Significance of Self-Efficacy in Changing Self-Care Management for Hypertensive Patients

Wahyuningsih Safitri[1,4], Muhammad Akhyar[2], and Sri Mulyani[3]

[1] Postgraduate Program of Community Empowerment/Development Counseling, Universitas Sebelas Maret, Surakarta, Indonesia
[2] Department of Biology Education, Faculty of Teacher Training and Education, Universitas Sebelas Maret, Surakarta, Indonesia
[3] Department Anesthesiology Nursing, Universitas Sebelas Maret, Surakarta, Indonesia
[4] Nursing Program, Faculty of Health, Universitas Kusuma Husada, Surakarta, Indonesia
wahyuningsihsafitri@student.uns.ac.id;
wahyuningsihsafitri@gmail.com

Abstract. Hypertension as a chronic condition requires long-term management, in which self-efficacy is a critical determinant of therapeutic success. Low levels of self-efficacy correlate with perceptions of inability to adhere to therapeutic regimens, thereby potentially increasing the complications risk. This research sought to examine the significance of self-efficacy in the self-care management processes among individuals with hypertension. It employed a comprehensive literature review method, adhering to the PRISMA guidelines. Literature searches were conducted on Google Scholar, Garuda, PubMed, and EBSCO electronic databases using a Boolean search strategy with the keywords "self-efficacy," "self-care management," and "hypertension." The inclusion criteria included empirical articles in Indonesian or English published between 2020 and 2025 that examined self-efficacy and self-care management, excluding systematic reviews. The selection process obtained 12 articles that fulfilled the narrative synthesis criteria, comprising five articles that explored self-efficacy and seven articles that focused on self-care management strategies. The analysis deduced that effective self-care practices are significantly influenced by knowledge, family social support, and telenursing interventions. The implementation of optimal self-care management has been demonstrated to improve self-efficacy by promoting sustainable lifestyle modifications, which are essential for preventing exacerbations and maintaining blood pressure stability, thereby encouraging more consistent therapy adherence, and contributing to improved overall health outcomes.

Keywords: Self-care management, self-efficacy and hypertensive patients

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1 Introduction

Primary hypertension constitutes the predominant etiological factor underlying cardiovascular disease morbidity [1]. It represents a significant global health concern, affecting approximately 31.1% of the adult population worldwide, equivalent to roughly 1.39 billion individuals, and accounting for approximately 9.4 million deaths annually [2]. Data from the Basic Health Research indicated that the prevalence of hypertension among adults aged 18 years and above was 34.1%. The highest prevalence of hypertension was documented in South Kalimantan, reaching 44.1%, whereas the lowest prevalence was observed in Papua at 22.2%. Within Indonesia, the estimated total number of individuals affected by hypertension was approximately 63,309,620. Additionally, hypertension-related mortality was estimated at approximately 427,218 deaths [3].

Patients with inadequately controlled hypertension exhibit an increased risk of mortality attributable to cardiovascular disease. Hypertension is responsible for approximately 45% of mortality due to heart disease and 51% of fatalities resulting from stroke. As with other chronic conditions, hypertension necessitates sustained management and lifelong treatment, which can be effectively achieved through adherence to a healthy lifestyle and the consistent use of antihypertensive medications [4].

The practical implementation of self-care strategies is essential for achieving successful treatment outcomes in individuals with hypertension. Recommended interventions include weight reduction, reduced sodium consumption, increased physical activity, dietary modifications, moderation of alcohol intake, and avoidance of tobacco use. Lifestyle interventions are essential components in the management of hypertension and demonstrate optimal efficacy when combined with consistent adherence to pharmacological treatment [5].

The ecological model of human development, proposed by Bronfenbrenner, functions as a theoretical framework for understanding behavioral change by recognizing the influence of multiple levels of determinants, including both individual characteristics and environmental factors. McLeroy and colleagues adapted this conceptual framework to emphasize the importance of both individual and social environmental influences, particularly within the context of health promotion efforts. This multilevel model describes five concentric layers of influence: intrapersonal, interpersonal, institutional, or organizational, community, and public policy (6). At the intrapersonal level, individual characteristics, including knowledge, literacy, and self-efficacy, serve as essential determinants influencing behavior. Interpersonal relationships with family members, colleagues, and friends are instrumental in constructing individual behaviours. Furthermore, interactions within organisational settings, institutions, and informal social networks also exert considerable consequences on behavioural patterns [6].

