

RELATIONSHIP BETWEEN SELF-EFFICACY AND SELF-CARE MANAGEMENT IN HYPERTENSIVE PATIENTS

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Abstract

WHO in 2023 estimated 1.28 billion adults aged 30-79 years worldwide suffer from hypertension. Hypertension should be controlled in order to prevent its complications, including through patient's self-care management. Self-care management can be influenced by patients self-efficacy. This study was aimed to determine the relationship between self-efficacy and self-care management in people with hypertension. This research was quantitative using a cross sectional study approach. The population in this study were 86 people with hypertension in Baringin Village, Lubuk Kilangan Health Center, Padang City, that employed 83 samples. Data collection was carried out using self-efficacy and self-care management questionnaires. Data was analyzed using the Chi-square test. The results showed that more than half (53.0%) of respondents had poor self-care management, more than half (56.6%) of respondents had low self-efficacy. There is a significant relationship between self-efficacy and self-care management in hypertension patients in Baringin Village, Lubuk Kilangan Health Center, Padang City. It is recommended to health professionals, including community health nurse to implement community-based interventions, focused on enhancing patients's self-efficacy and self-care interventions for people with hypertension.

Keywords: Hypertension, Self-Care Management, Self-Efficacy

1. INTRODUCTION

Hypertension is an increase in systolic blood pressure of more than or equal to 140 mmHg and diastolic of more than or equal to 90 mmHg. Hypertension sufferers are patients with the highest risk of stroke and cardiovascular disease, data from WHO (World Health Organization) in 2013, there were 9.4 million per 1 billion people in the world who died from cardiovascular disease disorders. Overall, the prevalence of hypertension is around 30-45% in adults and increases progressively with age, where it is known that there is a prevalence of >60% at age >60 years. The prevalence of hypertension is increasing most rapidly in developing countries (80% in the world), where hypertension treatment is still difficult to control, thus contributing to the increasing epidemic of cardiocerebrovascular disease (CVD) (Kemenkes, 2021). Padang City, West Sumatra in 2023, hypertension sufferers increased every year, which were 165,555 people with hypertension in 2022 and 168,130 people in 2023. reaching with a fairly high prevalence at the Lubuk Kilangan Health Center, which is 10,470 people (Padang City Health Office Profile, 2023). The occurrence of hypertension is generally not accompanied by symptoms, but there are non-specific symptoms that can appear in people with hypertension including headaches, heavy neck, dizziness, heart palpitations, restlessness, fatigue, and blurred vision (Kemenkes, 2022). Individual with hypertension

requires ongoing treatment so that blood pressure can be controlled and to avoid complications (Sinaga et al., 2022).

Hypertension can be controlled and managed using therapy, using pharmacological therapy and non-pharmacological therapy. The therapy used in hospitals is pharmacological treatment as the main treatment that must be obtained and non-pharmacological treatment as a support that can help the recovery process in patients, by controlling diet, regulating lifestyle, often doing physical activity, quitting smoking and also self-care management and modifying lifestyle (Darvishpour et al., 2022). Self-care management is a person's ability to control themselves and maintain effective behavior in self-care in order to improve the quality of life of individuals and be able to maintain their health so as to achieve an optimal level of health well-being. Individuals who have chronic diseases will experience significant changes in daily activities, so self-care management is needed in order to avoid complications and reduce symptoms and risks of complications (Fauziah & Syahputra, 2021). Self Care Management can be realized through adherence to treatment, a low-salt diet, physical activity, not smoking, and monitoring weight and blood pressure (Sinaga et al., 2022). The impacts that can arise if self-care management is not implemented include hypertension or uncontrolled blood pressure, and cause complications such as stroke, heart failure, and kidney failure (Sakinah et al., 2020). Factors that influence self-care management are education, knowledge, self-efficacy, social support, and duration of illness (Sakinah et al., 2020). According to (Djamaluddin et al., 2022), self-efficacy is closely related to a person's self-confidence regarding their ability to control their functions to achieve something and has an impact on that person's life. Self-efficacy is considered the most influential factor for changes in health behavior in patients with chronic diseases (Fatmawati et al., 2021), which can influence decisions regarding the behavior to be taken. Thus, this study was aimed to explore whether there is a relationship between self-efficacy and self-care management in Hypertensive patients.

