# Empowering Elderly Hypertension through a Combination of Mindfulness Therapy and Emotional Freedom Technique (EFT) to Lower Anxiety

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## *Abstract*

The elderly population in Indonesia has a high prevalence of hypertension reaching 63.2%. This physical condition is exacerbated by anxiety reaching 45-60% in hypertensive elderly people in nursing homes who have not received comprehensive non-pharmacological interventions. This activity aims to empower the elderly in managing anxiety through the application of a combination of Mindfulness therapy and Emotional Freedom Technique (EFT). The program involves hypertensive elderly. The implementation method is carried out through the preparation stage, implementation; health education, demonstrations, hands-on practice of mindfulness and EFT therapy, mentoring, and evaluation of ability to practice therapy, and anxiety levels before and after the intervention using the Hamilton Anxiety Rating Scale (HARS) and structured questionnaires. This activity is supported by educational media in the form of pocket books and therapy guide videos. The results of the activity showed an increase in the knowledge and skills of the elderly in conducting therapy independently, a decrease in anxiety levels. The combination of mindfulness therapy and EFT has been shown to be effective in improving the ability of the elderly to manage anxiety and can be applied sustainably as a non-pharmacological approach to improve the quality of life of the elderly with hypertension.

**Keywords :** Emotional Freedom Technique, Hypertension, Elderly, Mindfulness

## Abstrak

Populasi lansia di Indonesia memiliki prevalensi hipertensi tinggi mencapai 63,2%. Kondisi fisik ini diperburuk oleh kecemasan mencapai 45-60% pada lansia hipertensi di panti wredha namun belum mendapatkan intervensi non-farmakologi yang komprehensif. Kegiatan ini bertujuan memberdayakan lansia dalam mengelola kecemasan melalui penerapan kombinasi terapi Mindfulness dan *Emotional Freedom Technique* (EFT). Program melibatkan lansia hipertensi. Metode pelaksanaan dilakukan melalui tahap persiapan, pelaksanaan; edukasi kesehatan, demonstrasi, praktik langsung terapi mindfulness dan EFT, pendampingan, serta evaluasi kemampuan dalam mempraktikkan terapi, dan tingkat kecemasan sebelum dan sesudah intervensi menggunakan Hamilton Anxiety Rating Scale (HARS) serta kuesioner terstruktur.. Kegiatan ini didukung dengan media edukasi berupa buku saku dan video panduan terapi. Hasil kegiatan menunjukkan peningkatan pengetahuan dan keterampilan lansia dalam melakukan terapi secara mandiri, penurunan tingkat kecemasan. Kombinasi terapi mindfulness dan EFT terbukti efektif meningkatkan kemampuan lansia mengelola kecemasan dan dapat diterapkan secara berkelanjutan sebagai pendekatan non-farmakologis untuk meningkatkan kualitas hidup lansia hipertensi.

**Kata Kunci:** *Emotional Freedom Technique*, Hipertensi, Lansia, Mindfulness.

## A. INTRODUCTION

Globally, the increase in the number of elderly people is in line with the increasing prevalence of degenerative diseases, especially hypertension (Situmorang et al., 2022). Based on data from the Central Statistics Agency (BPS) Year 2024,

Indonesia has entered the *ageing population* structure with the percentage of the elderly reaching 12.05% of the total population, where most of them (around 53.60%) complained of health problems in the past month (Badan Pusat Statistik, 2024). Hypertension remains a predominantly disease in the elderly group. Indonesia Health Survey Data (SKI) 2023 shows that the national prevalence of hypertension reaches 30.8%, and this figure jumps dramatically in the age group of 65-74 years (63.2%) and over 75 years old (69.5%) (Tim Penyusun SKI, 2023). This condition is often triggered by decreased elasticity of blood vessels and psychological factors that are not properly managed. If left untreated, chronic high blood pressure can trigger fatal complications such as stroke and heart failure. (Vatner et al., 2021).

