



# Narative Review: Factors Influencing Medication Compliance of Hypertension Patients

Rizka Amaliah Putri<sup>1\*</sup>, Diana Laila Rahmatillah, Kashif Ullah Khan

Universitas 17 Agustus 1945 Jakarta

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\*Correspondence: Rizka Amaliah Putri

Email:

[riska\\_pesibar3000@gmail.com](mailto:riska_pesibar3000@gmail.com)

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**Abstract:** Hypertension is a chronic disease that requires long-term therapy to reduce the risk of cardiovascular complications, stroke, and kidney disorders. The success of antihypertensive therapy is largely determined by patient compliance in taking medication (however, various reports indicate that compliance rates remain suboptimal. This narrative review aims to summarize recent evidence regarding factors influencing medication adherence among patients with hypertension. A systematic literature search was conducted in national and international journals published between 2020 and 2025, using predefined inclusion and exclusion criteria. The initial search identified 72 articles, of which 25 articles met the eligibility criteria and were included in the final thematic synthesis. The findings indicate that medication compliance is influenced by internal factors (knowledge, motivation, and self-efficacy) and external factors (family support, the role of health workers, perception of illness, and sociodemographic characteristics). Among these factors, treatment motivation and family support were consistently reported as the most dominant determinants of adherence. In conclusion, improving medication compliance in hypertensive patients requires a comprehensive approach that integrates continuous patient education, strengthening the role of health workers, and active family involvement in the treatment process.

**Keywords:** Hypertension Medication Adherence, Family Support, Motivation To Seek Treatment, Role Of Health Workers.

## Introduction

Hypertension is condition chronic in need therapy sustainable to reduce risk occurrence complications heavy like disease cardiovascular, stroke, and disorders kidneys. Height burden disease cardiovascular globally not let go from role hypertension as factor risk main contributors to increasing number pain and death. According to WHO report, the number sufferers hypertension globally reach more of 1.28 billion people aged adults, with proportion the biggest originate from income countries low and medium aged 30–79 years suffer hypertension, with part big case occurs in high-income countries medium and low. Conditions This exacerbated by low level awareness and compliance patient in undergo treatment, so that impact on not controlled pressure blood as well as increasing risk complications cardiovascular such as stroke, infarction myocardial failure heart and disease kidney chronic (WHO, 2023).

Compliance level consumption drug antihypertensive in patients care road still become challenge main in practice clinical. Patient often stop therapy when symptom felt

get better, forget to consume medicine, or not to do visit control regularly, so that effectiveness of therapy becomes not optimal. Compliance with medication in patients with hypertension is an important aspect in the success of long-term therapy. Non-compliance with hypertension treatment is a complex nature and is influenced by various factors, both internal patient factors and external factors that are mutually continuous. Non-compliance is known as suboptimal adherence, which results in uncontrolled blood pressure, progressive disease, increased complications, as well as economic consequences and decreased productivity of the patient (A. Ernawati, 2022) (Listiana et al, 2020) (Madarina et al, 2022).

The West Coast Regency is one of the areas with a high relative number of hypertension cases. Based on the 2021 Health Profile of Pesisir Barat Regency, it is recorded that there are as many as 4,983 hypertension cases, however only approximately 13.2% of patients who received regular service treatment. The data show that a large part of the patient has not yet undergone monitoring and therapy in accordance with the recommendation. The low coverage of service treatment indicates that the existence of a compliance problem is influenced by various factors, such as the level of knowledge, motivation for treatment, family support, perception of medicine, as well as the quality of health communication power (Safitri et al, 2025).

A number of studies report that compliance with drug therapy in hypertension patients is influenced by various factors, including family support, role of health officer, as well as the motivation to seek medical treatment. Safitri et al, reported that family support, health power and motivation to seek medical treatment own influence is significant to compliance with drug therapy antihypertensive, with motivation to seek medical treatment as the most dominant factor. Findings similar were also reported by Fauzi et al, who confirmed the importance of family support in increasing compliance in patients. In addition, Madarina et al, stated that the level of knowledge, motivation, and family support own connection is meaningful with compliance with hypertension treatment (Fauzi et al, 2020) (Madarina et al, 2022) (S. N. Safitri et al, 2025).

