26.3%). Meanwhile, 35 people (36.8%) had good health education with adherence to medication and 8 people (28.4%) complied.

The results of the Chi-Square analysis in the attachment of the Continuity Correction test table between the effect of health education on adherence to taking hypertension medication, it is known that the probability value (0.005) < = 0.05, so it can be concluded that health education has a significant effect on adherence to taking hypertension medication. at the Pegasing Health Center, Pegasing District, Central Aceh Regency.

Multivariate Analysis

The results of the multivariate analysis test with logistic regression test are in accordance with the following table:

Stage 1 (Enter Method)

Table 4.15. Results of the Logistics Regression Test Analysis of the Role of Drug Taking Supervision on Compliance with Hypertension Taking Medicines at the Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Variable	B	S.E.	Wald	df	Sing	Exp(B)	95%CI
1	Education	2.768	1.448	3.652	1	0.097	0.063	0.004-1.073
2	Knowledge	0.335	0.853	0.154	1	0.695	0.047	0.135-3.805
3	Residence Distance	3.064	1.846	2.756	1	0.056	1.716	0.001-1.739
4	Emotional Support	2.490	1.468	2.876	1	0.090	0.083	0.005-1.473
5	Duration of taking medicine	4.207	1.815	5.370	1	0.020	67.140	1.913-2356.58
6	Health Education	3.559	2.339	2.315	1	0.128	0.028	0.000-2.788

Stage 2 (Backward Stepwise Method (Conditional)

Based on the logistic regression test, stage 2 (Backward Stepwise Method (Conditional) to determine the dominant influence of the independent variable with the dependent variable having a p value = <0.05, namely education, knowledge, distance of residence, emotional support, duration of taking medication and health education .

Table 16. Results of the Logistics Regression Test Analysis of the Role of Drug Administration Supervision on Compliance with Hypertension Medication at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

No	Variable	B	S.E.	Wald	df	Sing	Exp(B)	95%CI
1	Residence Distance	3.039	1.319	5.307	1	0,021	1.048	0.006-1.516
2	Duration of taking medicine	4.062	1.697	5.731	1	0.017	58.065	2.088-1614.65

Based on the results from table 4.16. From the results above, the most dominant factor that affects adherence to taking hypertension medication is the variable duration of taking medication p = 0.017 < 0.05 and 95% CI = 2.088-1614.65 meaning that the duration of taking medication has an effect on adherence to taking hypertension medication at the Pegasing Health Center, Pegasing District. Central Aceh District.

The result of the calculation of the logistic regression equation above is known that the probability or predicted value in this study is 0.994596. This means that together the variables of education, knowledge, distance of residence, emotional support, duration of taking medication and health education contribute or all have an influence on adherence to taking hypertension medication at the Pegasing Health Center, Pegasing District, Central Aceh Regency by 0.994596 or 99, 4%.

DISCUSSION

The Effect of Education on Compliance with Taking Hypertension Drugs at the Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

Education means the guidance given by someone to the development of others towards certain ideals that determine human beings to act and fill life to achieve safety and happiness. Education is needed to get information, for example things that support health so that it can improve the quality of life. Education can affect a person, including a person's behavior regarding lifestyle, especially in motivating attitudes to

participate in development in general, the higher a person's education, the easier it is to receive information. (Sari & Wiyono, 2018).

Education is an effort to develop personality and abilities that can be obtained inside and outside school which lasts a lifetime. Education can affect the learning process, this is because the higher the individual's education will make it easier for the individual to receive information both from experience and from social media information. Psychosocial factors are important determinants of public health. A person's low education is often associated with the incidence of primary and secondary hypertension given the lack of knowledge and information related to health behavior and lifestyle. Limited knowledge related to the dangers of a bad lifestyle is associated with a lack of understanding of the long-term impact of a bad lifestyle

According to the assumptions of the researcher based on the theory and the research results obtained there is no gap because PMO still has low and middle education, this shows that the higher a person's education, the easier it is to receive information so that the more knowledge they have. On the other hand, lack of education will hinder the development of one's attitude towards the values that have just been introduced, so transferring and changing old habits requires the right approach strategy.

The Effect of Knowledge on Compliance with Taking Hypertension Drugs at the Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

According to WHO (2002) knowledge can be interpreted as a collection of information that is understood, obtained from the learning process during life and can be used at any time as a means of adjustment, both to oneself and the environment. Knowledge of an object can be obtained from the experience of teachers, parents, friends, books and mass media. It can be concluded from the theory that the knowledge of hypertension sufferers can be a good teacher for themselves, with the knowledge possessed will affect the compliance of hypertension sufferers in undergoing treatment. Patients who have high knowledge tend to be more obedient to treatment than patients with low knowledge.

Factors that influence a person's knowledge are internal factors from within oneself, for example intelligence, interests, physical conditions. External factors are factors from outside oneself, such as family, community, facilities. And learning approach factors, learning effort factors, for example strategies and methods in learning(Nuqul, 2007))

Good knowledge related to lifestyle, including diet (diet) is one of the non-pharmacological treatments that can be carried out by patients. Piresi & Mussi (2012) stated that most patients stated that it was difficult to change their diet to be healthy due to lack of choices, they consumed available food because of the minimal

cost to choose healthy foods. Diet is the most important thing in disease control, various diseases can arise due to food factors. Weight management in hypertensive patients can minimize the risk of complications.