In addition to physical problems, aspects of the mental health of the elderly require special attention, data globally reveals that the prevalence of anxiety disorders and depression in the elderly has increased significantly post-pandemic, with the estimated anxiety rate in people with chronic diseases reaching more than 25% globally (Wang et al., 2025). With the elderly hypertension experiencing anxiety is about 38% more common than the general elderly patient population (Qiu et al., 2023). In Indonesia, the prevalence of anxiety in the elderly with hypertension living in nursing homes is much higher than that of the elderly in the community, with a figure of 45% to 60%. The monotonous conditions of the orphanage environment, limited social interactions, feelings of isolation, decreased independence, and distance from family support are the main triggers for the emergence of anxiety, which if not treated will worsen the hemodynamic condition of the body (Situmorang et al., 2022). This anxiety triggers the activation of the sympathetic nervous system that releases the hormones cortisol and adrenaline, thereby leading to an increase in heart rate and vasoconstriction of blood vessels that directly increase the risk of hypertension (Kai et al., 2024).

In reducing anxiety, its handling is crucial in patient management, because a stable mental state is the foundation for the success of physical therapy (Septiningsih et al., 2021). The condition of people with hypertension often experiences feelings of saturation in long-term pharmacological therapy, therefore, complementary approaches are now an important empowerment strategy in hypertensive patients through an independent approach to improve quality of life (Jafar, Fitriani, Takumansang, Ahmad, et al., 2025). One of the complementary therapies that has begun to be developed is *Mindfulness*. This therapy trains the elderly to focus on the

present moment with a receptive attitude, which can physiologically calm the nervous system. The relaxation effect that is carried out regularly can stabilize the blood pressure of hypertensive patients so that they achieve a more stable hemodynamic condition than before being given therapy (Amalia & Susaldi, 2024b). This condition is proven in research by Dewi et al., (2025) which proves that *the Mindfulness Therapy* approach is beneficial in lowering blood pressure in the elderly through self-regulation mechanisms and deep relaxation. Research by Ulfa and Susanto (2023) shows that mindfulness is beneficial in lowering anxiety through increased relaxation and emotional control in individuals experiencing psychological problems. Therapy to optimize anxiety reduction, on the principle *of Mindfulness*, which can be integrated with *the Emotional Freedom Technique* (EFT) works by aligning the body's energy system through gentle tapping at specific meridian points, while maintaining full awareness of the physical sensations and emotions felt (Moore-Hafter et al., 2023), This is strengthened by research by Purwitarsari et al., (2021), who stated that the provision of Emotional Freedom Technique (EFT) interventions is significantly beneficial in reducing anxiety levels in the elderly with hypertension because it is able to provide a sense of comfort and release of negative emotions quickly.

The integration of these two interventions has been shown to have a more significant impact than a single therapy. Recent research by Pratiwi (2025) shows that the combination of *Mindfulness* and *Emotional Freedom Technique* (EFT) is able to significantly reduce anxiety levels in elderly people with hypertension. The synergy between the cognitive calmness of *mindfulness* and the release of emotional inhibitions through *EFT tapping* is able to induce deep relaxation that contributes to the stabilization of the autonomic nervous system. This condition is in line with the findings of Azizah, Soesanto, & Kartikasari (2025) who stated that interventions that touch on spiritual and emotional aspects have a significant impact on reducing stress and anxiety levels for the elderly suffering from hypertension in nursing homes.

Based on a preliminary study at the Nursing Home, it was found that the prevalence of the elderly with chronic hypertension is high but has not received comprehensive non-pharmacological interventions. The purpose of community service activities with the application of this combination of therapies, is to find out the implementation outcomes of mindfulness and Emotional Freedom Technique (EFT) in overcoming anxiety in the elderly at the Surakarta Nursing Home.