Recent studies suggest that bolstering self-efficacy is crucial for the effective management of hypertension, in conjunction with maintaining a low-sodium dietary regimen and engaging in regular physical activity. Furthermore, the behaviour transformation framework proposed by Michie et al. (2014) emphasises self-efficacy as a key factor in both initiating and sustaining health-related behavioural modifications. Indi-

viduals exhibiting low levels of self-efficacy frequently perceive themselves as incapable of adhering to health guidelines, which can indirectly elevate their risk of developing hypertension [7].

Previous research has demonstrated that self-care behaviours among individuals with hypertension are markedly inadequate, with medication adherence rates at 37.7%, adherence to a low-salt diet at 16.9%, engagement in physical activity at 10.4%, and weight management at 20.8% [8]. The deficiency in effective self-care management contributes to a decline in the quality of life for hypertensive patients, increases their dependence on healthcare services, and imposes additional burdens on healthcare providers. Furthermore, such poor self-care practices can elevate healthcare costs and diminish the active involvement of family members and caregivers in patient management. The importance of self-care in the management of hypertension, noting that non-adherence to prescribed behavioral interventions can hinder effective blood pressure regulation and increase the likelihood of associated health complications [9]

Individuals diagnosed with hypertension should maintain the capacity for autonomous self-care. Several determinants influence self-management behaviours in hypertensive patients, including age, gender, educational attainment, occupational status, marital status, level of knowledge, self-efficacy, familial support, social networks, economic circumstances, and the duration of the hypertensive condition [10]. Self-efficacy emerges as a critical factor, serving as a fundamental prerequisite for behavioural modification, as it influences the initiation of health-promoting behaviours [11]. Effective management of hypertension necessitates sustained, long-term patient engagement, with self-care behaviours playing a pivotal role; neglect in self-care can result in severe complications and increased mortality risk [12]. As noted by Darvishpoor et al., self-efficacy is a key determinant in self-care practices, with hypertensive individuals exhibiting higher self-efficacy demonstrating greater motivation to adopt healthy lifestyles, thereby reducing the likelihood of complications and enhancing overall quality of life [13].

A concise synthesis of situational factors, the researcher conducted a literature review entitled “Significance of self-efficacy in changing self-care management for hypertensive patients”.

2 Tools and Method

This literature review systematically examined scholarly articles exploring the role of self-efficacy in the self-care practices of individuals with hypertension. Utilizing a comprehensive search strategy, the review incorporated both Indonesian and English keywords such as "self-efficacy," "self-care," and "hypertension," in various combinations. In academic research, combining the keywords "medical self-efficacy" with the Boolean operators "AND" and "OR" facilitates comprehensive literature searches, enabling the identification of relevant studies on patient confidence and health management.

The inclusion criteria encompassed articles that addressed self-efficacy and self-care management among hypertensive patients, employing both qualitative and quantitative research methodologies. The studies were limited to those conducted within Indonesia

and excluded systematic reviews and literature reviews. Eligible articles were published in English or Indonesian within the period from 2020 to 2025. The systematic review adhered to the PRISMA guidelines. An extensive review was conducted various online databases, including Google Scholar, Portal Garuda, PubMed, and the Directory of Open Access Journals (DOAJ), to identify empirical studies published in the specified languages and within the specified timeframe.

The literature search was performed on September 21, 2025. Following data collection, the researchers screened titles and abstracts to identify and exclude duplicate publications. This process also involved selecting articles pertinent to the study's objectives. In the final phase, a narrative synthesis was conducted independently, and the findings were analyzed and discussed accordingly. Upon completion of the article selection process, the included studies were systematically organized according to the following criteria: title, authorship, publication year, research design, and research focus. The outcomes of the synthesis were subsequently presented in the form of a flowchart.

