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Humanistic Network for Science and Technology The Relationship Between Self-Concept

with Depression Degree in Hypertensive Patient Baharuddin\*, Israwati\* \*Department of

Nursing, Health Polytechnic of Ministry of Health in Makassar, Indonesia Email:

frans.baharuddin@yahoo.co.id ABSTRACT In hypertensive patients, a negative self-

concept (body-image, self-ideal, self-esteem, self-role and self-identity) will trigger a

depression. 2 The purpose of this study was to analyze the relationship between

selfconcept with the degree of depression in hypertensive patients at the Masalle

Community Health Center, Masalle Sub District, Enrekang District. The subjects of this 6

cross sectional study were 71 hypertensive patients selected by purposive sampling

technique. 2 Data were collected through questionnaire, then analyzed descriptively in

the form of frequency and percentage, then continued with Chi square test, and ended

with multiple linear regression test. 5 The results of data analysis show that body-image

and self-esteem is associated with the degree of depression in hypertensive patients. Key

words: Depression, Hypertension, Self-concept INTRODUCTION People who have a

negative self-concept will see themselves as weak, powerless, incapable, incompetent,

unsuccessful, unfortunate, unattractive, disliked, and deprived of attraction to life. They

tend to feel pessimistic in the face of problems. Conversely, people with positive self-

concept will be more optimistic, confident and always positive about everything, including

the problems they are facing. Self-concept will affect people with chronic disease in

assessing themselves (Saraswati, 2009). In Indonesia, hypertension is the third cause of

death (6.8%), after stroke (15.4%) and tuberculosis (7.5%) (Depkes RI, 2008). Hypertension

can lead to both chronic physical and psychological complications. Physically, hypertension

causes adverse effects on the blood vessels of the heart, kidneys, brain and eyes. Research

in the UK reported that people with hypertension have a greater risk of panic, stress, and

depression; Both occurring slowly and suddenly (Woolston, 2009 cit Sukmandari,

2010). Patients with chronic hypertension will show changes in daily behavior, sometimes they will not eat again and are very disciplined in maintaining their diet for fear of increased blood pressure. They always feel worried and tend to despair because of their circumstances, insomnia, do not follow nurse advice, and always look sad and moody. This is a manifestation of the depression they experience, and this can inhibit the healing process. During 2015, there were 427 hypertensive patients who visited Masalle Community Health Center, Masalle District, Enrekang District. Results of preliminary studies on 86 hypertensive patients, found 1 (1.1%) people who experienced depression at moderate levels and 37 (43.02%) people experience depression at a mild level. Based on the above explanation, it is deemed necessary to research about the relationship between RESEARCH ARTICLE URL of this article: <http://heanoti.com/index.php/hn/article/view/hn1104>

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**Humanistic Network for Science and Technology** selfconcept (body-image, ideal self, self-esteem, self-role and self-identity) with the degree of depression in hypertensive patients at Masalle Community Health Center, Masalle District, Enrekang Regency,

Indonesia. **METHODS** The population of this cross-sectional study was all hypertensive patients at Masalle Community Health Center, Masalle District, Enrekang Regency,

Indonesia; during January to April 2016, with a population size of 86 people. **5 The sample size was** 71 people selected by purposive sampling technique. Data were collected through

questionnaire which was modified from questionnaire made by Saraswati (2009), then analyzed descriptively in the form of frequency and percentage because it was categorical

(Nugroho, 2014), then continued with Chi square test, and ended with **1 Multiple logistic regression test.** **RESULTS** Table 1. Distribution of body-image

Body-image	Frequency	Percentage	Disturbed	Not disturbed	Total
	16	53.3	14	46.7	30

Self-ideal	Frequency	Percentage	Disturbed	Not disturbed	Total
	8	26.7	22	73.3	30

Self-	Frequency	Percentage	Disturbed	Not disturbed	Total
	8	26.7	22	73.3	30

esteem Self-esteem Frequency Percentage Disturbed Not disturbed 15 15 50.0

50.0 Total 30 100.0 Table 4. Distribution of self-role Self-role Frequency

Percentage Disturbed Not disturbed 15 15 50.0 50.0 Total 30 100.0 Table 5.