## B. METHODS

Community service activities were held at the Wredha Dharma Bhakti Surakarta Nursing Home on February 26, 2026. The target of the activity is 40 elderly people with hypertension who live in a number of nursing homes. The method of implementing activities uses an educational, demonstrative, and participatory approach through the provision of health education and training in the practice of a combination of mindfulness therapy and Emotional Freedom Technique (EFT).

The implementation of activities is divided into three stages, namely the preparation stage, the implementation stage, and the evaluation stage. In the preparation stage, coordination was carried out with the manager of the nursing home related to licensing, determining the activity schedule, identifying the number of participants, and preparing educational media in the form of pocket books and therapy guide videos.

The implementation stage began with the provision of non-pharmacological therapy health education, namely a combination of Mindfulness and Emotional Freedom Techniques to reduce Anxiety. The material was delivered using interactive lecture and discussion methods so that participants could more easily understand the information provided. Furthermore, a demonstration of a combination of mindfulness therapy and EFT was carried out by the implementation team.

Clinical Demonstration: The implementation team provided a step-by-step demonstration of the integrated Mindfulness-EFT protocol. For the mindfulness component, the instructor demonstrated conscious diaphragmatic breathing (mindful breathing), focusing on the current condition, and gradual body relaxation exercises. Participants were directed to focus on body sensations, breathing patterns, and thoughts that appeared without giving negative judgments. After that, it is followed by Emotional Freedom Technique (EFT) training using tapping techniques at several points of the body's meridians, such as the head, eyebrows, under the eyes, chin, and collarbone while saying positive affirmations (positive sentences to yourself).

The specific tapping sequence targeted key meridian endpoints, including: The top of the head (Crown); The inner edge of the eyebrow (Eyebrow); The lateral bone beside the eye (Side of Eye);The infraorbital bone under the eye (Under Eye); The space between the nose and upper lip (Under Nose); The depression between the

lower lip and chin (Chin); The junction where the clavicle, sternum, and first rib meet (Collarbone); The side of the body approximately four inches below the axilla (Under Arm). At each point, participants tapped 7–10 times while taking slow, deep breaths and repeating affirmations such as, "Even though I feel anxious about my health and isolated from my family, I deeply and completely accept myself, and I choose to let this tension go." At the conclusion of these sessions, each participant received a physical pocket book and digital access to the video guide to support independent daily practice.

During the training process, participants receive direct assistance to ensure the accuracy of movements and understanding of therapy procedures. The practice is carried out repeatedly so that the elderly are able to do therapy independently. In addition, participants were also given pocket books and guide videos as independent learning media that could be used after the activity was completed.

The evaluation stage was carried out through systematic data collection before (pre-test) and after (post-test) the implementation of the program. Evaluation included two primary indicators: participant knowledge levels and anxiety profiles. Knowledge levels regarding non-pharmacological therapy and relaxation protocols were evaluated via a structured questionnaire containing 10 closed-ended items, categorized into three levels: Good (score ≥ 76%), Sufficient (56-75%), and Poor (< 56%). Anxiety levels were evaluated using the standardized Hamilton Anxiety Rating Scale (HARS) instrument. The HARS questionnaire measures psychic and somatic anxiety across 14 parameter groups, classifying anxiety into four levels: no anxiety (< 14), mild anxiety (14-17), moderate anxiety (18-24), and severe anxiety (25-30). The collected descriptive datasets were analyzed to assess changes in participants' parameters and overall goal achievement.

## C. RESULTS

Community service activities regarding the application of a combination of mindfulness therapy and Emotional Freedom Technique (EFT) were carried out on 40 elderly hypertensive patients at the Wredha Dharma Bhakti Surakarta Nursing Home. Activities are carried out through the stages of health education, therapy demonstrations, direct practice, mentoring, and evaluation of intervention results. The target of the activity is the elderly who experience hypertension and show symptoms of mild to moderate anxiety.