2. METHODOLOGY

The type of research conducted is quantitative using the cross sectional study design, which was aimed to determine the relationship between self-efficacy and self-care management in hypertension patients in Baringin Village, Lubuk Kilangan Health Center Working Area, Padang City in 2025. The population was all hypertension patients, consisted of 86 patients and employed 83 people as sample. Data were collected using a self-care management variable questionnaire with 25 statements from the Development of the Persian Hypertension Self-Care Management Questionnaire and a Self-efficacy variable with 5 statements, and analyzed using Chi-Square test.

3. RESULTS

Characteristics of 83 samples were adult with age range from 18-59 years as many as 30 people and elderly ≥ 60 years as many as 53 people, female gender as many as 51 people and male as many as 32 people, working as many as 42 people and not working as many as 41 people, low education 49 people and secondary education 18 people and higher education 16 people, 45 people with hypertension are not from family history factors while 38 people are from family factors, as many as 62 people do not have comorbidities while as many as 21 people have comorbidities such as gout, heart disease, diabetes mellitus.

Table 1
Frequency distribution of Self-Efficacy and Self-Care Management in Hypertension Patients

Variable	Frequency	Percentage (%)
Self-Care Management		
Good	11	13,3
Moderate	28	33,7
Poor	44	53,0
Total	83	100
Self-Efficacy		
High	36	43,4
Low	47	56,6
Total	83	100

Analysis of respondents self efficacy and self care management in hypertension presented in Table 1 showed that 53,0 % of respondents have poor self-care management and 56,6 % of respondents have low self-efficacy.

Table 2
Relationship between Self Efficacy and Self Care Management

Self Efficacy	Self Care Management				p value
	Good (n = 11)	Moderate (n = 28)	Poor (n = 44)	Total	
					0.00
High	7 (19,4%)	22 (61,1%)	7 (19,4%)	36 (100%)	
Low	4 (8.5%)	6 (12,8%)	37 (78,7%)	47 (100%)	

The table above shows the proportion of respondents with poor self-care management is higher in respondents with low self-efficacy, which is 78.7% compared to respondents with high self-efficacy, which

is only 19.4%. Based on the statistical test, a p-value of 0.000 was obtained, so it can be concluded that there is a relationship between self-efficacy and self-care management in hypertension patients in Baringin Village, Lubuk Kilangan Health Center, Padang City in 2025.

4. CONCLUSIONS

In this study, it was found that most of respondents with poor self-care management were respondents with low self-efficacy, with a p-value = 0.000, which means there is a significant relationship between self-efficacy and self-care management in individual with hypertension in Baringin Village, Lubuk Kilangan Health Center Work Area, Padang City in 2025. This study was support the study conducted by Susanti (2022) that was aimed to explore the relationship between self-efficacy and self-care management of hypertension sufferers at the Kassi-Kassi Health Center, Makassar City in 2022. The results of the chi-square test show that the p value = 0.000 which indicates that the p value <0.05, then there is a significant relationship between the two variables, self-efficacy and self-care management.

Self-care management is very important for hypertension patients to improve their health and maintain their quality of life, it is a fundamental element and integral part of treatment for patients with chronic conditions. The beneficial effects of self-care include improved well-being and lower morbidity, mortality and healthcare costs. People with chronic conditions need to consider that they have responsibility for their own health and to be actively involved in their self-care (Riegel, B. et al, 2019).

Self-care is influenced by a variety of individual and societal level factors. Individual factors include age, gender, cultural background/race/religion, social support, cognition, disease severity/stage of disease, signs and symptoms, knowledge, skill, motivation, experience, self-efficacy, multimorbidity and frailty, where societal factors include quality of the healthcare system, providers, built environment and access to resources and basic needs (Jaarsma, T, et al, 2020).

