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Relationship of family and self efficacy support to the rehabilitation motivation of stroke patients

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Abstract

Stroke is a common global health care problem. Life changes suddenly in a stroke patient impact psychological conditions, including patient motivation, which can interfere with the rehabilitation process after stroke. Post-stroke rehabilitation interventions are indispensable for the recovery of motor function, muscle strengthening, and prevention of other stroke complications. However, only 44% of patients adhere to the rehabilitation program. Factors such as family support and good selfefficacy are important parts of increasing motivation for post-stroke rehabilitation. The purpose of this study was to analyze the relationship between family dependence and self-efficacy with motivation for the post, stroke rehabilitation. Quantitative research with a descriptive correlational design through a cross-sectional approach and 111 post-stroke patients were undergoing post-stroke rehabilitation <1 year, including this study. Roper spearman test was used to determine the relationship between family support and self-efficacy with rehabilitation motivation for stroke patients. The analysis test in this study used the SPSS version 16 application. The results showed a strong relationship between family support and rehabilitation motivation (p = 0.000), coefficient value (r) = 0.620 and self-efficacy relationship with significant rehabilitation motivation (p = 0.000) with coefficient value (r = 0.682) with the direction of a positive relationship. Family support and self-efficacy are closely related to patient motivation in undergoing post-stroke medical rehabilitation. With better family support and selfefficacy of stroke, patients can increase patient motivation in undergoing post-stroke rehabilitation.

Keywords: family support, rehabilitation motivation, self-efficacy, stroke

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INTRODUCTION

Stroke is the second or third common cause of death and one of the leading causes of acquired disability in adults. The greatest health impact after stroke is caused by disability and long-term care for patients and families which causes patients to feel tired, saturated, stressed, and depressed (Akbar et al., 2018; Fahmi et al., 2014; Langhorne et al., 2011; Noor et al., 2017). Medical rehabilitation interventions are indispensable for the recovery of motor function, muscle strengthening, and prevention of other stroke complications. There are two thirds or about 30% of stroke patients who have motivation in undergoing post-stroke rehabilitation. This is based on the existence of boredom, disturbed psychological conditions, and lack of family support, where this also has an impact on the quality of life of stroke patients (Amelia & Harahap, 2019; Baba, et al, 2015).

Self-efficacy is an individual's belief that he can do something in certain situations successfully (Lamak & Kusnanto, 2017; Torrisi et al., 2018). Brouwer-Goossens et al., in 2018, show the level of self-efficacy of stroke patients three months after the attack has a fairly low value (33%) and significantly affect the motivation of patients in changing behavior related to their health (Brouwer-Goossensen et al., 2018). The impact of low patient motivation in carrying out rehabilitation will worsen the patient's condition and bring the patient to a state of recurrent stroke complications, aggravating disability and causing other illnesses that can even lead to death (Kamalakannan et al., 2016). Family support has a positive effect on increasing the motivation of stroke patients, increasing patient knowledge of poststroke follow-up treatment, and improving the quality of life (Dharma et al., 2018). Patients with a low level of motivation are due to a lack of family support that does not understand the main factors that inhibit rehabilitation. This study aimed to analyze the relationship between family dependence and selfefficacy with post-stroke rehabilitation motivation.

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