

THE EFFECT OF SELF TALK THERAPY ON ANXIETY IN HYPERTENSION PATIENTS IN BANYURADEN IN YOGYAKARTA

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ABSTRACT

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Background: The phenomenon that occurs in hypertensive patients who are undergoing routine treatment or therapy, most sufferers feel anxious because of the treatment process, so patients need an effective problem-solving or coping mechanism to be able to reduce or overcome anxiety. There are several psychological interventions used to reduce anxiety, one of which is cognitive intervention. Self talk therapy is a cognitive way of working that contributes to changing negative thoughts into positive ones. Objective: Aims to determine the effect of self talk therapy on anxiety in hypertensive patients in Kalurahan Banyuraden, Gamping, Sleman, Yogyakarta. Method: This research is Pre-experiment design with One group Pretest-Posttest Design research design. This research will be conducted in April 2023. The sample in this study amounted to 90 respondents. Data analysis used Wilcoxon's nonparametric statistical test to see the difference between pretest and posttest in determining intervention results. Results: Results showed that there was a decrease in anxiety level scores experienced by 90 participants, where anxiety scores were in the moderate category. The results of data analysis showed that the value of Z = -8.248with significance p = 0.000 (p< 0.05). Conclusion: There were significant changes in the score obtained by people with hypertension before and after the intervention. It is hoped that this intervention can help in reducing anxiety and can be done independently by people with hypertension.

ABSTRAK

Latar Belakang: Fenomena yang terjadi pada penderita hipertensi yang sedang mengalami pengobatan atau terapi rutin, sebagian besar penderita merasakan cemas karena proses pengobatan, sehingga penderita memerlukan mekanisme penyelesaian masalah atau koping yang efektif untuk dapat mengurangi atau mengatasi kecemasan.Terdapat beberapa intervensi psikologi yang digunakan untuk mengurangi kecemasan salah satunya intervensi kognitif. Self talk therapy merupakan cara kerja kognitif yang berkontribusi dalam merubah pikiran negatif menjadi positif. Tujuan: Bertujuan untuk mengetahui pengaruh self talk therapy terhadap kecemasan pada penderita hipertensi di Kalurahan Banyuraden, Gamping, Sleman, Yogyakarta. Metode: Penelitian ini adalah Pre-experiment design dengan desain penelitian One group Pretest-Posttest Design. Penelitian ini dilaksanakan pada bulan April 2023. Sample pada penelitian ini berjumlah 90 responden. Analisisa data menggunakan uji statistic non parametric Wilcoxon untuk melihat perbedaan pretest dan posttest dalam menentukan hasil intervensi. Hasil: Hasil menunjukkan bahwa terjadi penurunan skor tingkat kecemasan yang dialami oleh 90 partisipan, di mana skor kecemasan berada pada kategori sedang. Hasil analisis data menunjukkan bahwa nilai Z= -8,248 dengan signifikansi p = 0,000 (p < 0,05). Kesimpulan: Terdapat perubahan yang signifikan pada skore yang diperoleh penderita hipertensi pada saat sebelum dan sesudah dilakukannya intervensi. Diharapkan intervensi ini dapat membantu dalam menurunkan kecemasan dan dapat dilakukan secara mandiri oleh penderita hipertensi.

INTRODUCTION

Hypertension is a condition where blood pressure exceeds normal limits, namely systolic blood pressure \geq 140 mmHg and diastolic blood pressure \geq 90 mmHg. Hypertension is also often known as high blood pressure which is caused by disorders of the blood vessels so that the blood carrying oxygen and nutrients is prevented from reaching other body tissues (Mohammed Nawi et al., 2021). High hypertension can be influenced by many factors, one of which is an unhealthy lifestyle, high salt consumption, excessive food, drinking alcohol and smoking. Apart from lifestyle, many things can cause complications of hypertension, one of which is emotions. These factors can influence emotions that result in anxiety (Arifuddin & Nur, 2018).

A phenomenon that occurs in hypertension sufferers who are undergoing routine treatment or therapy, most sufferers feel anxious because of the treatment process, so sufferers need effective problem solving or coping mechanisms to reduce or overcome anxiety. Data obtained from WHO (2018), around the world around 972 million people or a percentage of 26.4% suffer from hypertension, this figure is likely to increase to 29.2% in 2021 (Martono et al., 2022). It is estimated that every year 9.4 million people die from hypertension with complications. As many as 333 million of the 972 million individuals with hypertension are in developed countries and the rest are in developing countries, one of which is Indonesia. Based on Riskesdas 2018, the prevalence of hypertension based on measurement results in the population aged 18 years is 34.1%, the highest in South Kalimantan (44.1%), while the lowest was in Papua at (22.2%). Hypertension occurred in the age group 31-44 years (31.6%), age 45-54 years (45.3%), age 55-64 years (55.2%) (Calisanie et al., 2020).

