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**AL FAJRI**

**Pengaruh Edukasi Program CERDIK Dan PATUH Berbasis Audiovisual Terhadap *Self Care* Penderita Hipertensi Diwilayah Kerja Puskesmas Rejosari Pekanbaru**

**xiii + 57 halaman + 12 tabel + 2 skema + 16 lampiran**

**ABSTRAK**

Hipertensi merupakan masalah kesehatan global yang banyak terjadi di negara berkembang, termasuk Indonesia. Data WHO (2023) menunjukkan bahwa 1,28 miliar orang usia 30-79 tahun mengalami hipertensi, dengan 46% di antaranya tidak menyadari kondisinya. Di Indonesia, prevalensi hipertensi pada penduduk usia  $\geq 18$  tahun menurun dari 34,1% (2018) menjadi 30,8% (2023). Di Provinsi Riau, prevalensi hipertensi mencapai 7,3%, dengan kepatuhan pengobatan rendah (53,6%). Studi pendahuluan di Puskesmas Rejosari menunjukkan 40% penderita tidak mengetahui program CERDIK dan PATUH serta masih mengandalkan pengobatan tradisional. Penelitian ini bertujuan menganalisis pengaruh edukasi berbasis audiovisual dari program CERDIK dan PATUH terhadap self-care penderita hipertensi. Penelitian kuantitatif ini menggunakan desain quasi-experiment dengan pretest-posttest control group design. Sampel 36 responden dipilih dengan random sampling dari populasi 4.464 penderita hipertensi. Kelompok intervensi diberikan edukasi, sedangkan kelompok kontrol tidak. Hasil analisis menunjukkan rata-rata self-care kelompok intervensi meningkat dari 82,83 (SD = 8,577) menjadi 97,00 (SD = 4,284) setelah intervensi, sementara kelompok kontrol hanya mencapai 87,11 (SD = 2,928). Uji Paired T-Test dan Independent T-Test menunjukkan perbedaan signifikan dengan p-value = 0,000 ( $< 0,05$ ). Kesimpulannya, edukasi CERDIK dan PATUH berbasis audiovisual berpengaruh terhadap peningkatan self-care penderita hipertensi. Penelitian ini diharapkan menjadi Evidence-Based Practice (EBP) dalam edukasi kesehatan dan referensi penelitian selanjutnya.

Kata kunci: Hipertensi, Self-care, Edukasi CERDIK dan PATUH Audiovisual.

Referensi: 39 (2019-2024)

**S1 NURSING STUDY PROGRAM, FACULTY OF NURSING PAYUNG STATE HEALTH  
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**Final Project, February 2025**

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***The Effect of Audiovisual-Based CERDIK and PATUH Educational Program on Self-Care of  
Hypertension Patients in the Working Area of Puskesmas Rejosari, Pekanbaru.***

**xiii + 57 pages + 12 tables + 2 schemes + 16 attachments**

**ABSTRACT**

Hypertension is a global health issue that frequently occurs in developing countries, including Indonesia. WHO data (2023) shows that 1.28 billion people aged 30-79 years suffer from hypertension, with 46% unaware of their condition. In Indonesia, the prevalence of hypertension among adults aged  $\geq 18$  years decreased from 34.1% (2018) to 30.8% (2023). In Riau Province, the prevalence of hypertension reached 7.3%, with low treatment adherence (53.6%). A preliminary study at Puskesmas Rejosari found that 40% of patients were unaware of the CERDIK and PATUH programs and still relied on traditional medicine. This study aims to analyze the effect of audiovisual-based education from the CERDIK and PATUH programs on the self-care of hypertension patients. This quantitative study employs a quasi-experimental design with a pretest-posttest control group design. A total of 36 respondents were selected using random sampling from a population of 4,464 hypertension patients. The intervention group received education, while the control group did not. The analysis showed that the average self-care score in the intervention group increased from 82.83 (SD = 8.577) to 97.00 (SD = 4.284) after the intervention, while the control group only reached 87.11 (SD = 2.928). Paired T-Test and Independent T-Test results indicated a significant difference with  $p\text{-value} = 0.000 (< 0.05)$ . In conclusion, audiovisual-based education through the CERDIK and PATUH programs significantly improved self-care in hypertension patients. This study is expected to contribute to Evidence-Based Practice (EBP) in health education and serve as a reference for future research.

**Keywords:** Hypertension, Self-care, CERDIK and PATUH Education Audiovisual.  
**Reference:** 39 (2019-2024).