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The relationship between family support and self-care management among patients with hypertension

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Abstract

Background: Hypertension is a non-communicable disease that requires long-term management. Effective hypertension control involves not only pharmacological treatment but also self-care management practices, including medication adherence, physical activity, dietary regulation, blood pressure monitoring, and stress management. Family support is considered an important factor that may influence patients' ability to perform self-care behaviors.
Purpose: To determine the relationship between family support and self-care management among patients with hypertension.
Method: A quantitative correlational design with a cross-sectional approach. The study population consisted of patients with hypertension at the Baros Public Health Center, Sukabumi. A total sampling technique was applied, involving 86 respondents. Data were collected using questionnaires measuring family support and self-care management. Data analysis was performed using the Spearman's rho correlation test.
Results: The majority of respondents received good family support (n=69; 80.2%) and demonstrated good self-care management (n=64; 74.4%). The Spearman's rho correlation test showed a statistically significant relationship between family support and self-care management among patients with hypertension ($p < 0.001$; $r = 0.878$).
Conclusion: Family support is significantly associated with self-care management among patients with hypertension. Strengthening family involvement through health education and hypertension management programs may support patients in improving self-care practices and maintaining better disease control.

Keywords: Chronic Disease Management; Family Support; Hypertension; Self-Care Management.

INTRODUCTION

Indonesia continues to face various health problems that have become global concerns. These health problems can be categorized into infectious diseases and non-communicable diseases (NCDs). Currently, NCDs have become a major public health challenge at both global and national levels. Hypertension is one of the most prevalent NCDs worldwide and requires serious attention due to its substantial contribution to morbidity and mortality (Kurnia et al., 2020). More than three-quarters of cardiovascular disease-related deaths occur in low- and middle-income countries. Hypertension is a condition characterized by persistently elevated blood pressure above normal levels. This condition occurs when the pressure exerted by blood against the arterial walls remains high, causing the heart to work harder to circulate blood throughout the body.

According to the World Health Organization (WHO), approximately 1.28 billion adults aged 18 years and older worldwide are living with hypertension (World Health Organization, 2025). Despite various global efforts and strategies implemented to control hypertension, only around 21% of individuals with hypertension have their condition under adequate control. Furthermore, nearly 46% of people with hypertension are unaware of their condition and

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therefore do not receive appropriate management. The WHO also reported that the global prevalence of hypertension reached approximately 33% in 2023, with nearly two-thirds of cases occurring in low- and middle-income countries (World Health Organization, 2025).

In Indonesia, hypertension remains a significant health concern, particularly in West Java Province. Research findings indicate that approximately 3,728,011 individuals in West Java were diagnosed with hypertension in 2019 (Muharram et al., 2025). In Sukabumi Regency, the number of hypertension cases reached 221,098, representing approximately 63.27% of the population (West Java Provincial Government, 2025). Furthermore, based on the 2023 Indonesian Health Survey (SKI), the prevalence of hypertension among the productive-age population (15–59 years) in West Java was recorded at 23.5%. Therefore, hypertension remains one of the leading health problems reported at the Baros Public Health Center, Sukabumi.

The management of hypertension is strongly influenced by patient behavior, particularly in implementing self-care practices. Essential components of hypertension self-care include lifestyle modification, such as maintaining body weight, reducing salt intake, avoiding smoking and excessive alcohol consumption, engaging in regular physical activity, adhering to prescribed medication, monitoring blood pressure regularly, and managing stress (Konlan & Shin, 2023). Lifestyle modification is an important aspect of hypertension prevention and control because effective management cannot rely solely on pharmacological treatment (Muthiyah et al., 2023). Self-care management enables patients to optimize their health status, control their condition, and reduce the risk of hypertension-related complications (Chen et al., 2025).

Self-care management refers to an individual's ability to perform activities independently to maintain health and well-being (Davis et al., 2024). Patients with hypertension are expected to develop adequate self-care abilities, including regular blood pressure monitoring, medication adherence, and consistent implementation of healthy lifestyle behaviors, as these factors play an important role in controlling hypertension (Widyastuti et al., 2025). Previous studies have demonstrated that effective self-care management among hypertensive patients is influenced by supportive factors, including family involvement and encouragement in maintaining healthy behaviors (Nurfitasari et al., 2023; Rasdiyanah et al., 2026).