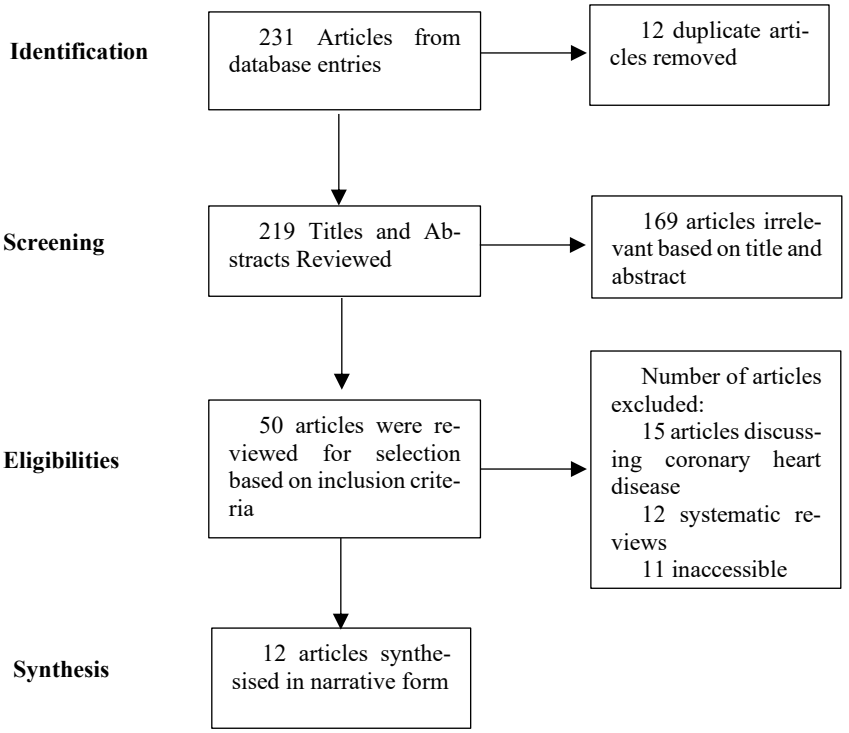

Fig. 1. Synthesis results of 12 main articles

3 Result

The literature search yielded twelve articles appropriate for inclusion in a narrative synthesis. five articles examined self-efficacy among individuals with hypertension, whereas seven articles focused on treatment adherence and management in hypertensive patients. A comprehensive summary of these articles is provided in Table 1.

Table 1. Synthesis results of 12 main articles

Thematic Categories	Key Findings	Case Studies & Methods
Psychological Factors: Self-Efficacy	Patients' perceived self-efficacy in managing hypertension is strongly associated with enhanced engagement in self-care behaviors, improved adherence to treatment regimens, and better health outcomes.	Mega (2024): Quantitative, cross-sectional. Maharani et al. (2025): Descriptive correlational. Adiyasa & Cruz (2020): Quantitative correlational method.
Technology & System-Based Interventions	The implementation of e-health technologies, including remote blood pressure monitoring (RBPM) and short message service (SMS) interventions, enhances patient knowledge, promotes adherence to treatment regimens, and facilitates improved blood pressure management through continuous, supportive engagement.	Hermansson-Borrebaeck et al. (2025): Randomized Controlled Trial. Bakhshandeh et al. (2025): Prospective observational cohort study. Aigbonoga et al. (2025): Randomized Controlled Trial.
Behavioral Intervention & Education	Motivational interviewing and evidence-based transition care models have been demonstrated to effectively reduce blood pressure, facilitate the adoption of healthy behaviors, and enhance self-management capacities following treatment.	Xu et al. (2025): Meta-analysis. Xia et al. (2025): Observational study.
Social & Environmental Support	Family engagement, along with the utilization of social support networks and community resources, plays a crucial role in adherence to dietary guidelines, particularly sodium restriction, and in the comprehensive management of hypertension.	Susanto et al. (2024): Parallel Randomized Control Trial. Jariyasakulwong et al. (2025): Cross-sectional study.
Cognitive & Behavioral Factors	The regulation of blood pressure in patients is collectively affected by personal beliefs, behavioral indicators, and various other modifying determinants.	Fernandez et al. (2024): Cross-sectional study.

