

THE RELATIONSHIP BETWEEN SELF-EFFICACY AND SELF-CARE MANAGEMENT IN ELDERLY PATIENTS WITH HYPERTENSION AT THE ELDERLY

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ABSTRACT

Background. One of the main strategies that can be done to improve self-care management is in terms of the patient himself increasing self-efficacy. Through self-confidence and self-motivation in their ability to implement healthy behaviors to control hypertension. This study aims to determine the relationship between Self-Efficacy and Self-Care Management in Elderly People with Hypertension at the Mangundikaran Nganjuk Elderly Posyandu.

Research Method. The research design uses a correlational study with a cross-sectional approach. The population of elderly people with hypertension was 51 people, the sampling technique was total sampling. The sample of this study was 51 respondents. The independent variable is Self-Efficacy measured using the GSE questionnaire, the dependent variable is Self-Care Management using the self-care management questionnaire. Statistical tests using Spearman rank.

Findings. The results of the study from 51 respondents, most of the respondents 35 (68.6%) had low Self-Efficacy. Almost half of the respondents 21 (41.2%) had good Self-Care Management. The results of the Spearman rank correlation test show p value = 0.001 ($\alpha \leq 0.05$) H_0 is rejected then, there is a relationship between Self-efficacy with Self-care management. The value of $r = 0.624$ which means that the direction of the relationship of this study shows a positive direction, the higher the self-efficacy the higher the self-care management.

Conclusion. One of the main strategies that can be done to improve self-care management is in terms of the patient himself increasing self-efficacy. Through self-confidence and self-motivation in their ability to implement healthy behaviours to control hypertension.

Keywords: Elderly, Hypertension, Self-Care Management, Self-efficacy

BACKGROUND

Hypertension is a significant public health issue and one of the leading causes of premature death worldwide [1]. As people age, their blood vessels' elasticity decreases, resulting in reduced ability to contract or dilate. This condition leads to increased blood pressure or hypertension. If hypertension is not addressed properly from the outset, it can cause various complications. However, hypertension can be controlled by practicing self-

care management [2]. Currently, some studies indicate that self-care management is recommended as an effective effort to control blood pressure in hypertensive patients [3]. Currently, several studies reveal that self-care management in hypertension patients is recommended as one effective way to control blood pressure in hypertensive patients (3); furthermore, the key to reducing the number of stroke attacks and premature death in hypertensive patients is good self-care management [4]. Failure in managing self-care management in elderly patients with hypertension is due to low self-efficacy, where self-efficacy is the belief held by elderly patients suffering from hypertension in their ability to carry out self-care management [2].

WHO estimates that approximately 1.28 billion adults aged 30-79 worldwide suffer from hypertension. Hypertension causes over 7 million premature deaths per year and contributes to 4.5% of the total disease burden worldwide [5]. Almost all hypertensive patients are elderly, and this becomes burdensome when combined with mental health issues. Globally, 15% of the elderly population suffer from mental disorders, and stress is one of the major mental health problems affecting most (10-55%) of the elderly population [6]. About one-third of adults in Southeast Asia have been diagnosed with hypertension, and an estimated 1.5 million deaths are attributed to hypertension each year [1].

The prevalence of hypertension in Indonesia is 34.1%. This has increased compared to the previous year's prevalence of 25.8%. It is estimated that only 1/3 of hypertension cases in Indonesia are diagnosed, with the rest remaining undiagnosed [7]. The province of East Java, based on the results of Riskesdas 2018, shows a population with high blood pressure of 36.3%. Prevalence is increasing with age, according to data from the Nganjuk District Health Office in 2020, 51% of total elderly population in Nganjuk District suffered from hypertension, which is 14,686 people.

This self-care management is essential for the elderly to control their blood pressure. Self-care is the process of providing health care actions that focus on improving the patients' or their families' or relatives' participation and ability to perform health care and disease management behaviors independently, according to their abilities [8]. However, in implementing self-care management, several obstacles can influence it such as difficulties in changing lifestyle, low patient motivation or self-efficacy to change, lack of patient awareness in identifying health problems, multi-comorbid conditions, and other physical limitations [9]. Self-efficacy is also the belief that one has the ability to perform certain activities, related to hypertension management [10].

Elderly people with hypertension must be taught how good self-care management is related to hypertension management. This aims to change behaviour for the better. The main strategy in improving hypertension self-care management is to increase self-efficacy, as self-management behaviour has a significant relationship with self-efficacy [10]. Good self-management in the form of changes in the lives of the elderly involves properly managing blood pressure. This condition requires high levels of self-management to motivate and ensure that a healthy lifestyle can be achieved. There are a few literature explain about self-efficacy and self-care management in elderly, that's why this research purposed to find out the Relationship between Self Efficacy and Self Care Management in Elderly Patients with Hypertension at the Mangundikaran Nganjuk Elderly Posyandu.

RESEARCH METHOD

The research design used a correlational study with a cross sectional approach which was carried out on 1-15 August 2023 at the Mangundikaran Nganjuk Elderly Posyandu. The population of elderly people with hypertension was 51 people, and the sampling technique used was total sampling. The measuring instrument used was General Self-Efficacy with 10 questions, with an assessment of 'able' (3), 'less able' (2), and 'unable' (1). The Self-Care Management Questionnaire consisted of 30 questions with answers never (1), rarely (2), sometimes (3), and always (4). The GSE Scale questionnaire was adopted and modified by Andi Sofyan Prasetyo (2012) who quoted from Purwanti (2019). Self efficacy in hypertensive patients has been measured and tested for validity and reliability obtained a Cronbach Alpha value of 0.280 and declared valid and reliable [11]. Self-care management questionnaire adopted from Noffenisma's research (2019) [12]. Statistical tests using Spearman's rank with α (0.05).