Based on data from the Yogyakarta Health Service (2021), there are 5 major diseases originating from STP Puskesmas in Yogyakarta, namely in the largest order there are Hypertension with 127,684 people, Diabetes Mellitus with 18,446 people, Diarrhea with 10,008 people, Leptospirosis with 2848 people, and Influenza with 10,000 people. 2,827 people. The prevalence of hypertension in Yogyakarta is 32.86%, lower than the national figure, namely 34.11%. This prevalence figure places Yogyakarta in 12th place as a province with hypertension (Kemenkes RI, 2018; Nidlom, 2023).

The highest prevalence of hypertension in the Yogyakarta region is in Gunung Kidul at 39.25%, second in Kulon Progo at 34.70%, third in Sleman at 32.01%, fourth in Bantul at 29.89%, and finally Yogyakarta City at 29. 28% (Kemenkes RI, 2018). The distribution of demographic data on hypertension sufferers in the Gamping II Yogyakarta Health Center work area in January-July 2022 with a total of 34 hypertension sufferers. Where in the adult age range (26-45 years) there is 1 hypertension sufferer, while in the elderly age range (>46 years) there are 33 hypertension sufferers. Positive self-talk can keep individuals motivated to achieve their goals in life, while negative self-talk is often self-defeating (defeating oneself) and prevents individuals from moving forward, so that individuals will be dominated by pessimistic anxiety. It is known that the cognitive approach with self-talk has been proven to be effective in reducing anxiety levels in elderly people with hypertension (Kim et al., 2021).

Self-Talk is a cognitive coping mechanism technique to relieve anxiety symptoms felt by individuals. Self-Talk does not try to force or change an individual's behavior/thoughts, but rather makes them calmer. Self-talk is one of the basic mental skills techniques in mental skills training (Walter et al., 2019). Self-talk has benefits or advantages if you talk yourself Doing it often will make us more familiar with ourselves. The more often we talk to ourselves, the qualities within us will come out which will bring out our own qualities. The expressions of self-talk that we do can turn into a monologue with ourselves which will bring change and make us develop even more (Stanisławski, 2019). Based on the problems that the author has explained above, the author is interested in conducting research on the Effect of Self Talk Therapy on Anxiety in Hypertension Sufferers in Banyuraden District, Gamping, Sleman.

METHOD

Types of research

This research is a quantitative pre-experiment research with a one group pretest-posttest design.

Research Location and Time

This research is located in Kalurahan Banyuraden, Gamping, Sleman, Yogyakarta. The research was carried out in March - April 20 23.

Population and Sample

The type of research used in this research is Pre-experiment design with a One group Pretest-Posttest Design research design. In this design, the researcher will conduct a pretest first before giving the treatment, so that after giving the treatment the researcher will conduct a posttest on the respondent. The population in this study were people aged 30-50 years in Banyuraden Village, Gamping District, Sleman with a population of 450 people using a Qouta Sampling technique of 90 respondents.

Data collection

Data collection was conducted using STAI (State-Trait Anxiety Inventory) Anxiety questionnaire with Likert scale and SOP self talk therapy as of March 2017. The statement on the questionnaire is in the form of positive/favorable and negative/unfavorable statements with five answer choices, namely score 5 for very appropriate answer choices, score 4 for appropriate answer choices, score 3 for undecided answer choices, score 2 for inappropriate answer choices and score 1 for very inappropriate answer choices.

The validity of the questionnaire was tested using Product Moment Correlation and reliability testing was carried out using the Cronbach Alpha Coefficient Technique. The initial questionnaire consisted of 30 items, after the validity test was carried out only 12 items were declared valid and 18 items were declared invalid. The item is invalid because it has a calculated r value lower than the table r, namely 0.514. Invalid statements are removed from the list before the reliability test is carried out. The reliability test was carried out on 12 items and based on the test results, all statements were declared reliable with the calculated r value being greater than the table r value. All statements were declared reliable with the results of the Cronbach's Alpha statistical test with a value range of 0.612.