4 Discussion

Enhanced self-efficacy has been linked to the adoption of healthier behavioral patterns, which can subsequently reduce the risk of developing hypertension. As reported by Mega (2024), most participants demonstrated moderate levels of self-efficacy (38.6%) and engaged predominantly in unhealthy lifestyle behaviors (51.4%), with a prevalence of hypertension observed at 52.9%. Statistical analyses revealed a significant relationship between self-efficacy and lifestyle factors, as well as their collective association with hypertension incidence, both of which yielded p-values of 0.000. These results underscore the significance of psychosocial factors in hypertension management. Therefore, intervention strategies should encompass a comprehensive, multi-dimensional framework that not only addresses the medical aspects of hypertension but also aims to enhance individuals' self-efficacy and facilitate behavioral modifications that support a healthier lifestyle [14].

Embracing a health-promoting lifestyle has been revealed to contribute significantly to the effective management of hypertension. Engagement in regular physical activity, cessation of tobacco use, and moderation of dietary salt intake are vital strategies that enable individuals with hypertension to regulate their blood pressure and mitigate the probability of associated complications. Furthermore, these beneficial lifestyle modifications not only aid in blood pressure control but also enhance overall quality of life and reduce the risk of comorbid conditions associated with hypertensive disease [14].

The study conducted by Putri and Faqih (2025) demonstrated a noteworthy association between self-efficacy and self-care management in individuals diagnosed with hypertension. Sufficient levels of self-efficacy among hypertensive patients are crucial for improving adherence to recommended self-care behaviors. An individual’s confidence in their ability to perform practical self-care actions can enhance their motivation and dedication to following prescribed routines, including medication adherence, maintaining a nutritious diet, and consistent blood pressure monitoring. Although the overall efficacy of self-care management remains suboptimal, a strong sense of self-efficacy continues to serve as a positive motivator for patients to engage in self-care activities. The involvement and support of healthcare professionals and family members are essential components, providing education, encouragement, and assistance in overcoming obstacles associated with self-care. Patients with moderate self-efficacy levels also possess considerable potential for improving their self-care management skills through targeted educational interventions designed to enhance self-efficacy. Consequently, the dynamic interplay among self-efficacy, environmental support, and health literacy is instrumental in enabling hypertensive individuals to attain more consistent and effective self-care behaviors [15].

Empirical research and theoretical models uniformly substantiate the importance of self-efficacy in shaping self-care behaviors among individuals with hypertension. Higher levels of self-efficacy are correlated with greater motivation and a consistent ability to adhere to recommended hypertension management strategies. Conversely, many hypertensive patients exhibit low self-efficacy, often attributable to insufficient information and inadequate social support regarding disease management. Self-efficacy is also recognized as a pivotal determinant of patients' confidence in their ability to

undertake specific health-related actions that aim to achieve desired health outcomes. Individuals diagnosed with hypertension who exhibit elevated levels of self-efficacy are more likely to demonstrate enhanced competence and commitment in adhering to self-care protocols. Moreover, individuals' health-related beliefs significantly influence their behavioural efforts; specifically, a stronger belief in one's capabilities correlates with increased effort and persistence in managing their condition [16].

Based on the research conducted by Awalia, Mikawati, and Ismail (2024), a noteworthy association exists between self-efficacy and self-care management behaviors in individuals diagnosed with hypertension. Self-care management is conceptualized as a behavioral process aimed at preventing disease progression, involving a decision-making component that enables hypertensive patients to assess and address their symptoms as they arise. The adoption of self-care management behaviors is substantially influenced by self-efficacy, which underpins patients' confidence in their ability to engage in self-care practices effectively within their daily routines, as well as strategies for effectively reducing hypertension levels [17].