The role of health officers also becomes an important factor in increasing compliance with drug therapy. Education, counseling, effective communication, and mentoring are sustainable from health power proven to be capable of increasing the patient's understanding of the disease and treatment being undertaken, so that obedient behavior in consuming antihypertensive drugs is pushed. On the other hand, low motivation to seek medical treatment is often caused by the perception of patients who feel healthy because hypertension does not show specific symptoms, so that they do not consider treatment required (Susanto & Purwantingrum, 2022).

Based on the description said, compliance with drug therapy in hypertension patients in the inpatient unit, especially at KH. M. Thohir Krui Lampung Regional Hospital which is located in Krui Regency Pesisir Barat, is an important issue that needs to be reviewed in a deep way. High number of hypertension, low coverage of services, as well as complexity of factors affecting compliance with treatment make this study relevant to be conducted. The results of the study are expected to become a basis in planning intervention and preparation of service policy to better health and effective in improving compliance with drug therapy as well as preventing complications of hypertension in the region.

## Methodology

### Source Information and Search Strategy

This study was arranged using a narrative review approach through a systematic search of relevant scientific literature. The literature search aimed to identify empirical studies discussing factors influencing medication compliance among patients with hypertension. The search process was conducted across several online scientific databases, including Google Scholar, PubMed, ScienceDirect, GARUDA, and Neliti. The search strategy employed a combination of keywords related to the research topic, namely "hypertension," "medication compliance," "treatment motivation," "family support," and "role of health professionals." To ensure the relevance and currency of the evidence, publication year limits were set between 2020 and 2025. Articles published in both Indonesian and English were included in the search. The initial search across all databases identified **approximately 72 articles**. All retrieved articles were then collected and organized to assess their relevance to the main focus of the review, namely factors influencing medication compliance among hypertension patients in outpatient care settings, particularly within the context of KH. M. Thohir Krui Regional Hospital, Lampung.

### Selection Process and Data Collection

The literature selection process was conducted through several stages based on predefined inclusion and exclusion criteria. The inclusion criteria comprised publications published between 2020 and 2025, original research articles, systematic reviews, literature reviews, and health reports that discussed medication compliance among hypertension patients. Articles that examined factors influencing medication compliance, such as knowledge, treatment motivation, family support, and the role of health professionals, were included. Only articles published in Indonesian or English with complete full-text availability and adequate data were considered. The exclusion criteria included publications published before 2020, blogs, editorials, opinion pieces, and other non-scientific articles. Studies that did not discuss medication compliance or were not related to hypertension, as well as studies that did not examine factors influencing medication compliance or lacked relevant variables, were excluded. Articles with incomplete data or unavailable full-text access were also excluded.

Based on the initial search across all databases, a total of 72 articles were identified. In the first stage, titles and abstracts were screened to assess their relevance to the topic of medication compliance among hypertension patients. Following this screening process, 38 articles were excluded due to duplication, irrelevance to the research topic, or failure to meet the inclusion criteria. Subsequently, 34 articles underwent full-text review to evaluate methodological quality, relevance of variables, and suitability with the outpatient care context. During this stage, 9 articles were excluded because they did not adequately address factors influencing medication compliance or lacked sufficient data for analysis. Finally, 25 articles met all inclusion criteria and were included in the narrative synthesis. Data extraction was performed from each selected article, including author(s), year of publication, study location, research design, respondent characteristics, factors related to

medication compliance, measurement instruments, and key findings. The extracted data were synthesized using a thematic narrative synthesis approach. This approach was chosen due to the heterogeneity of study designs, populations, and outcome measures, which did not allow for quantitative meta-analysis. A detailed description of the eligibility criteria is presented in Table 1.

**Table 1.** Eligible Criteria

Criteria Inclusion	Criteria Exclusion
Publications on the range 2020 – 2025	Publication before 2020
Articles in the form of study original, systematic review, literature review, report health	Blogs, editorials, opinions, non- scientific articles
Articles that discuss compliance drink drug patient hypertension	Articles that are not discuss compliance or no related with hypertension
Articles that examine factors that influence compliance, such as knowledge, motivation, support family, and/ or role power health	Research that is not research factor compliance or no own relevant variables
Indonesian language articles or English with text complete and adequate data	Article no have complete data

## Result and Discussion

This chapter served results analysis obtained from article scientific related factors that influence compliance drink medication in patients hypertension, especially in health services care road. Based on the selection process literature that includes screening title and abstract, assessment text complete, and evaluation quality methodology, obtained most relevant references. The articles analyzed covers various design research, with majority study quantitative (cross-sectional, quasi- experimental with pretest– posttest design), accompanied by a number of studies qualitative and review articles. Various studies the conducted in a care setting road House hospital, health center, pharmacy community and clinic reference, so that findings produced relevant for context of the Outpatient Unit of KH. M. Thohir Krui Regional Hospital, Lampung.