According to research, the majority of respondents have a low level of knowledge and are not obedient in undergoing treatment. This is because respondents do not understand more about hypertension and do not know how to treat hypertension properly and the dangers of not routinely controlling blood pressure so that they are more obedient in taking treatment and complying with doctor's recommendations to take medication regularly causing the disease to continue to recur and take long treatment.

Based on the researcher's assumption that there is no gap between the theory and the research results obtained. Lack of knowledge. By learning both formally and non-formally, humans will be able to increase intellectual maturity and have good knowledge as well. With the knowledge obtained, hypertensive patients will know the benefits of advice or advice from health workers so that they will be motivated to be more obedient in undergoing treatment recommended by health workers.

The Effect of Living Distance on Compliance with Taking Hypertension Drugs at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

The affordability of access to health services is how easy or difficult it is for someone to reach a health service place. Niven (2002) states that one of the factors that influence medication adherence is an enabling factor, which consists of the availability of health facilities, the ease of accessing health facilities as well as socio-economic and cultural conditions. The low use of health facilities such as Puskesmas, hospitals and so on, is often blamed or the cause is thrown at the access factor to health services (both travel access and distance to health facilities). The affordability of access referred to in this study is seen in terms of distance, travel time and ease of transportation to reach health services. The farther the distance from the patient's house from the health service and the difficulty of transportation, the more it will be related to medication adherence.

Based on the theory that distance is very supportive of the use of services, the closer a person lives, the easier it is to access to get services at the health center and vice versa if the long distance takes time to reach the destination so they are lazy to come for control and take medicine if their medicine has run out and is added. again they feel bored with the treatment they are undergoing, so they will come for treatment if they feel any complaints.

The Effect of Emotional Support on Compliance with Taking Hypertension Drugs at the Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

Family support greatly affects patient compliance in carrying out a hypertension diet. The higher the family support obtained, the patient will be more obedient and conversely the lower the family support obtained, the level of compliance will be less. This assumption is supported by research by (Indriastuti et al., 2021). that the level of family support can affect efforts to control hypertension. The higher the level of family support, the better the efforts to control hypertension, and vice versa, the lower the family support, the less efforts to control hypertension.

Friedman's theory (1998) also explains that the family has several support functions, namely: emotional support, information support, reward support, and instrumental support. In theory Friedman (1998) explains that emotional support is support that is manifested in the form of attachment, concern, and expressions of sympathy so that the belief arises that the individual concerned is cared for. The theory above is supported by research by Nurrohman (2017), where the emotional support obtained p value = 0.000 where respondents who are obedient and have family support are 17 people (89%) while respondents who are obedient and do not receive family support are 1 person (7%). .

The researcher assumes that the family as a supervisor and encouragement to the patient has a very large role in the healing process of a person, in this case a family member who has hypertension. Based on the theory that emotional support is very supportive of the use of services, the better the support, such as family support, husband's support and others, the easier it is to get services at the health center and vice versa if emotional support is not good, respondents will not comply with taking hypertension drugs.

The Effect of Long Taking Medicines on Compliance with Taking Hypertension Drugs at the Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

The duration of therapy for hypertension of patients affects adherence to taking medication, but the effect is not significant, duration of therapy is related to the level of knowledge of patients about what diseases can occur if hypertension is not maintained properly. The patient's level of knowledge is also related to prolanis activities that are carried out routinely every month. For participants who regularly participate every month must have a fairly good level of knowledge about the disease because routine monthly prolanis activities in addition to examinations also include (1) medical consultations; (2) education of prolanis participants; (3) Reminder SMS gateway; (4) home visits; (5) club activities (gymnastics). With these activities, it can increase the patient's knowledge about their disease (Rosdiana, Ayu et al., 2017).

Based on the theory that the duration of taking medication is very supportive of adherence to taking medication the longer the duration of taking medication that is run by the respondent, the more bored the

respondent will experience and vice versa if the time for taking medication is short, the respondent's medication adherence will be better and accelerate the respondent's healing of a disease.

The Effect of Health Education on Compliance with Taking Hypertension Drugs at the Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

According to researchers in the field, there is a strong relationship between health education and adherence to treatment, the role of health workers can influence adherence behavior in undergoing treatment. This happens because most of the respondents stated that they received good service from health workers, this good service caused positive behavior. The behavior of the officers who are friendly and immediately treat patients without waiting too long, as well as patients being given an explanation about the drugs given and the importance of taking medication regularly is a form of support from health workers that can affect the patient's compliance behavior.

Based on the theory that health education strongly supports medication adherence to respondents if the health education provided by health workers is good and clear, the respondent's motivation to take medication will be regular, on the other hand, if there is a lack of health education by health workers towards respondents, the respondent's medication adherence will be will not be good.

Dominant Factors Affecting Compliance with Taking Hypertension Drugs at Pegasing Health Center, Pegasing District, Central Aceh Regency in 2021

According to the researcher's assumption, the duration of taking medication also has an influence on compliance with the minimum medication for hypertension because taking the drug for a long time makes the respondent bored so that the drug is not regularly taken by the respondent and makes their disease worse. Based on the theory that the duration of taking medication is very supportive of adherence to taking medication the longer the duration of taking medication that is run by the respondent, the more bored the respondent will experience and vice versa if the time for taking medication is short, the respondent's medication adherence will be better and accelerate the respondent's healing of a disease.

CONCLUSION

It is hoped that the Drug Drinking Supervisor (PMO) will be more active in carrying out their duties so that the community can be controlled in compliance with taking hypertension medication, so that the community does not cause complications of other diseases.

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