Processing and analysis of data

Data analysis in this study is divided into two, namely, univariate data analysis which uses the frequency distribution of respondent characteristics, and bivariate data analysis in this study using data normality tests on each variable with the Kolmogrov Smirnov test and the Wilcoxon Signed Rank Test.

RESULT

Based on table 1 known that the majority of respondents in this study were female, namely 49 respondents (54.4%), with the majority of respondents aged 37-43 years, 47 respondents (52.2%), with the majority aged 37-43 years. suffered from hypertension for 3 years, namely 46 respondents (51.1%). Characteristics of respondents in their last level of education, the majority of respondents were at Diploma/Bachelor level as many as 49 respondents (54.4%), with the majority of respondents' occupation being self-employed as many as 38 respondents (42.2%), and with the majority of respondents (52.2%).

Respondent Characteristics	Frequency	Percentage	
Gender		(%)	
	40	511	
Woman	49	54.4	
Man	41	45.6	
Age			
30-36 years old	32	35.6	
37-43 ears old	47	52.2	
44-50 years old	11	12.2	
Long Suffering			
1 year	39	43.3	
2 years	5	5.6	
3 years	46	51.1	
Last education			
Elementary school	1	54.4	
Junior High School	2	1.1	
High school/high school	38	42.2	
Diploma/Bachelor	49	2.2	
Work			
Health workers	11	12.2	
Teacher/Lecturer/Teacher	16	17.8	
Self-employed	38	42.2	
Labor Employees	22	24.4	
IRT	2	2.2	
Laborer	1	1.1	
Hypertension Level			
Pre Hypertension	14	15.6	
Level 1	29	32.2	
Level 2	47	52.2	
Total	90	100	

Table 1. Distribution Characteristics	Respondent Anxiety	v in Sufferers Hypertension
Respondent Characteristics	Frequency	Percentage

Table 2. Distribution of Anxiety Levels Sufferer Hypertension in the District Banyuraden

Characteristics	Anxiety Level				Total	
	Cu	Currently Heavy		y		
	F	%)	F %)	F %
Gender						
Man	37	41.1	4	4.4	41	45.6
Woman	43	47.8	6	6.7	49	54.4
Total	80	88.8	10	11.2	90	100
Age						
30-36 years old	30	33.3	2	2.2	32	35.6
37-43ears old	42	46.7	5	5.6	47	52.2
44-50 years old	8	8.9	3	3.3	11	12.2
Total	80	100	10	100	90	100
Long Suffering						
1 year	35	38.9	4	4.4	39	43.3
2 years	4	4.4	1	1.1	5	5.6
3 years	41	45.6	5	5.6	46	51.1
Total	80	88.9	10	11.1	90	100
Last education						
Elementary school	-	-	1	1.1	1	1.1

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Junior high school	1	1.1	1	1.1	2	2.2
high school/high school	36	40.0	2	2.2	38	42.2
Diploma/Bachelor	43	47.8	6	6.7	49	54.4
Total	80	88.9	10	11.1	90	100
Work						
Health workers	9	10.0	2	2.2	11	12.2
Teacher/Lecturer/Teacher	13	14.4	3	3.3	16	17.8
Self-employed	36	40.0	2	2.2	38	42.2
Labor Employees	21	23.3	1	1.1	22	24.4
IRT	1	1.1	1	1.1	2	2.2
Farmer	-	-	1	1.1	1	1.1
Total	80	88.9	10	11.1	90	100
Hypertension Level						
Pre Hypertension	12	13.3	2	2.2	14	15.6
Level 1	25	27.8	4	4.4	29	32.2
Level 2	43	47.8	4	4.4	47	52.2
Total	80	88.9	10	11.1	90	100

Table 2 describes the anxiety level of hypertension sufferers based on the characteristics of the respondents in this study, the majority of whom were female, 49 respondents (54.4%), who experienced moderate anxiety, 43 respondents (47.8%), and those who experienced anxiety. weight as many as 6 respondents (6.7%). Meanwhile, with the characteristics of respondents based on age, namely the majority of respondents experiencing anxiety were in the 37-43 year age range as many as 47 respondents (52.2%), those experiencing moderate anxiety were 42 respondents (46.7%), and those experiencing severe anxiety as many as 5 respondents (5.6%). Meanwhile, with the characteristics of respondents based on length of suffering, the majority of respondents had a history of hypertension for 3 years, namely 46 respondents (51.1%), 41 respondents (45.6%) experienced moderate anxiety, and 5 respondents experienced severe anxiety. (5.6%).