Research conducted by Jariyasakulwong et al. (2025) indicated that most participants exhibited inadequate self-care behaviors related to hypertension management and encountered significant difficulties in effectively controlling their condition. The study's key findings revealed that individuals with moderate social support and those residing in environments with limited resources were more likely to engage in poor self-care practices. Nurses play a vital role in promoting patient autonomy and well-being by enhancing self-care capabilities. They also facilitate awareness of community resources and actively advocate for healthier environmental conditions, all through the application of evidence-based practices that ensure effective and sustainable health outcomes. These findings underscore the need for implementing comprehensive, multi-level nursing interventions and adopting personalized strategies to enhance self-care behaviors among individuals with hypertension [18].

Fernandes, Sudiana, and Widyawati (2024) demonstrated that this behavioral framework assists nursing professionals in developing strategies to enhance blood pressure regulation among hypertensive individuals. Effective management of hypertension requires comprehensive strategies, including continuous education for patients and their families, emphasizing the importance of blood pressure monitoring, lifestyle modifications, medication adherence, and stress reduction techniques to promote optimal health outcomes. Furthermore, they highlight the importance of family support in facilitating self-care practices and promoting lifestyle modifications. Additionally, healthcare practitioners should offer counselling services and actively involve patients in shared decision-making processes regarding their treatment programs [19].

Adiyasa and Cruz (2020) reported that adults with hypertension rated their self-care behaviors as satisfactory, particularly in terms of medication adherence, adopting healthy dietary practices, and engaging in physical activity. Furthermore, these hypertensive adults report a high level of self-efficacy across dimensions such as perceived self-confidence, vicarious experience, social persuasion, and perceived stress. Research indicates that self-efficacy demonstrates a significant correlation with hypertension, influencing individuals' health behaviors and outcomes [20].

Bakhshandeh et al. (2025) suggest that the Remote Blood Pressure Monitoring (RPBM) program is an effective self-care strategy, associated with enhanced blood pressure regulation and positive experiences among both patients and healthcare providers. RPBM represents a form of self-management for individuals with hypertension, integrating telenursing as a key component [21]. Research conducted by Borrebaeck et al. (2025) highlights the effectiveness of telenursing within self-management-oriented e-health interventions. Such e-Health interventions aimed at self-management are instrumental in clinical practice, as they can bolster patients' self-efficacy. Enhanced self-efficacy among hypertensive patients significantly contributes to improved adherence to prescribed medication regimens and increased engagement in physical activity, thereby promoting better blood pressure control and overall health outcomes [22].

A comprehensive investigation by Aigbonoga et al. (2025) discovered that the implementation of telenursing interventions utilizing SMS-based communication significantly enhanced knowledge related to stroke prevention. The findings suggest that digital health interventions serve as effective mechanisms for disseminating health information. Nonetheless, their influence on behavioral change may be limited by factors such as motivational deficits and financial barriers. Consequently, a comprehensive approach that integrates SMS-based reminders with motivational incentives and economic assistance may yield more significant enhancements in adherence, especially in settings characterized by resource limitations [23].

According to the findings of Xu et al. (2025), motivational interviewing is effective in reducing blood pressure levels in individuals with hypertension in the short term. Additionally, this intervention has been associated with enhancements in self-efficacy, overall quality of life, and adherence to prescribed treatment protocols. Furthermore, the self-efficacy of hypertensive patients can be bolstered through active support and encouragement from family members and close loved ones [24].

According to research conducted by Susanto et al. (2024), family self-management programs (FSMP) have been demonstrated to enhance the overall quality of care for individuals with chronic conditions, encompassing physical, psychological, and financial aspects. Specifically, FSMPs are effective in lowering blood pressure levels in individuals with hypertension, primarily through the involvement and support of family members [25]. The role of families is instrumental in the home management of hypertension, as they play a crucial part in supervising treatment adherence and facilitating necessary lifestyle changes. For instance, family involvement in preparing dietary plans that meet sodium intake guidelines is essential for optimal management. Such comprehensive care strategies are associated with a reduction in the recurrence of hypertensive episodes and contribute to the stabilization of blood pressure levels [26].