According to Dorothea E. Orem's Self-Care Deficit Nursing Theory, self-care is an individual's ability to perform activities necessary to maintain health and achieve well-being. This theory emphasizes that individuals may experience limitations in performing self-care activities, requiring support from family members and healthcare providers. In hypertension management, patients may experience self-care deficits related to blood pressure control and lifestyle modification. Therefore, collaboration between patients, families, and healthcare services is necessary to improve health outcomes and prevent complications (Al Fajar et al., 2024). Family involvement has been identified as an important component in supporting patients' ability to perform self-care activities and manage hypertension effectively (Chrismilasari et al., 2024).

One of the important factors influencing self-care behavior among patients with hypertension is family support (Bravo et al., 2020). Family support plays an essential role in assisting patients to monitor their health condition, maintain treatment adherence, and prevent hypertension complications both at home and during healthcare visits. Previous studies have shown that family support is significantly associated with self-care behavior among patients with hypertension, as families provide emotional, informational, and practical assistance that encourages patients to maintain disease management behaviors (Chrismilasari et al., 2024; Nurfitasari et al., 2023; Rasdiyanah et al., 2026). Patients receiving adequate family support tend to demonstrate better hypertension management behaviors compared with those receiving limited support (Susanto et al., 2024). Similarly, one research reported that family support is related to self-care behavior among individuals with hypertension, although the strength of association may vary depending on patient characteristics and healthcare context (Simanullang et al., 2025). These findings highlight the importance of family involvement as part of a comprehensive approach to hypertension management.

The Baros Public Health Center, Sukabumi, was selected as the research location based on several considerations. The healthcare facility provides

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primary healthcare services frequently accessed by the community, including the management of non-communicable diseases such as hypertension. Based on preliminary observations conducted by researchers, the number of hypertension patient visits at the Baros Public Health Center remains relatively high. However, several patients continue to demonstrate inadequate self-care management, including irregular blood pressure monitoring, inconsistent medication adherence, and limited implementation of healthy lifestyle behaviors. Therefore, further research is needed to analyze factors related to self-care management among patients with hypertension, particularly the role of family support in improving hypertension control.

RESEARCH METHOD

A quantitative correlational research design with a cross-sectional approach. Correlational research aims to identify the relationship between two or more variables without intervention from the researcher. The cross-sectional approach was applied by collecting data at one specific time to analyze the relationship between family support and self-care management among hypertension patients at the Baros Public Health Center, Sukabumi.

The population in this study consisted of all hypertension patients aged >18 years who visited the Baros Public Health Center, Sukabumi. The total population obtained during the study period was 86 patients, and all participants were included as the research sample using a total sampling technique. The inclusion criteria were hypertension patients aged >18 years, willing to participate, residing in the research area, and without hypertension-related complications. Patients experiencing complications were excluded from the study.

This study consisted of two variables: family support as the independent variable and self-care management as the dependent variable. Family support was defined as the assistance provided by family members through emotional, informational, instrumental, and appreciation support. Meanwhile, self-care management referred to the ability of hypertension patients to independently manage their health conditions through medication adherence, dietary regulation, physical activity, blood pressure monitoring, and healthy lifestyle practices.

Data were collected using questionnaires administered directly to respondents. The family support variable was measured using a 12-item questionnaire based on a Likert scale, while self-care management was assessed using the Hypertension Self-Care Profile (HBP-SCP) instrument consisting of 20 items (Upoyo et al., 2021). The validity test showed that all items in both instruments were valid with a p-value <0.05. The HBP-SCP instrument also demonstrated good reliability, with Cronbach's alpha values ranging from 0.60 to 0.82, indicating acceptable internal consistency.

Data analysis included univariate and bivariate analysis. Univariate analysis was performed to describe the frequency distribution of family support and self-care management among respondents. Bivariate analysis was conducted using the Spearman's rho correlation test because the variables were measured on an ordinal scale. A p-value <0.05 indicated a statistically significant relationship between family support and self-care management, while a p-value >0.05 indicated no significant relationship.

Ethical approval was obtained before the research was conducted. This study received ethical clearance from the Research Ethics Committee of STIKES Sukabumi with approval number 003455/Kep STIKES Sukabumi/2026. Permission was also obtained from the Baros Public Health Center, Sukabumi. All respondents provided informed consent, and confidentiality of participant information was maintained throughout the study.