In terms of the final educational characteristics, the majority of respondents were diploma/graduate degrees, where 43 respondents experienced moderate anxiety (47.8%) and the majority of respondents experienced severe anxiety, 6 respondents (6.7%). The majority of respondents in this study work as entrepreneurs, with 36 respondents (40.0%) experiencing moderate anxiety, but 3 respondents (3.3%) who experience severe anxiety work as teachers/lecturers/teacher. Based on the characteristics of the level of hypertension, the majority of respondents experienced moderate anxiety, 43 respondents (47.8%) who suffered from hypertension at the second level, while for severe anxiety, the same number of respondents, namely 4 respondents (4.4%) who experienced hypertension at the first and second level.

Table 3. Distribution of anxie	ty levels in sufferers h	hypertension before and after self talk therapy
Anviety Level	Refore	Aftor

Anxiety Level	Before			After
	Frequency Percentage (%)		Frequency	Percentage (%)
Anxiety Level				
Moderate Anxiety	80	88.9	90	100
Severe Anxiety	10	11.1	0	-
Total	90	100	90	100

Based on table 3 above. The frequency distribution of anxiety levels before self-talk therapy was carried out showed that the majority of respondents experienced moderate anxiety, namely 80 respondents (88.9%) and severe anxiety, namely 10 respondents (11.1%). Meanwhile, the frequency distribution of anxiety levels after self-talk therapy showed that all respondents experienced moderate anxiety as many as 90 respondents (100%).

	v		v	
		Ν	Mean Rank	Sum of Ranks
Post-test and	Negative Ranks	90	45.50	40.95
Pre-test	Positive Ranks	0	.00	.00
	Ties	0		
	Total	90		

Table 4. Distribution	1 4 1	• • •	1 1 1 0	
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\mathbf{I} and \mathbf{H} . Distribution		5 III AIIAICLV	/ ICVCIS III SUII	

Based on table 4 above, the results show that 90 respondents experienced a decrease in anxiety levels from the pre-test value to the post-test value, which can be seen from the mean rank value or the difference in the average of the largest decrease of 45.50, and the sum of ranks value or the amount of the decrease was 40.95.

 Table 5. Distribution analysis the effect of self talk therapy on anxiety in sufferers hypertension

No.	Re	sults	Mean	Std. Deviation	Ζ	p. value
1.	Pre-test Anxiety (STAI)	State-Trait Inventory	42.84	4.608	-8.248	0.000
2.	Post-test Anxiety (STAI)	State-Trait Inventory	35.99	2.190	-8.248	0.000

To determine the influence of self-talk therapy on anxiety in hypertension sufferers in Bamyuraden District, Gamping, Sleman. So in this study the Wilcoxon signed ranks test was used. Based on table 11 below, the Std value can be seen. The deviation from the pre-test is equal to, in the post-test it is equal to. The mean value from the pre-test is the mean value on the post-test. The results of the Wilcoxon Signed Ranks Test, namely the p.value in the table above, is 0.000<0.05, so it can be concluded that the hypothesis is accepted, meaning that there is an effect of self-talk therapy on anxiety in hypertension sufferers in Banyuraden District, Gamping, Sleman.

DISCUSSION

Fear is a rational response in certain situations, so that some people respond excessively in fear of an object, activity or situation by irrationally thinking about the danger and exaggerating it, causing a feeling of panic. Psychological disorders such as feelings of fear, anxiety and anxiety that arise due to irrational beliefs within a person. Anxiety is a tension, worry, or feeling of insecurity caused by experiencing unpleasant circumstances (Adolphs, 2013; Steimer, 2022).

Anxiety can result in sympathetic stimulation which increases heart rate, cardiac output and vascular resistance, this sympathetic effect increases blood pressure. The results of this study show that the more severe the stage of hypertension, the more anxiety it will cause, however in this study the majority of respondents with stage two hypertension experienced moderate anxiety (Fontes et al., 2023). This is not in line with the results of research conducted at the Anutapura Palu General Hospital (RSU), showing that of the 185 respondents there were the highest number of hypertension sufferers, as many as 105 people (56.8%) were in the mild category of stage 1 hypertension and the lowest was in the very severe category. Severe stage 4 hypertension was 1 person (5%). This is because the place used by researchers is different from that used by other researchers or it could also be caused by differences in conditions experienced by respondents when this research was conducted compared to other research (Arifuddin & Nur, 2018).