5 Conclusion

Self-efficacy is a fundamental determinant in the effective management of hypertension, as it significantly influences individuals' capacity to adopt and maintain health-promoting behaviors. Elevated levels of self-efficacy empower patients to adhere consistently to prescribed medical regimens, engage in regular practices to enhance skills

and foster growth and monitor their blood pressure diligently. Conversely, diminished self-efficacy often correlates with suboptimal self-care practices, resulting in inadequate blood pressure control and increased risk of cardiovascular complications. Moreover, psychosocial factors such as family support and health literacy profoundly affect self-efficacy and overall health outcomes. Enhanced social support can bolster confidence in managing health, while higher health literacy facilitates understanding of hypertension and adherence to treatment protocols. Consequently, effective hypertension management necessitates comprehensive, multifaceted interventions that combine behavioral education, psychosocial support, and empowerment strategies to foster sustained self-efficacy and optimize health outcomes.

References

1. Ghani, L., Susilawati, M.D., Novriani, H.: Faktor Risiko Dominan Penyakit Jantung Koroner di Indonesia. Bul. Penelit. Kesehat. 44, 153–164 (2016)
2. Mills, K.T., Stefanescu, A., He, J.: The global epidemiology of hypertension. Nat. Rev. Nephrol. 16, 223–237 (2020)
3. Kemenkes: Hasil Riset Kesehatan Dasar (Riskesdas). Riskedas. (2018)
4. Zhou, D., Xi, B., Zhao, M., Wang, L., Veeranki, S.P.: Uncontrolled hypertension increases risk of all-cause and cardiovascular disease mortality in US adults : the NHANES III Linked Mortality Study. 1–7 (2018). https://doi.org/10.1038/s41598-018-27377-2
5. Mbbs, N.V., Bds, S.R., Turana, Y., Prasad, G., Chin, J., Mbbs, T., Boon, F., Teo, W., Tzung-, B., Wang, D.: pharmacological management of hypertension. 1275–1283 (2021). https://doi.org/10.1111/jch.14236
6. Deng, T., He, W., Yao, X., Chen, J., Liu, X., Liu, L., Zhang, T., Lu, H.: Safety and efficacy of short-term dual antiplatelet therapy combined with intensive rosuvastatin in acute ischemic stroke. Clinics. 78, 100171 (2023). https://doi.org/10.1016/j.clinsp.2023.100171
7. Lambert, C.M., Olulana, O., Bailey-Davis, L., Abedi, V., Zand, R.: "Lessons Learned" Preventing Recurrent Ischemic Strokes through Secondary Prevention Programs: A Systematic Review. J. Clin. Med. 10, (2021). https://doi.org/10.3390/jcm10184209
8. Prabasari, N.A.: Self Efficacy, Self Care Management, Dan Kepatuhan Pada Lansia Hipertensi (Studi Fenomenologi). J. Keperawatan Malang. 6, 1–10 (2021). https://doi.org/https://doi.org/10.36916/jkm.v6i1.115
9. Hamiidah, S.N., Noviana, U., Haryani, H.: Hubungan Antara Persepsi Penyakit Dengan Manajemen Diri Pada Penderita Hipertensi. J. Keperawatan Klin. Dan Komunitas (Clinical Community Nurs. Journal). 8, (2024). https://doi.org/Https://Doi.Org/10.22146/Jkkk.95062
10. Rozani, M.: Self-care and Related Factors in Hypertensive Patients: a Literature Review. Din. Kesehat. J. Kebidanan Dan Keperawatan. 10, 266 –278 (2020). https://doi.org/https://doi.org/10.33859/dksm.v10i1.419
11. Bandura, A.: Guide to the construction of self-efficacy scales. Self-Efficacy Beliefs Adolesc. 307–337 (2006)
12. Salami.: Perilaku Self Care Management Penderita Hipertensi: Studi Kualitatif. J. Keperawatan 'Aisyiyah. 8, 87 –99 (2021). https://doi.org/https://doi.org/10.33867/jka.v8i1.261
13. Darvishpoor, A.: Self - Actualization : Self - Care Outcomes among Elderly Patients with Hypertension. Iran. J. Nurs. Midwifery Res. (2019).