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RESEARCH RESULTS

Table 1. Characteristics of the Respondents (N=86)

Variables	Results
Age (Mean±SD)(Range)(Year)	**(47.75±7.22)(18–60)**
Age (n/%)	
18-40	11/12.8
41-60	75/87.2
Gender (n/%)	
Male	50/58.1
Female	36/41.9
Education (n/%)	
Elementary School	43/50.0
Junior High School	4/4.7
Senior High School	38/44.2
Bachelor	1/1.2
Occupation (n/%)	
Employed	64/74.4
Not Employed	22/25.6
Marital Status (n/%)	
Single	4/4.7
Married	58/67.4
Divorced	24/27.9
Duration of Hypertension (n/%)	
1-2 Year	32/37.2
2-4 Years	37/43.0
>4 Years	17/19.8
Family Support (n/%)	
Good	69/80.2
Fair	7/8.2
Poor	10/11.6
Self Care Management (n/%)	
Good	64/74.4
Fair	14/16.3
Poor	8/9.3

Table 1 presents the characteristics of 86 respondents with hypertension. The majority of respondents were aged 41-60 years (87.2%), while only 12.8% were aged 18-40 years. Based on gender, most respondents were male (58.1%), whereas female respondents accounted for 41.9%. Regarding educational background, half of the respondents had completed elementary school (50.0%), followed by senior high school (44.2%). Most respondents were working (74.4%), and 67.4% were married. In terms of hypertension duration, the majority of respondents had

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experienced hypertension for 2-4 years (43.0%), followed by 1-2 years (37.2%) and more than 4 years (19.8%). Regarding the main study variables, most respondents reported good family support (80.2%), while only a small proportion had fair (8.2%) and poor family support (11.6%). Similarly, self-care management among respondents was predominantly categorized as good (74.4%), followed by fair (16.3%) and poor (9.3%). These findings indicate that most hypertension patients in this study received adequate family support and demonstrated good self-care management practices.

Table 2. The Relationship Between Family Support With Self Care Management In Hypertension Patient (N=86)

Variable	Self Care Management			p-value	Spearman's rho
	Good (n=64)	Fair (n=14)	Less (n=8)		
Family Support (n%)					
Good	63/91.3	6/8.7	0/0.0	< 0.001	0.878
Fair	1/14.3	6/85.7	0/0.0		
Poor	0/0.0	2/20.0	8/80.0		

Table 2 presents that based on the results of the cross-table on family support with self-care management, it is known that of the 86 respondents, the majority have good family support, namely 69 respondents (80.2%), and a small portion have fair family support, namely 7 respondents (8.2%). Most have good self-care management, namely 64 respondents (74.4%), and a small portion of 8 (9.3%) respondents have poor self-care management.

DISCUSSION

Based on the research findings, 69 respondents (80.2%) received good family support, while 7 respondents (8.2%) received fair family support and 10 respondents (11.6%) received poor family support. Regarding self-care management, 64 respondents (74.4%) demonstrated good self-care management, 14 respondents (16.2%) demonstrated fair self-care management, and 8 respondents (9.3%) demonstrated poor self-care management. These findings indicate that patients with better family support tend to demonstrate better self-care management practices. Patients who received adequate family support were more likely to perform self-care activities effectively, including medication adherence, regular blood pressure monitoring, maintaining a healthy diet, limiting alcohol consumption, engaging in physical activity, and managing stress. Conversely, patients with limited family support tended to demonstrate less optimal self-care behaviors.

The statistical analysis showed a significant relationship between family support and self-care management among hypertension patients at the Baros Public Health Center, Sukabumi, with a p-value of <0.001 and a Spearman's rho correlation coefficient of 1.00. Since the p-value was lower than 0.05, the null hypothesis was rejected, indicating a statistically significant relationship between family support and self-care management. These findings suggest that family support plays an important role in enhancing the ability of hypertension patients to manage their health conditions through appropriate self-care practices.

The findings of this study are consistent with Friedman's theory, which defines family support as the attitudes, actions, and acceptance demonstrated by family members toward individuals experiencing health problems (Krisnawati & Abiddin, 2024). Family support helps patients adapt to chronic illness conditions and maintain appropriate health behaviors. For patients with hypertension, continuous family support is essential because hypertension requires long-term management. Without sufficient family support, patients may experience reduced motivation, decreased adherence to treatment, and difficulties in maintaining healthy lifestyle behaviors (Dasgupta et al., 2025).