Prior to conducting the interventions, data on the baseline characteristics of the 40 elderly respondents were systematically gathered. The descriptive profile of the participants based on age distribution and gender categories is presented in Table 1 and Table 2 respectively below.

**Tabel 1. Distribution of Respondents Based on Age Groups (n = 40)**

| Age | Frekuensi (f) | Persentase (%) |
|---|---|---|
| 50–59 tahun | 3 | 7,5% |
| 60–64 tahun | 9 | 22,5% |
| 65–69 tahun | 16 | 40,0% |
| ≥ 70 tahun | 12 | 30,0% |
| Total | 40 | 100,0% |

**Table 2. Distribution of Respondents Based on Gender (n = 40)**

| Jenis Kelamin | Frekuensi (f) | Persentase (%) |
|---|---|---|
| Laki-laki | 14 | 35,0% |
| Perempuan | 26 | 65,0% |
| Total | 40 | 100,0% |

Based on Table 1, the age distribution of the participants shows that only a small fraction belonged to the younger pre-elderly bracket of 50–59 years (7.5%, n=3). In alignment with institutional nursing home structures, the majority of the participants were concentrated in advanced age categories, with 40.0% (n=16) in the 65–69 years group and 30.0% (n=12) aged 70 years and above. This accumulation of advanced elder groups (≥ 65 years old) represents 70.0% of the total cohort, a group highly prone to elevated biological and psychological vulnerabilities. Gender distribution in Table 2 reveals a predominance of female respondents (65.0%, n=26) compared to male respondents (35.0%, n=14).

The results of the systematic evaluation of anxiety levels using the Hamilton Anxiety Rating Scale (HARS) before and after the combined Mindfulness-EFT intervention are summarized in Table 3 below

**Table 3. Distribution of Anxiety Levels Based on HARS Score Before and After Intervention (N = 40)**

| Level Anxiety | f | % (Pre test) | f | % (Post test) ( |
|---|---|---|---|---|
| No Anxiety < 14) | 0 | 0,0% | 24 | 60,0% |
| Mild Anxiety (14 - 17) | 15 | 37,5% | 13 | 32,5% |
| Moderate Anxiety (18 - 24) | 25 | 62,5% | 3 | 7,5% |
| Severe Anxiety (25 - 30) | 0 | 0,0% | 0 | 0,0% |
| Total | 40 | 100% | 40 | 100% |

Table 3 reveals a prominent shift in the anxiety profile of the participants following the program. Prior to the intervention, none of the participants were free from anxiety; the majority experienced moderate anxiety (62.5%), followed by mild anxiety (37.5%), with severe anxiety remaining at 0.0%. However, after participating in the integrated mindfulness and EFT sessions, 60.0% of the elderly achieved a state of no anxiety. The moderate anxiety group decreased substantially to only 7.5%.

To assess the secondary impact of the educational sessions, data on the participants' understanding of the provided protocols were evaluated. Table 4 presents the comparative outcomes of the participants' knowledge distribution before and after the educational and demonstrative intervention.

**Table 4. Distribution of Knowledge Levels Regarding Non-Pharmacological Therapy (N = 40)**

| Level Knowledge | Frek(f), Persen(%) (Pre-test) | | Frek(f), Persen(%) (Post-test) | |
|---|---|---|---|---|
| Good (≥ 76%) | 4 | 10,0% | 31 | 77,5% |
| Enough (56 - 75%) | 14 | 35,0% | 7 | 17,5% |
| Less (< 56%) | 22 | 55,0% | 2 | 5,0% |
| Total | 40 | 100% | 40 | 100% |

Table 4 demonstrates a marked shift in cognitive parameters among the elderly. Prior to the interactive sessions, more than half of the participants possessed poor knowledge (55.0%, n=22), and only 10.0% (n=4) scored within the good range. Following the delivery of structured health education and hands-on practice, the percentage of participants achieving a good understanding increased drastically to 77.5% (n=31), while poor understanding declined to just 5.0% (n=2).

