Jurnal Pengabdian Kolaborasi dan Inovasi IPTEKS
Volume 1, No 6 – Desember 2023
e-ISSN : 29863104

STROKE EMERGENCY HEALTH EDUCATION IN THE COMMUNITY OF PULO NYAMUK VILLAGE

Priyo Sasmito[1], Royani[1] , Ira Rustini [2], Gina Aulia [2],Shania Novena Simanjutak [2],Yasmin Shinta Dewi [2], Sumardi Robertus [2], Hopipah Mutohharoh [2]
[1]Lecturer Nursing departemen College of Health Sciences, University of ichsan Satya Tangerang, Indonesia
[2]Students of Nursing Study Program, University of Health Sciences, University of Ichsan, Tangerang, Indonesia
priothegreat2@gmail.com

Received: 07-11-2023	Revised: 08-11-2023	Approved: 12-11-2023

ABSTRAK

The prevalence of stroke every year has increased significantly, and has become the third leading cause of disability and also the third cause of death in the world. In 2015, the World Health Organization (WHO) stated that every year there are 15 million people affected by stroke and become the leading cause of death after ischemic heart Stroke is a functional brain disorder disease in the form of paralysis of the nerves (neurological deficit) Stroke is the third cause of disability in the world due to impaired nerve function that occurs such as visual impairment, pelo speech, impaired mobility, as well as paralysis of the face and extremities. Conditions like this that cause stroke sufferers to have a high dependence on carrying out daily activities on others. (Oktarina &; Mulyani, 2020)Service activities will be carried out on October 22, 2023 in Pulo Mosquito Village Stroke health education activities are carried out at the homes of residents of Pulo Mosquito Village. The number of participants who attended was 22 people, this form of activity was carried out by the lecture method. Before starting health education activities, the community is given pre-test questions to find out the knowledge of the community about stroke. The material is delivered by lecture method using Leaflet media. Stroke health education activities are carried out at the homes of residents of Pulo Mosquito Village. The results of the post test given regarding knowledge about stroke found that the knowledge of the people of Kampung Pulo Nyamuk increased after being given counseling materials with the results of the post test value greater than the pre-test value. But it does not rule out the possibility that there are some people who have post-test values

Keywords: counseling,stroke,stroke risk factors, ichsan satya university

INTRODUCTION

The prevalence of stroke every year has increased significantly, and has become the third leading cause of disability and also the third cause of death in the world. In 2015, the World Health Organization (WHO) stated that every year there are 15 million people affected by stroke and become the leading cause of death after ischemic heart Stroke is a functional brain disorder disease in the form of paralysis of the nerves (neurological deficit) due to impaired blood flow in one part of the brain. Hemorrhagic stroke is an event where blood vessels rupture so that blood flow becomes abnormal. In ischemic stroke,

blood flow to the brain is stopped due to a blood clot that clogs blood vessels (Tamburian et al., 2020)

Stroke is the third cause of disability in the world due to impaired nerve function that occurs such as visual impairment, pelo speech, mobility disorders, and paralysis of the face and extremities. Conditions like this that cause stroke sufferers to have a high dependence on carrying out daily activities on others. (Oktarina &; Mulyani, 2020) Most strokes result from a combination of medical causative factors (e.g., increased blood pressure) and behavioral causative factors (e.g., smoking). These causes are called "risk factors". Some risk factors can be controlled or eliminated altogether by medical means, such as taking certain medications, or by nonmedical means, such as lifestyle changes. These are called modifiable risk factors. It is estimated that nearly 85% of all strokes can be prevented by controlling for such modifiable risk factors. However, there are a number of risk factors that cannot be changed. These non-modifiable risk factors include aging, genetic predisposition, and ethnicity (Udani &; Tanjungkarang Health Polytechnic Nursing Study, 2019)

The main problem that occurs is the patient's little knowledge in knowing the factors and risks of stroke prevention, then one of the most important factors in delays in treatment is the lack of knowledge about signs and symptoms and indications of stroke (Galih Nonasri, n.d.; Wahyuni et al., n.d.)The patient's recovery will be faster if the family plays a direct role in the healing period. If support from this kind of family is not available, the patient's healing will take place slowly. Therefore, the family plays an important role in the patient's physical and cognitive healing period (Wahyuni et al., n.d.)