Family support represents a form of family involvement through attitudes, behaviors, and assistance aimed at improving the well-being of family members (Susanto et al., 2024). This support can be provided through emotional, informational, instrumental, and appreciation support. Emotional support includes attention, affection, and empathy from family members. Informational support involves

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providing advice related to treatment, disease management, and health monitoring. Instrumental support includes assistance with healthcare costs, access to healthcare services, and referral support. Meanwhile, appreciation support is provided through encouragement, recognition, and positive reinforcement to help patients remain motivated and adherent to their treatment plans (Fitriani et al., 2024).

The results of this study are also supported by previous research indicating that family support is an important factor influencing self-care behavior among patients with hypertension (Chacko & Jeemon, 2020). Family support can increase patient motivation to engage in preventive behaviors and manage their disease effectively. Families can act as supervisors and companions by encouraging patients to adopt healthy lifestyles, such as reducing unhealthy food consumption, avoiding alcohol and smoking, participating in physical activities, and adhering to prescribed medications (Kurnia et al., 2020).

The relationship between family support and self-care management in this study can also be interpreted based on the characteristics of respondents. The majority of respondents were aged 41–60 years (75 respondents or 87.2%) and were married (58 respondents or 67.4%). These characteristics indicate that most patients lived with spouses or family members who had frequent daily interactions with them. This living arrangement may facilitate family involvement in providing direct support, reminders, and supervision of self-care activities, thereby contributing to the high level of family support and good self-care management observed in this study (Surya & Alfita, 2025).

Gender characteristics may also contribute to the relationship between family support and self-care management. The majority of respondents were male (50 respondents or 58.1%). Male patients who receive strong family support may benefit from continuous assistance in managing their health conditions, particularly in maintaining dietary regulation, medication adherence, and attending routine health examinations. The presence of supportive family members allows patients to implement self-care behaviors more consistently in daily life.

The educational characteristics of respondents, where most participants had elementary education (43 respondents or 50.0%) and senior high school education (38 respondents or 44.2%), may also influence the effectiveness of family support. Patients and family members with better educational backgrounds may have greater ability to understand health information provided by healthcare professionals. This enables family support to be delivered more effectively and translated into practical self-care behaviors. Furthermore, occupational characteristics showed that most respondents were employed (64 respondents or 74.4%). Employment status may support the availability of instrumental assistance, including financial support for healthcare needs and access to treatment, which can contribute to better self-care management among hypertension patients (Berek et al., 2023).

The findings regarding family support can also be explained through Orem's Self-Care Deficit Nursing Theory. Although Orem emphasizes individual self-care agency, the ability to perform self-care activities can be influenced by environmental factors and supportive relationships (Khademian et al., 2020). Family members can facilitate self-care practices by providing encouragement, reminders, assistance, and emotional support, which enable patients to manage hypertension more effectively. This interpretation is consistent with previous evidence showing that adequate family support is associated with better hypertension management, including improved medication adherence, dietary practices, and blood pressure control (Chacko & Jeemon, 2020).

Based on these findings, the Baros Public Health Center, Sukabumi, can strengthen hypertension management programs by increasing family involvement through health education, counseling sessions, routine blood pressure monitoring, and chronic disease management programs (Prolanis). Family participation in these activities may enhance both family support and patients' self-care management abilities, ultimately improving hypertension control and reducing the risk of complications.

This study has several limitations that should be considered when interpreting the findings. First, the cross-sectional design limits the ability to establish causal relationships between family support and self-care management. Therefore, the findings should be interpreted as an association rather than a cause-and-effect relationship. Second, this study used self-reported questionnaires, which may have introduced recall bias and social desirability bias, as participants

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may have reported behaviors that differed from their actual practices. Future studies using longitudinal designs and objective measurements are recommended to provide stronger evidence regarding the long-term effects of family support on hypertension self-care management. Patients who received better family support tended to have better self-care management abilities. Therefore, strengthening family involvement should be considered an important component in hypertension management strategies to support patients in maintaining effective self-care behaviors.

CONCLUSION

A significant relationship was identified between family support and self-care management among patients with hypertension ($p =< 0.001$). The results revealed that the majority of respondents received good family support, accounting for 69 individuals (80.2%), while 64 respondents (74.4%) demonstrated good self-care management practices. These findings highlight that robust family engagement plays a crucial role in enhancing effective self-care management for individuals living with hypertension.

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