Based on the results of this study, it was found that the phenomenon of anxiety that occurs in hypertension sufferers is when they are undergoing routine medication or therapy, when they want to have their health checked and are going to see a doctor, they feel unsafe and comfortable with their condition, and they feel less able to control their emotions. Negative thoughts that emerged automatically in respondents were bad luck that would happen to them, they would experience other comorbidities, bad luck when they forgot to take their routine medication and fear of higher blood pressure. These thoughts will later cause anxiety in the respondent, which can cause uncomfortable feelings and will disrupt the respondent's daily activities.

The results of this study show that the majority of respondents have a moderate level of anxiety. In contrast to research conducted, it shows that the majority of respondents suffering from hypertension are experiencing severe anxiety. This is because the questionnaire used by the researcher is different from that used in other research or it could also be because of differences in the underlying conditions of the respondents when this research was carried out compared to other research (Nisa' & Pranungsari, 2021).

The frequency distribution of anxiety levels before self-talk therapy was carried out showed that the majority of respondents experienced moderate anxiety, namely 80 respondents and severe anxiety, namely 10 respondents. The problem experienced by respondents is that there are negative thoughts that arise when faced with situations that threaten them. These negative thoughts can ultimately influence the respondent's feelings, giving rise to feelings of fear and worry. Finally, the respondent showed symptoms of anxiety such as shaking, dizziness, heart palpitations, or increased blood pressure (Nisa' & Pranungsari, 2021). Meanwhile, the frequency distribution of anxiety levels after self-talk therapy showed that all 90 respondents experienced moderate anxiety. It can be interpreted that 90 respondents experienced a decrease in anxiety when the self-talk therapy intervention was carried out in 4 meetings during the week.

Based on the results of this research, it was found that anxiety levels were reduced based on the pre-test and post-test of the STAI questionnaire. The results of this research were that the 90 respondents studied experienced a decrease in anxiety levels from the pre-test value to the post-test value with a p value of 0.000<0.005, which can be interpreted as a significant difference between the level of anxiety experienced by respondents before and after the process. intervention is provided. The anxiety experienced by 90 respondents fell into the moderate anxiety category after the intervention. This is in line with previous research with the title research on positive thinking therapy and blood pressure in hypertensive patients. Participants in the study were 30 hypertension sufferers, both men and women with an age range of 36-55 years. The results of this research show that there is an effect of positive thinking therapy on blood pressure in hypertensive patients at the Welahan I Community Health Center, Jepara Regency, as evidenced by p value = 0.000 (p<0.05) (Masithoh et al., 2016).

Therefore, it can be concluded that one cognitive approach that can be used to reduce anxiety levels effectively is Self Talk Therapy, however self talk therapy cannot eliminate or reduce the burden or other problems being experienced by the respondent. The results of this research are also supported by previous research with the research title The Effectiveness of Implementing Self-Talk Therapy and Stress Management in Reducing Teenage Anxiety Levels. The number of samples in this study was 54, of which 27 people were in the control group and 27 in the treatment group using purposive sampling techniques, both women and men. The results of this research show that self-talk therapy and stress management have an effect on adolescent stress during the new normal period. It can be concluded that there is effectiveness in implementing self-talk therapy and stress management in reducing adolescent anxiety levels in the new normal period with a p value of 0.035 (Putri & Bachri, 2022).

The results of this study also show that there is an effect of self-talk therapy on anxiety in hypertension sufferers with a p value of 0.000 <0.05, so it can be concluded that the hypothesis of this research can be accepted, which means that there is an effect of self-talk therapy on anxiety in hypertensive sufferers in Banyuraden sub-district, Sleman. In line with research which can be interpreted as meaning that there is a significant difference between the level of anxiety experienced by respondents before and after being given the intervention (Nisa' & Pranungsari, 2021).

CONCLUSIONS AND RECOMMENDATIONS

The majority of anxiety levels in this study were moderate anxiety experienced by female respondents, while for severe anxiety levels, the majority of respondents were the same as those with severe anxiety, namely female respondents. Before self-talk therapy was carried out, the level of anxiety in hypertension sufferers in this study was 80 respondents experienced moderate anxiety and the remaining 10 respondents experienced severe anxiety. There was a decrease in anxiety levels in hypertension sufferers in 90 respondents after self-talk therapy was carried out. It is recommended that self-talk therapy be used as one of the recommendations in nursing planning and implementation in

nursing care for patients with stress and anxiety, so that it can reduce the level of stress and anxiety experienced by patients

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