MATERIALS AND METHODS

The service activity will be carried out on October 22, 2023 in Pulo Mosquito Village, this form of activity is carried out by the lecture method. Before starting health education activities, the community was given pre-test questions to find out the community's knowledge about stroke. The material is delivered by lecture method using Leaflet media. After giving the material, the community was given the opportunity to ask questions and discuss about the material that had been delivered. Furthermore, the community was given post-test questions to measure people's understanding of the material that had been delivered

RESULTS AND DISCUSSION

Stroke health education activities are carried out at the homes of residents of Pulo Mosquito Village. The number of participants who attended was 22 people. The activity consists of several stages including opening, filling in pre-test questions, health education about stroke, and evaluation. Below are the characteristics of participants who participated in stroke education activities in Table 1

Table 1.
Characteristics of health education participants

No	Gender	Frequency (f)	Percentage (%)
1	Man	0	0
2	Woman	22	22
	Total	22	100

Before conducting health education on stroke, the community was given pre-test questions about the definition, causes, signs and symptoms, prevention, and handling and treatment of stroke at home. After filling out the pre-test questions continued with remarks from the supervisor and continued with the delivery of material with the cermah and leaflet method, the material presented was in the form of definitions, factors causing stroke, signs and symptoms, prevention and treatment of stroke patients
The situation during which the activity takes place is shown in Figures 1,2, 3 and 4

Figure 1. Distributing pretest questions to the community for them to fill out before being given material

Figure 2 Material from lecturers

Figure 3. delivery of material on stroke with the cermah and leaflet method

Picture 4. The speaker opens the question and answer session, reviewing the material that has been delivered by the speaker

After providing education, a question and answer session was carried out and filled out post test questions regarding the material that had been given. The results of the post test showed that participants were able to answer the definition, factors causing stroke, signs and symptoms, prevention and treatment in stroke patients. After that, participants can also check their blood pressure for free. It seemed that the community was very enthusiastic and enthusiastic in participating in the activity.

Picture 5
Documentation, Speakers and Mr. supervisor take a photo together
with the community after this activity ends.

After being studied from the results of the post test given about knowledge about stroke, it was found that the knowledge of the people of Pulo Mosquito Village increased after being given counseling material with the results of the post test value greater than the pre-test value. But it does not rule out the possibility that there are some people who have low post test scores even the same as the pre-test results. After further study that some of these communities lack knowledge about stroke, therefore we provide leaflets for the public about the definition, factors that cause stroke, signs and symptoms, prevention and treatment of stroke patients as a guideline for the people of Kampung pulo Nyamuk so that they can find out if it happens to individuals, relatives, or their closest neighbors

CONCLUSION

Health education is one of the roles of nurses that aims to increase community knowledge so that it is hoped that with adequate knowledge good health behavior will be created so that it can improve the degree of community health as optimally as possible. By providing stroke health education to the community, it is hoped that they can apply a healthy lifestyle to prevent stroke.

DAFTAR PUSTAKA

Galih Nonasri, F. (n.d.). *KARAKTERISTIK DAN PERILAKU MENCARI PENGOBATAN (Health Seeking Behavior) PADA PENDERITA HIPERTENSI*. http://jurnalmedikahutama.com

Oktarina, Y., & Mulyani, S. (2020). EDUKASI KESEHATAN PENYAKIT STROKE PADA LANSIA. In *MEDIC* (Vol. 3, Issue 2).

Tamburian, A. G., Ratag, B. T., & Nelwan, J. E. (2020). Hubungan antara Hipertensi, Diabetes Melitus, dan Hiperkolesterolemia dengan Kejadian Stroke Iskemik. In *Journal of Public Health and Community Medicine* (Vol. 1, Issue 1).

Udani, G., & Studi Keperawatan Politeknik Kesehatan Tanjungkarang, P. (2013). FAKTOR RESIKO KEJADIAN STROKE. In *Edisi Juni: Vol. VI* (Issue 1).

Wahyuni, A. N., Fadilah, A., Asmara, A. N., Rahayu, A., Rahmat, D., & Koswara, A. (n.d.). *The effect of health knowledge about stroke on the family level Pengaruh penyuluhan kesehatan tentang penyakit stroke terahdap tingkat pengetahuan keluarga*.