FINDINGS

Table 1. Characteristics of Respondents Based on Age, Gender, Education, Occupation, Length of Hypertension Suffering

Characteristics	F	%
Gender :		
Male	8	16
Female	43	84
Age :		
55-65	30	59
66-74	79	37
≥ 75	2	4
Education :		

Primary School	14	27
Junior High School	18	35
Senior High School	12	24
Higher Education	7	14
Work :		
Not Working	23	45
Farmer/trader/labourer	20	39
Retired	8	16
Duration of hypertension :		
1 year	7	12
2 year	18	35
>3 year	26	53

The results showed that out of the 51 respondents, the majority were aged 55-65 years, specifically 30 respondents (59%). Nearly all respondents were female, with 43 respondents (84%) being women. 18 respondents (35%) had an education up to junior high school level, while 23 respondents (45%) were unemployed. The majority of respondents, which were 26 (51%), had suffered from hypertension for at least three years.

Table 2. The Relationship between Self-Efficacy and Self Care Management in Elderly Patients with Hypertension at the Mangundikaran Nganjuk Elderly Posyandu.

Self-Efficacy	Self-Care Management						Total		
	Good		Enough		Less		N	%	
	N	%	N	%	N	%			
High	14	27.5	2	3.9	0	0.0	16	31.4	
Low	7	13.7	13	25.5	15	29.4	35	68.6	
Total	21	41.2	15	29.4	15	29.4	51	100.0	
		$\alpha = 0.05$		$\rho = 0.001$		$r = 0.624$			

The results showed that of the 51 respondents, most had low self-efficacy, as many as 35 respondents (68.6%). Almost half of the respondents had good self care management, as many as 21 respondents (41.2%). The results of the Spearman rank correlation test showed a p value of 0.001, with $p \text{ value} \leq \alpha (0.05)$, which means that there is a relationship between self-efficacy, and self-care management in elderly people with hypertension at the Mangundikaran Nganjuk Elderly Posyandu.

DISCUSSIONS

Self efficacy in elderly people with hypertension

The results showed that of the 51 respondents, most had low self-efficacy as many as 35 respondents (68.6%). Self-efficacy in hypertensive patients is one of the first things that is most important in making hypertensive patients want to carry out hypertension control treatment programmes [9]. High self-efficacy will have good motivation and targets. Likewise, elderly people with low self-efficacy have an impact on how blood pressure management [13]. The role of self-efficacy is influential in the management of hypertension,

because self-efficacy will provide a better understanding in the process of behaviour change. This can be the main capital for people with hypertension to change their lifestyle for the better [14]. Low self-efficacy in the elderly with hypertension is likely to be caused by respondent characteristics such as age, education, gender [15].

Self Efficacy in old age is related to acceptance and rejection of the abilities possessed along with the physical deterioration experienced. Age that is no longer young will be more difficult to change individual behaviour. Those who are accustomed to previous behaviour will make it difficult for the elderly to adapt to new behaviours or lifestyles. Education is closely related to knowledge and is not one of the causes of hypertension but education can influence lifestyle [16]. Education is part of knowledge. Through education, the elderly get information related to the management of hypertension.

The results showed that almost all respondents were female, namely 43 respondents (84%). Women are more likely to comply with recommendations from health workers so that their beliefs and abilities in managing their illness are better [15]. The length of time suffering from hypertension makes self-efficacy in the elderly vary. The experience of hypertension will make the elderly more aware of how to regulate blood pressure. In addition, the individual's experience of treating his illness is related to the length of time the individual experiences the disease. When the experience he has experienced is good, it means that it can make his health better so that from this experience it can increase the motivation to take good care of himself. However, if the previous experience is not good, it will reduce his motivation to take care of himself so that there can be a decrease in his health [15].

Self care management in elderly hypertension

The results showed that almost half of the respondents had good self-care management as many as 21 respondents (41.2%). Self care management is a process that involves individuals in managing their health by adopting skills and behaviours to prevent disease, treat and restore health. Self-care involves the ability of individuals to care for themselves to maintain optimal health [15]. The age of the elderly between 55-65 years, namely 30 respondents (59%), makes it related to good self-care management. Hypertensive patients who are older, have more time to carry out self-care management Good self-care management in the elderly with hypertension can be caused by the length of time suffering from hypertension. The experience of elderly hypertension in the community varies greatly, which cannot be expressed quantitatively, the experience of the elderly will provide useful

information for appropriate care interventions so that it can support the elderly care process in the future [17].

The relationship between self efficacy and self care management in elderly hypertension

The results of the spearman rank correlation test show p value = 0.001, p value $\leq \alpha$ (0.05) which means that there is a relationship between self efficacy and self care management in elderly people with hypertension at the Mangundikaran Nganjuk Elderly Posyandu. Hypertensive elderly self-care is influenced by several factors, one of which is Self Efficacy. Self Efficacy is an important factor in performing self-care. By building patients' confidence in their ability (Self Efficacy) to influence the results they want to achieve seems to be a positive way that can encourage someone to carry out successful and successful self-care in patients with chronic diseases [15]. The main strategy in improving hypertension self care management is to increase self efficacy, this is because self-management behaviour has a significant relationship with self efficacy [10]. Good self-management in the form of changes in the lives of the elderly through the behaviour of managing blood pressure well, this condition requires high self-management to motivate and ensure that a good lifestyle can be achieved.

CONCLUSION

The role of nurses plays an important role in motivating patients towards their recovery and quality of life by helping hypertensive patients to build a high self-efficacy mechanism for their abilities and increasing their awareness related to the prevention of hypertension and developing healthy living habits through health education in hypertensive patients. Nurses can improve patients' self efficacy by building confidence, motivating patients on their ability to implement healthy behaviours to control hypertension.

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