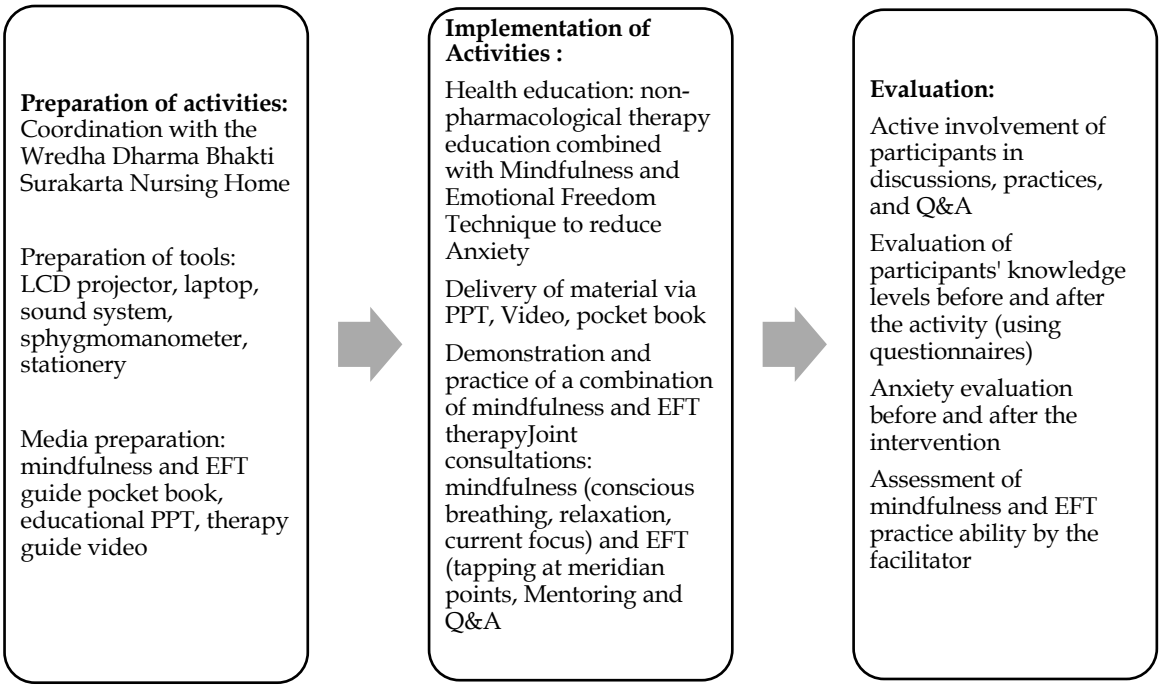


Image 1. Implementation Scheme

Figure 2. Implementation of Activities

Demonstration video Therapy combination mindfulness therapy and Emotional Freedom Technique (EFT). Link https://vt.tiktok.com/ZS94oM5As/

The results of the activity showed that the combination of mindfulness therapy and Emotional Freedom Technique (EFT) was able to improve the knowledge, skills, and ability of the elderly to manage anxiety independently. The increase in participants' knowledge occurred after being given non-pharmacological therapy education, namely a combination of Mindfulness and Emotional Freedom Technique to reduce Anxiety. Health education is one of the beneficial methods in increasing public understanding of healthy living behaviors because the learning process is carried out directly and interactively. These results are in line with the research of Jafar et al (2025) which states that a mindfulness-based educational approach can improve health awareness and self-management skills in people with hypertension and other chronic diseases. The study explained that education combined with relaxation therapy had a more optimal impact on changes in participants' health behavior.

