

## CHAPTER V CONCLUSION

### A. Conclusion

This study concludes that hypertension patients in the working area of Jatilawang Public Health Center are predominantly adults to elderly, female, unemployed, and have a low educational background, with most respondents having experienced hypertension for 1–5 years. The level of family support received by respondents was generally moderate, with emotional support being the strongest component, while informational and instrumental support were relatively less optimal. Most respondents demonstrated a moderate level of self-management, with adherence to recommended guidelines as the strongest domain, whereas self-integrity and interaction with healthcare professionals were the weakest domains.

Bivariate analysis revealed a statistically significant positive relationship between family support and self-management among patients with hypertension; however, the strength of the relationship was weak. These findings indicate that self-management is influenced not only by family support but also by various other internal and external factors. Given the cross-sectional nature of this study, the relationship identified reflects an association rather than causation. Therefore, improving self-management in patients with hypertension requires a comprehensive approach that includes strengthening family involvement, enhancing patient-centered health education, and increasing the active role of healthcare professionals in supporting sustainable hypertension management.

### B. Suggestion

1. For respondents
  - a) Considering that interaction with healthcare professionals was identified as the weakest aspect of self-management, respondents are encouraged to be more proactive during healthcare visits by asking questions, expressing concerns, and seeking clarification regarding medication use, dietary management, and physical activity to ensure appropriate and sustainable hypertension management.

- b) Given that self-integrity was the second weakest domain, respondents are advised to strengthen their commitment and consistency in performing self-management behaviors, such as creating medication schedules, attending regular health check-ups, and routinely monitoring blood pressure as a form of personal responsibility for their health.
  - c) Respondents are also encouraged to actively involve family members, particularly in providing reminders for medication adherence and blood pressure monitoring, as well as emotional support, to help maintain motivation and confidence in managing hypertension over the long term.
2. For health workers
- a) In response to the low level of patient interaction with healthcare providers, health workers are advised to improve therapeutic communication by providing more opportunities for patients to ask questions, using clear and easy-to-understand language, and routinely evaluating patients' understanding of hypertension management.
  - b) Health workers are expected to strengthen patients' self-integrity by acknowledging patient adherence, setting realistic management goals, and encouraging patients to take an active role in their own care.
  - c) Health workers are also encouraged to involve family members in health education activities, particularly for patients with a moderate level of self-management, so that family support can help improve the consistency and sustainability of self-management behaviors.
3. For health institutions
- a) Health institutions are expected to support family involvement in hypertension management through institutional policies, standard operating procedures, and integrated service programs that emphasize family participation in chronic disease care.
  - b) Health institutions are encouraged to develop family-based education programs, such as hypertension classes or family counseling sessions, focusing on improving health literacy, family involvement, and strengthening patients' self-integrity in managing hypertension at home.

- c) The results of this study may serve as a basis for developing family-based nursing interventions aimed at improving the sustainability of self-management and enhancing the quality of life of patients with hypertension.
4. For education institutions
- a) Educational institutions are expected to use the findings of this study as a contextual reference in community nursing and family nursing education, particularly regarding the importance of healthcare worker–patient interaction and patient self-integrity in chronic disease management.
  - b) This study may also be utilized as a case study in the learning process to illustrate how limited interaction with healthcare providers and low self-integrity can affect self-management outcomes in patients with hypertension.
5. For future research
- a) Future studies are recommended to explore factors contributing to low patient interaction with healthcare professionals, such as communication barriers, patient perceptions, health literacy, and healthcare service limitations.
  - b) Further research is encouraged to develop and evaluate interventions specifically aimed at improving self-integrity, for example through motivational counseling or self-efficacy-based approaches.
  - c) Subsequent studies may include additional variables such as self-efficacy, health literacy, or the utilization of health technology, which may strengthen the relationship between family support and self-management.
  - d) It is also recommended that future research employ interventional or experimental designs to directly examine the effectiveness of increased healthcare interaction and family support in improving self-management among patients with hypertension.