

Abstract

[Purpose] Hypertension, a metabolic risk factor of noncommunicable diseases, is a significant health issue in Indonesia and a rural district of West Java due to aging and economic growth. The purpose of this study was to develop a perceived preventative and promotive health behaviors model of middle-aged people with hypertension in a rural district of West Java, to better inform the district's health program and nursing education.

[Methods] The design was a descriptive cross-sectional study. A literature review and preliminary study guided the study framework, which proposed that perceived preventive and promotive health behaviors were predicted by perceived predictors. Participants ages 40-64 with hypertension (N=450) were recruited from four health centers in the district. Data were collected in September 2014. A 204-item original questionnaire measured perceived preventive and promotive health behaviors and the predictors and a WHOQOL-BREF measured perceived health status and quality of life. Data analyses included descriptive statistics, one-way ANOVA, principal component analysis, exploratory factor analysis, general linear model, and structural equation modeling. The Research Ethics Committee of St. Luke's International University approved this study (No.14-029).

[Results] Data from 447 participants were usable for analysis; three questionnaires were omitted because of missing data. All participants were Muslim and 77% were female. The mean age was 54 years old. Participants did not practice enough salt reduction, smoking cessation, exercise, and health check-ups. The model indicated good fit (RMSEA = .042, CFI = .903). Seeking health information predicted salt reduction ($\beta = .18$), eating vegetable and fruits (.20), and stress management (.14). Fulfilling obligations to God predicted salt reduction (.19) and stress management (.24). Behavioral beliefs, competence, Islamic spiritual support, social support and health system support also positively predicted those behaviors. Eating vegetables and fruits predicted health status (.39) and environmental quality of life (.38). Stress management predicted psychological quality of life (.26).

[Conclusion] Middle-aged Muslims with hypertension in rural West Java indicated limited health behaviors for noncommunicable diseases prevention and health promotion. Fulfilling obligations to God and seeking health information were core health behaviors that predicted other limited health behaviors. Supporting peoples' core health behaviors and the predictors enhances other health behaviors.