The improvement of mindfulness practice skills in participants showed that the elderly were able to follow relaxation and concentration techniques well. Mindfulness therapy helps participants focus more on the present moment so that they are able to reduce negative thoughts and excessive worries. This condition makes the body more relaxed and helps to reduce the activation of the sympathetic nervous system. Research by Dewi et al., (2025) states that mindfulness therapy is beneficial in lowering blood pressure in the elderly with hypertension through relaxation and emotional control mechanisms. The results of the study showed a

decrease in systolic and diastolic blood pressure after regular mindfulness therapy in the elderly with hypertension.

In addition to mindfulness, EFT therapy has also shown good results in lowering anxiety in the elderly. The tapping technique performed at the meridian points of the body helps participants release negative emotions so that they create a sense of comfort and calm. Participants who previously seemed anxious and tense became more relaxed after EFT therapy. These results are in line with the research of Fitriana et al., (2023) who explained that EFT is beneficial in lowering anxiety levels and blood pressure in hypertensive elderly. The study states that EFT works through stimulation of the nervous system and the release of emotional tension so that it provides a relaxing effect on the body.

The combination of mindfulness therapy and EFT has a more optimal impact than using a single therapy. Mindfulness helps improve self-awareness and emotional control, while EFT helps reduce emotional inhibition through stimulation of the body's meridian points. The synergy of the two therapies results in deeper relaxation that helps stabilize blood pressure and reduce anxiety. The results of this activity are supported by research by Sari et al., (2020) which states that the combination of mindfulness and EFT is able to significantly reduce anxiety levels in hypertensive elderly compared to usual relaxation therapy. The study explained that the combination of the two therapies provides psychological and physiological effects simultaneously so that the results of the intervention become more beneficial.

Decreased anxiety levels in participants were also related to decreased stress hormone activity in the body. Prolonged anxiety can trigger the release of the hormones cortisol and adrenaline that cause vasoconstriction of blood vessels so that blood pressure increases. After following therapy, participants showed a more stable emotional state and more controlled blood pressure. This is in accordance with research by Sanger & Lainsamputty, (2022) which explains that increased levels of the hormone cortisol due to stress are closely related to increased blood pressure in hypertensive patients. When stress and anxiety can be controlled, the body's hemodynamic condition becomes more stable. This condition occurs because relaxation therapy is able to improve the response of the autonomic nervous system so that heart rate and blood pressure become more controlled. Research by Amalia & Susaldi, (2024) states that mindfulness-based relaxation therapy can help lower blood pressure through the process of muscle relaxation and reduction of

sympathetic nerve activity. Elderly people who routinely undergo relaxation therapy have a more stable blood pressure condition than before the intervention was given.

The success of service activities is also influenced by participatory and applicative implementation methods. Participants not only receive educational materials, but also practice directly the therapy provided. This approach helps participants understand the therapeutic steps more easily and improves their ability to practice independently. In addition, educational media in the form of pocket books and therapy guide videos also support the sustainability of the program because participants can repeat the exercises independently after the activity is completed.

From the sustainability aspect, this activity has a long-term impact on the elderly and orphanage institutions. Older people are gaining new skills in managing anxiety independently without full dependence on pharmacological therapy. Meanwhile, the orphanage obtained educational media that can be used as part of a sustainable elderly health program. Thus, this service activity not only provides temporary benefits, but also has the potential to improve the quality of life of the elderly with hypertension in the long term.

## D. CONCLUSION

Combination Therapy Mindfulness and Emotional Freedom Technique (EFT) are highly effective in reducing anxiety levels and expanding health literacy among elderly people with hypertension, shifting both baseline HARS categories and knowledge outcomes into favorable ranges. This combined approach can be applied independently at a low cost.

The recommendation is to integrate a combination of mindfulness therapy and EFT into the weekly routine agenda of the elderly by training nursing home staff as ongoing facilitators. Furthermore, public health centers need to replicate this program as a non-pharmacological intervention in Prolanis activities to expand the reach of empowerment of the elderly with hypertension. The use of this therapy as a non-pharmacological approach can be applied more widely in various regions.

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