Majority reviewed articles show that level compliance patient hypertension Still is in the category low until moderate. However Thus, intervention in the form of education and mentoring proven capable increase compliance in a way meaningful. Some research also shows that compliance can increase in a way significant if factors supporters compliance fulfilled. Most of the studies that examine factor intervention report existence improvement meaningful compliance in a way statistics ( $p < 0.05$ ), especially when patient get education, mentoring, or effective communication from power health. The level of improvement compliance varies depending on the type dominant factor, duration intervention, as well as instrument measurement compliance used, such as MMAS-8, MARS, and pill count.

A number of research also revealed that improvement compliance drink drug followed by improvement of clinical parameters, especially decline pressure blood systolic

and diastolic, as well as increasing proportion patient with pressure blood controlled study. Study with duration action carry on medium until long show that greater compliance Good contribute to control more optimal hypertension. Based on synthesis thematic, factors that influence compliance drink drug patient hypertension can grouped to in four mechanism consistent main reported in various research, namely:

- a. Knowledge patient: Improvement knowledge about disease hypertension, goals therapy, as well as benefits and effects side drug play a role important in increase compliance. Patients who understand consequence non-compliance tend more consistent in consume drug.
- b. Patient motivation & *self-efficacy*: Internal motivation and beliefs patient to his abilities undergo therapy term long (*self-efficacy*) is factor dominant influencing behavior compliant. Patient with motivation tall more capable maintain compliance although face obstacle.
- c. Supporting and inhibiting factors practical: Obstacles practical like forget drink medicine, routine daily, and the complexity of the therapy regimen often become reason non-compliance. Use tool help like reminders, pillboxes, and proven reminder systems help increase compliance.
- d. Support family and environment social: Support family and environment social play a role as factor amplifier compliance. Studies show that involvement family in supervision and reminders drink drug increase success treatment in a way significant.

In addition, the effectiveness factors the influenced by characteristics patients and systems service health. A number of study identify moderator variables, such as age, level education, burden comorbidity, access to service health, literacy health, as well as quality communication power health. Variables This influence big small change compliance and frequent analyzed use approach regression.

A number of obstacle in improvement compliance was also reported, including limitations time services in polyclinics, burden Work power health, low literacy health patient, constraints costs and transportation, as well as limitations support system service like room education and protocol standard. Obstacles This need considered in planning intervention improvement compliance drink drug patient hypertension in the inpatient unit road.

**Table 2.** Evidence Review Thematic Regarding Influencing Factors Influencing Medication Compliance of Hypertension Patients in the Outpatient Unit of Kh. M. Thohir Krui Regional Hospital, Lampung.

No	Main Thematic Themes	Research Evidence	Summary Key Findings	Author & Year
1	Knowledge and Perception Patient	<i>Cross-sectional</i> and observational studies in services care road	Good knowledge about hypertension, goals therapy, and risks complications relate significant with level compliance drink medicine, perception	Abdulloh <i>et al</i> , 2020) (Madarina <i>et al</i> , 2022) (Juniarti <i>et al</i> , 2023) (Listiana <i>et al</i> , 2020