Self-care refers to a number of actions that individuals must take to achieve a healthy lifestyle, treat their chronic diseases and prevent complications of their diseases. In individuals with hypertension, these actions include several actions that must be taken to control hypertension, including adhering to antihypertensive drugs, a low-salt diet, dietary intake, monitoring blood pressure, adequate physical activity, quitting smoking and alcohol consumption. These self-care behaviors are often not carried out obediently by hypertensive patients. One of the obstacles in implementing this self-care is the lack of motivation to change this risky behaviors, and self-efficacy can be considered the key to increasing this motivation. In Bandura's Social Cognitive Theory, it is stated that self-efficacy affects the motivation and ability to carry out self-care behaviors. According to this theory, personal cognitive and affective factors, such as beliefs and self-efficacy, contribute to a dynamic and ongoing process that can affect self-care behaviors. Individuals with high self-efficacy are able to motivate themselves to carry out self-care behaviors regularly and overcome obstacles that can prevent them from carrying out these behaviors. (Tan, et al, 2021).

Self-efficacy or a person's belief in their ability to perform an action, plays an important role in influencing self-care management in hypertensive patients. Patients who have high self-efficacy tend to be more confident and motivated to adopt healthy lifestyle behaviors, such as taking medication regularly, maintaining a diet, exercising, and monitoring blood pressure regularly. Conversely, patients with low self-efficacy may feel hesitant or unable to carry out these actions, making it easier to give up or ignore the care they need. Thus, good self-efficacy can encourage patients to be more consistent and responsible in taking care of themselves, which ultimately helps in controlling blood pressure and preventing complications of hypertension. Patients with good self-efficacy have strong self-confidence that can increase the level of sustainability in undergoing long-term care. Patients who feel able to manage their own health conditions are more likely to face challenges that arise in hypertension care, such as lifestyle changes or side effects

of drugs, and they are more open to finding solutions or asking for help when facing difficulties, and can more easily find effective strategies to control blood pressure. In addition, high self-efficacy also helps patients stay motivated even when there is no immediate visible change, such as when stable blood pressure readings take time to achieve. Thus, high self-efficacy helps patients stay committed to long-term efforts and increases the success of self-care management.

This is supported by Warren-Findlow et al., 2012, who in their research showed that even patients who have high self-efficacy in controlling their blood pressure can produce several benefits in terms of their self-care compliance including compliance in taking antihypertensive drugs. The results of the study showed that most of the respondents' jobs were housewives. Many housewives who suffer from hypertension complain of lack of exercise, because they are busy taking care of the house and children so that they have no free time to exercise and the many burdens of thought that make high blood pressure difficult to control (Indrayanti et al., 2018). The many jobs that must be done by housewives can cause stress. Stress is considered a bad thing when someone is unable to cope with stress properly. Blood pressure will be greater in individuals who have a tendency towards high emotional stress (Manullang, 2018). A person's education also affects health. The higher a person's level of education, the higher their level of health awareness (Musfirah & Masriadi, 2019). The results of the study showed that less than half of the respondents' last education was elementary school. This shows that respondents have a low educational history and therefore those who suffer from hypertension due to lack of knowledge and awareness of health are still lacking, especially in implementing a healthy lifestyle. A family history of hypertension also affects a person. According to (Nurul M, 2020) people who have a family history of hypertension have a higher risk of developing hypertension. If one of the parents suffers from hypertension, 25% of their offspring will suffer from hypertension, and if both parents suffer from hypertension, 60% of their offspring will suffer from hypertension. From the results of this study, more than half of hypertension sufferers are not caused by a family history of hypertension, but it does not rule out the possibility of developing hypertension. This study shows that there are 8.5% of patients with low self-efficacy but have good self-care management, this can be caused by several external factors that support self-care behavior. One of the main factors is strong social support from family, friends, or health workers, which can provide motivation and help patients in carrying out routine care. In addition, compliance with medical advice can also be influenced by habits or routines that have been formed, even though patients do not fully believe in their own abilities. Other factors that play a role are a sense of responsibility towards family or fear of complications of the disease, which encourages patients to maintain their health even though they feel less confident in their personal abilities. Therefore, even though self-efficacy is low, external support and other motivational factors can be the main drivers in maintaining good self-care management in hypertensive patients.

So, this study suggests a relationship between self-efficacy and self-management in hypertensive individual, where individual with low self-efficacy had poor self-care management in hypertension self-care. Therefore, it is needed for health professional, including community health nurse to implement community-based interventions, focused on enhancing patients's self-efficacy and self-care interventions for people with hypertension.

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