Distribution of self-identity Self-identity Frequency Percentage Disturbed Not

disturbed 18 12 60.0 40.0 Total 30 100.0 Table 6. Distribution of depression

degree of hypertensive patients Depression level Frequency Percentage

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Humanistic Network for Science and Technology Depressed Not Depressed 22 8

73.3 26.3 Total 30 100.0 Tabel 7. Result of 1 Chi square test (dependent variable:

depression degree of hypertensive patient) Independent variable OR P Value Body-

image Self-ideal Self-esteem Selfrole Self-identity 0.010 0.014 0.008 1.247 1.252

0.039 0.016 0.035 0.002 0.034 The results of Chi square test (Table 7) showed that the

relationship between body-image, self-ideal, selfesteem, self-role, and self-identity with the

degree of depression; each had p-value <0.25 so that all these variables could be included

in further analysis that 7 is multiple logistic regression test. Table 8. Final model of 1

multiple logistic regression test Variables B Wald OR (Exp.β) 95% CI Value of p Self-

portrait Self-esteem -2.87 -3.08 4.96 5.82 0.01 0.03 1.04-2.60 1.07-2.86 0.039

0.035 The results of this last test showed that body-image and self-esteem were

dominant factors associated with the degree of depression in hypertensive patients (Table

8). DISCUSSION The results showed that there was a relationship between body-image

and depression degree in hypertensive patients. Body-image is part of a self-concept that

includes attitudes and experiences related to the body, including views of masculinity and

femininity, physical gait, endurance, and capability. Stressors that can cause changes in

body image are stroke, amputation, blindness, aging, pregnancy, mastectomy,

hypertension, obesity, physical changes in adolescents and others. Factors of the disorder

of body-image, namely loss of body parts, changes in development and anxiety. These

factors 3 can cause a person to experience depression (Stuart, 2007). Hadi (2004) states

that loss is a major factor underlying the onset of depression. Thus, a person with a disease, including hypertension, will tend to experience changes in body-image, so they are more susceptible to depression. 1 The results showed that there is a relationship between self-ideal with the degree of depression in hypertensive patients. Self-ideal is 3 the individual's perception of how he or she should behave according to personal standards, which are shaped by the image of the desired type, the number of aspirations, values and goals to be achieved, based on the norms of society and the individual effort to fulfill. Ideal self-influenced by culture, family and individual abilities, 1 should not be too high, but should be sufficient to provide continuous support to self-respect. Factors 3 that affect the ideal self, among others, loss of hope, desire and ideals. Factors can cause a person to get depressed (Stuart, 2007). From the description above can be said that the self-ideal plays 1 a major role in the occurrence of depression in patients with hypertension. The results showed that there is a relationship between self-esteem with the degree of depression in hypertensive patients. Self-esteem is a personal assessment of the attainment of self by analyzing how far the behavior fulfills the ideal of self; One's view of himself as a whole is positive or negative, "most of the time i feel really good about my self". Self-esteem is obtained from self and others who are loved, cared for, and respect from others. Factors that cause disturbances in self-esteem include interpersonal relationships 7 that are not harmonious, failure of development, failure to achieve life goals and failure in following moral rules

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Humanistic Network for 1 Science and Technology (Stuart, 2007). Saraswati (2009)

reported that self-concept (self-esteem included in it) correlates with the degree of depression in hypertensive patients. The results show that there is a relationship between self-role with the degree of depression in hypertensive patients. The role is a set of behavioral patterns expected by the social environment, related to the function of individuals within social groups. Self-role disturbance can be caused by the loss of multiple

roles and the inability to follow the moral rules (Stuart, 2007). 3 The signs and symptoms

of depression include loss of perspective in life, outlook on life, work and family becomes

unclear. The symptoms above can cause a person to experience depression (Hawari,

2011). 1 The results showed that there is a relationship between self-identity with the

degree of depression in hypertensive patients. Identity is self-awareness derived from

observation and judgment, which is the synthesis of all aspects of self, as a whole unity,

associated with feelings that are different from others, and related to gender (Kusumawati

& Hartono, 2011). Causes of self-identity disorders include changes in development,

trauma, gender and culture. The confusion of self identity 1 can be a cause of mental

disorders in adolescents such as confusion, identity, low self-esteem, depression, suicide

and others (Dalami, 2009). CONCLUSION AND SUGGESTION Based on the results of

this study concluded that body-image, self-ideal, self-esteem, self-role and self-identity

relates to the degree of depression in hypertensive patients. Furthermore, it is suggested

that the hospital to improve health service to hypertension patient that includes physical

and psychological service, nurse identify the cause of self concept and depression disorder,

identify coping resources, help modify coping and provide counseling for client in using

constructive coping strategy. REFERENCES Depkes RI, (2008). Prevalensi Hipertensi di

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