https://doi.org/https://doi.org/10.4103/ijnmr.IJNMR
14. Mega, J.Y.: Empowering Health: Unveiling the Impact of Self-Efficacy and Lifestyle on Hypertension Management. J. Curr. Heal. Sci. 4, 9–16 (2024). https://doi.org/10.47679/jchs.202460
15. Putri, B.M.F., Faqih, M.U.: Relationship of Self Efficacy with Self Care Management in Hypertension Patients. J. Pubnursing Sci. 3, 13–29 (2025). https://doi.org/10.69606/jps.v3i01.206
16. Maharani, B., Putri, F., Faqih, M.U.: Hubungan antara Efikasi Diri dengan Manajemen Perawatan Diri pada Pasien Hipertensi. 03, 13–29 (2025). https://doi.org/10.69606/jps.v3i01.206
17. Herabare, M.: Efek self-efficacy pada kepatuhan pengobatan hipertensi. PT Media Medika Indonesia, Jakarta (2021)
18. Jariyasakulwong, P., Wattanakitkrileart, D., Pongthavornkamol, K., Piaseu, N., Roubsanthisuk, W.: Factors Influencing Self-Care Practices and Blood Pressure Among Individuals with Uncontrolled Hypertension: A Cross-Sectional Study. Patient Prefer. Adherence . 19, 1–17 (2025). https://doi.org/10.2147/PPA.S497555
19. Fernandez, G.V., Sudiana, I.K., Widyawati, I.Y.: Behavioral Models for Controlling Blood Pressure in Patients with Hypertension. Genius J. 5, 42–50 (2024). https://doi.org/10.56359/gj.v5i1.347
20. Adiyasa, R.P., M Cruz, B.G.: The Correlation Between Self-Care Behavior and The Self-Efficacy of Hypertensive Adults. Indones. Nurs. J. Educ. Clin. 5, 44 (2020). https://doi.org/10.24990/injec.v5i1.273
21. Bakhshandeh, H., Tehal, S., Fayanju, O., Kodam, S.P., Rokicki-Parashar, J., Seaton, M., Weng, Y., Phadke, A.: A Mixed-Methods Evaluation of a Primary Care Remote Blood Pressure Monitoring Quality Improvement Pilot. J. Prim. Care Community Health. 16, (2025). https://doi.org/10.1177/21501319251358000
22. Hermansson-Borrebaeck, R., Fors, A., Bengtsson, U., Kjellgren, K., Calling, S., Midlöv, P.: Self-Efficacy in Hypertension Management Using e-Health Technology: A Randomized Controlled Trial in Primary Care. J. Clin. Hypertens. 27, 1–8 (2025). https://doi.org/10.1111/jch.14981
23. Aigbonoga, D., Adewale, B., Igwilo, J., Adeyeye, V., Olajide, T., Olaniran, O., Akintayo, A., Aremu, P., Oluwadamilare, F., Popoola, O., Ogunniyi, A.: Efficacy of short message service (SMS) intervention on medication adherence and knowledge of stroke prevention among clinic attendees at risk of stroke: a randomized controlled trial. BMC Public Health. 25, (2025). https://doi.org/10.1186/s12889-025-22204-6
24. Xu, J., Gu, X., Gu, J., Zhao, L., Li, M., Hong, C.: Motivational interviewing intervention for the management of hypertension: a meta-analysis. Front. Cardiovasc. Med. 11, 1–11 (2024). https://doi.org/10.3389/fcvm.2024.1457039
25. Susanto, T., Hernawati, S., Yunanto, R.A., Rahmawati, I., Ati, N.A.L., Fauziah, W.: Family Self-management Program for Hypertension Management and Sodium Consumption Adherence: A Parallel Randomized Control Trial Among Family Caregivers and People With Hypertension. J. Res. Health Sci. 24, e00628–e00628 (2024). https://doi.org/10.34172/jrhs.2024.163
26. Xia, B., Wu, X., Song, P.: Research on the efficacy of the transitional care model for self-management of a senile patient after percutaneous coronary intervention (PCI): An observational study. Med. (United States). 104, e43470 (2025). https://doi.org/10.1097/MD.0000000000043470