No	Main Thematic Themes	Research Evidence	Summary Key Findings	Author & Year
			negative to disease and medicine increase non-compliance	
2	Motivation Treatment and <i>Self-Efficacy</i>	Analysis correlation and regression	Motivation treatment and faith selfpatient is the most dominant internal factors that influence compliance, even more strong compared to factor sociodemographics	Mahardika & Adyani, 2023) (Fauzi <i>et al</i> , 2020) (Febyanti, 2022
3	Support Family and Social	Observational study in patients care road	Support family in form reminder drink medicine, support control and support emotional increase compliance and sustainability therapy	Anjalina <i>et al</i> , 2024) (Fadhilah, 2020) (Handayani <i>et al</i> , 2022) (Listiana <i>et al</i> , 2020
4	The Role of Health Workers and Education	Evaluative and intervention studies	Education, counseling, and communication therapeutic from power health increase understanding, trust patients, and compliance drink drug	Apsari <i>et al</i> , 2021) (Darmirani & Dalimunthe, 2023) (Akri & Puspitasari, 2025
5	Sociodemographic Factors and Barriers Practical	<i>Cross-sectional</i> study	Age further education low, forget drink medicine, as well as limitations access service contribute to non-compliance, especially when no accompanied by support family	I Ernawati <i>et al</i> , 2020) (Madarina <i>et al</i> , 2022
6	Impact Compliance towards <i>Outcome</i> Clinical	Correlational study compliance – pressure blood	Compliance drink drug relate with decline pressure blood systolic and diastolic as well as improvement proportion patient with pressure blood controlled	Juniarti <i>et al</i> , 2023) (Yacob <i>et al</i> , 2023
7	Context local West Coast	Regional observational study	The low compliance influenced by knowledge, motivation, support family, and quality communication power health	Safitri <i>et al</i> , 2024) (Safitri <i>et al</i> , 2025

Tabel 2. shows summary results synthesis thematic from reviewed articles about factors that influence compliance drink medication in patients hypertension. In general, compliance influenced by internal patient factors, support family, role power health, as well as factor sociodemographics and barriers practically, which is together impact on success control pressure blood.

### 1. Compliance Level Taking Patient Medication Hypertension

Most of the study report that level compliance drink drug patient hypertension Still is in the category low until moderate. Non-compliance shown through behavior forget drink medicine, stop treatment without consultation, as well as irregularity control, especially in patients care road (I. Ernawati et al, 2020) (Hamrahian et al, 2022).

### 2. Knowledge Patient

Knowledge patient about hypertension and its treatment is factor important things that influence compliance. Patient with good understanding about objective therapy and risks complications tend more obedient compared to patient with knowledge limited (Abdulloh & Veriyallia, 2025) (Juniarti et al, 2023).

### 3. Motivation and *Self-Efficacy*

Motivation treatment and faith patient to his abilities undergo therapy term long (*self-efficacy*) is dominant internal factors that influence compliance. Patient with motivation tall more consistent in consume drug although No feel symptom clinical (Mahardika & Adyani, 2023) .

### 4. Support Family

Support family play a role as factor external strengthening compliance drink medicine. Involvement family in remind timetable drink medication and accompanying patient moment control proven increase compliance in a way significant (Anjalina & Noor, 2024) (Apsari et al, 2021) (Guo et al, 2023).

### 5. The Role of Health Workers

The role of power health, in particular in education and communication therapeutic, influential big to compliance patient hypertension. Clear education and relationships good therapeutic increase understanding as well as trust patient to therapy undertaken (Akri & Puspitasari, 2025) (Apsari et al, 2021) (Darmirani & Dalimunthe, 2023) (Hamrahian et al, 2022).

### 6. Sociodemographic and Perception Factors Disease

Age, level education, as well as perception patient to disease and medicine participate influence compliance. Patient carry on age and patient with education low tend own risk more non- compliance high, especially when accompanied by perception negative to treatment (I. Ernawati et al, 2020) (Guo et al, 2023) (Madarina et al, 2022).

### 7. Impact Compliance Against Clinical Parameters

A number of study report that improvement compliance drink drug relate with decline pressure blood systolic and diastolic as well as increasing proportion patient with pressure blood controlled (Juniarti et al, 2023)j.

Various factor proven influence compliance drink medication in patients hypertension, whether originating from from aspect individuals, families, and service health. Synthesis results show that improvement compliance drink drug no only influenced by the provision of counseling, but also by level knowledge and motivation patient, support

family, and quality communication and education from power health, which in a number of studies contribute to repair control pressure blood. Based on findings said, efforts improvement compliance of hypertension patients in the outpatient unit of KH. M. Thohir Krui regional hospital, Lampung is recommended covers approach comprehensive through compilation protocol education and communication structured therapeutic, strengthening role power health in facilitate compliance, engagement family as supporters behavior treatment, use MMAS-8 instrument as tool evaluation compliance, as well as utilization system digital reminder for support sustainability compliance drink drug patient.

