CHAPTER V. CONCLUSION

A. Conclusion

- Based on the results of the study, it shows that most of the elderly respondents' ages range from 60-69 years. The majority of respondents are female, and the most dominant respondent education is not finishing school. Most of the elderly also have hypertension for 1-5 years. In this study, it was found that age, gender, last education, and duration of hypertension had a significant correlation with self-management behavior.
- 2. The results of this study indicate that the psychological well-being variable at the dominant level of psychological well-being in the low category is 47.1%, while the level of moderate psychological well-being in this study is 43.3%, and for the high level of psychological well-being in this study is 9.6%.
- 3. The results of this study indicate that the hypertension self-management variable in the elderly in this study is dominant in the poor category of 60.6%, while moderate self-care behavior in this study is 30.8%, and high self-care behavior is 8.7%.
- 4. There is a significant relationship between psychological well-being and self-management behavior in elderly people with hypertension at a strong correlation level and positive direction relationship.

B. Suggestion

1. For Elderly and Family

Elderly are advised to improve psychological well-being through determining life goals by actively participating in social activities and increasing self-development through training or courses according to their interests, and families are advised to facilitate elderly autonomy by providing opportunities for the elderly to have opinions and make choices. Elderly are also advised to be able to improve self-management behavior by more actively discussing with health workers to increase knowledge related to hypertension, practicing self-regulation through recording blood pressure

patterns to make regular health plans, and asking for family help to encourage the elderly to maintain a healthy lifestyle.

2. For Educational Institution

Educational institutions, especially those focusing on the health sector, are advised to integrate learning about the importance of psychological well-being in the curriculum, especially in gerontic nursing and medical-surgical nursing education or related disciplines. Learning is suggested by paying attention to a holistic nursing approach, which not only considers the physical aspects of the patient, but also the psychological aspects, in order to support comprehensive health management, including the management of hypertension in the elderly.

3. For Health Services

Health services are advised to provide social programs that involve the elderly, support their participation in health-related decision-making, and offer training or self-development activities according to the interests of the elderly to improve their holistic well-being. In addition, providing psychosocial support and education related to hypertension self-management is also recommended to improve medication adherence, healthy lifestyle management, and overall psychological well-being.

4. For Other Researchers

Future research is expected to expand the scope of the study by considering additional variables, such as social support, economic conditions, or cultural factors that contribute to psychological well-being and self-management behavior in the elderly with hypertension. In addition, the use of longitudinal methods can be considered to evaluate the dynamics of changes in psychological well-being and self-management behavior of the elderly over a period of time, thus providing more in-depth and specific results regarding the factors that influence these two aspects.