## Discussion

The results of the literature synthesis show that medication adherence in hypertensive patients is a multifactorial phenomenon that cannot be explained by a single determinant. Adherence is formed through complex interactions between individual factors, family support, the role of health workers, and the characteristics of the health care system. These findings reinforce the (WHO, 2023) view that low medication adherence remains one of the main barriers to global hypertension control, despite the widespread availability of effective pharmacological therapies.

Patient knowledge about hypertension and antihypertensive therapy is often positioned as a fundamental factor in the formation of compliant behavior. Several studies show that a good level of knowledge is positively correlated with medication adherence (Juniarti et al, 2023) (Susanto & Purwanti, 2022). However, the literature also indicates that increasing knowledge alone does not automatically result in sustainable behavioral change. This is in line with the concept in health behavior theory which states that knowledge is a necessary condition, but not sufficient to form compliance without the support of other psychosocial factors such as motivation and self-efficacy (Alsofyani et al, 2022) (Guo et al, 2023) (Suhartono et al, 2022). Thus, education-based interventions that only focus on information transfer tend to have a limited impact on long-term compliance.

Treatment motivation and self-efficacy emerge as the most consistent internal factors influencing adherence. Patients with high motivation tend to be able to maintain compliant behavior even though hypertension is often asymptomatic (Abdulloh & Veriyallia, 2025) (Mahardika & Adyani, 2023). This condition explains why many patients stop or irregularly take their medication when they do not feel any physical complaints. Critically, these findings emphasize that non-adherence is not solely due to a lack of information, but rather to a weak internalization of therapeutic goals and a low perception of the long-term benefits of treatment.

Family support has been shown to play a role as an external factor that strengthens adherence, especially in elderly patients or patients with limitations in self-managing their medication. Several studies indicate that family involvement in reminding patients of their medication schedule, accompanying them to check-ups, and providing emotional support contributes to more stable adherence (Anjalina & Noor, 2024) (Handayani et al, 2022). These findings show that adherence is not entirely the responsibility of the individual patient, but rather the result of the social support system around them. Therefore, a family-

based approach is a relevant strategy, especially in the context of primary and community health care (Fauzi et al, 2020).

The role of health workers, particularly through the quality of therapeutic communication and continuous education, is also an important determinant of adherence. The literature shows that empathetic, clear, and continuous interactions can increase patients' understanding and trust in antihypertensive therapy (Akri & Puspitasari, 2025) (Darmirani & Dalimunthe, 2023). Critically, this indicates that patient adherence cannot be separated from the quality of services provided. In other words, non-compliance may also reflect the failure of the healthcare system to build effective therapeutic relationships with patients.

Demographic factors such as age and education level, as well as patients' perceptions of disease and medication, also influence variations in compliance between individuals (Ristiani et al, 2023) (E. M. Safitri et al, 2024). Furthermore, various studies show that medication adherence is significantly associated with improvements in clinical parameters, particularly a decrease in systolic and diastolic blood pressure (Carey et al, 2022) (Yacob et al, 2023). These findings reinforce the argument that adherence can be used as an important indicator of the success of hypertension therapy, not only as a behavior but also as a determinant of clinical outcomes.

The implications of this review's results indicate that efforts to improve medication adherence in hypertensive patients must be carried out through a comprehensive approach. This approach should not only focus on increasing patient knowledge but also on strengthening treatment motivation, empowering families, and improving the quality of communication and education by health workers. This multidimensional approach is highly relevant for implementation in outpatient services, including at the KH. M. Thohir Krui Lampung Regional General Hospital, to support blood pressure control and prevent long-term complications of hypertension.

## Conclusion

Compliance drink medication in patients hypertension influenced by various interrelated factors related, including factor individual, support family, and role service health. Individual factors like level knowledge, motivation treatment, and self-efficacy plays a role important in sustainability behavior drink medicine, while support family help strengthen compliance through assistance and reminders in undergo therapy. From the side service health, quality communication, education, and counseling structured by power health proven contribute to improvement compliance and improvement control pressure blood. Compliance drink good medicine is component key in success therapy hypertension and prevention complications term long. Therefore that, the effort improvement compliance in the Outpatient Unit of KH. M. Thohir Krui Regional Hospital, Lampung is necessary done through approach comprehensive involving patients, families, and staff health, as well as supported by monitoring compliance use instrument standardized and system supporters service health.

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