



EXPERIENCE OF RESILIENCE OF CHRONIC RENAL FAILURE PATIENTS WITH HAEMODIALYSIS THERAPY: A QUALITATIVE STUDY

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ABSTRACT

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Chronic Kidney Failure patients who have routinely followed hemodialysis therapy have to experience in resilience, being able to adapt, survive, and improve their quality of life even though their life is dependent on hemodialysis. Objectives to know experience of the resilience of chronic kidney failure patients with hemodialysis therapy at Hospital, in Yogyakarta Indonesia 2020. It was qualitative with a phenomenology approach. The sample was 5 people taken with purposive sampling technique. Data was collected with in-depth interview retrieval via video call with a cell phone as a voice recording device. Content analysis was used with the type of conversation analysis. The result of the interview obtains 7 themes, namely experience to remain calm, experience of controlling impulses, having positive expectations, focusing on problems and solving problems, having positive social relationships, belief and trust to achieve problem-solving, and able to achieve positive values in life. In this research, it shows that the participant response is good. The resilience possessed by five participants is good and in accordance with the source of formation/basic resilience ability, as evidenced by the 7 themes raised. Other researchers are advised to develop this research related to experiences of resilience based on the stages of resilience experienced by patients with chronic kidney failure with hemodialysis therapy and to the nursing practice can be a source of reference and motivation for chronic renal failure patients with hemodialysis therapy to increase resilience when facing difficulties.

Keywords:

Chronic Kidney Failure Patients, Hemodialysis, Resilience

BACKGROUND

Chronic Renal Failure (CRF) is a failure of kidney function to maintain metabolism and fluid and electrolyte balance which is incurable, irreversible and takes place continuously (Muttaqin & Sari, 2011). One

of the managements of CRF is hemodialysis (HD) therapy. Hemodialysis (HD) is a form of replacement therapy in patients with kidney failure (Haryono, 2013).

The data obtained from the Indonesian Renal Registry (IRR) states that in Indonesia, there are

132,142 active HD patients with chronic kidney disease (CKD) and the number of new patients is 66,433 patients, while in DIY the number of new patients with chronic kidney disease with HD active increased by 2,730 patients (Indonesian Renal Registry (IRR), 2018). Along with the increase in the number of these patients, data on patients who stopped doing HD was also obtained. Based on a preliminary study conducted at one of the Hospitals in Yogyakarta December 2019, data on CRF patients who routinely underwent HD were 215 patients with an age range of 15-70 years. Data obtained by 90% of patients have done HD routinely according to the provisions.

The head of the HD unit at one of the Hospitals, Yogyakarta, said that the HD activity and routine that the patient lived was due to the patient's awareness of the importance of hemodialysis for survival and to maintain the condition so that it did not get worse. Previous research stated Patients with HD will depend on the dialyzer machine to survive, and some changes will be made. These changes include physiological responses after undergoing HD, changes in eating, drinking, and activity patterns (Juwita & Kartika, 2019). Facing these situations and conditions, it is necessary to adapt and respond positively to patients. This condition is called resilience, resilience is needed in the patient in order to continue his life and do HD to maintain his health. Patients with very high levels of resilience indicate that the individual is resilient, where the patient has had various experiences to survive, continue to undergo hemodialysis and improve quality of life even though they depend on HD therapy. Based on the description that has been written, the researcher is interested in conducting a study entitled "Experience of Resilience of Patients with Chronic Kidney Failure with Hemodialysis Therapy at one of the hospitals in Yogyakarta, Indonesia 2020". This study aims to examine experience of the resilience of chronic kidney failure patients with hemodialysis therapy at Hospital.

METHODS

This research is qualitative research with a phenomenological method. Conducted at the HD Unit of Hospital in Yogyakarta, Indonesia on August 11-20, 2020. The population was 215 patients and a sample of 5 participants. The research measurement tool is a human instrument. The data collection used the semi structured: one at a time interview method through video calls and voice recording using a cell phone with an interview guide containing 15 questions made by the researcher himself based on the source of re-

silience formation. The researcher has conducted an ethical clearance test and has been declared to meet the requirements by the Ethics Commission of Aisyah University Yogyakarta, having its address at West Ringroad Street No. 63, Mlangi, Nogotirto, Gamping, Sleman Yogyakarta, Indonesia 55292 Telp (0274) 4469199 with number of letter: 1657/KEP-UNISA/VII/2020. After the researcher explained the meaning and the purpose of the study, then the respondent was given informed consent as a sign of agreeing to become a respondent and this was not coerced.

RESULTS

Data collection was carried out using a semi-structured interview method through video calls and voice recording using cell phones with the permission of the participants with the duration of the interview for 30-40 minutes. The number of participants in this study was 5 participants. The results are then raised into 7 themes, namely experience to remain calm, experience of controlling impulses, having positive expectations, focusing on problems and solving problems, having positive social relationships, belief and trust to achieve problem-solving, and able to achieve positive values in life.

DISCUSSION

Characteristics of participants in this study were 5 participants, each given a code P1 to P5. Of the 5 participants, 3 participants were female, 2 participants were male with an age range of 47-66 years, all of whom came from the Javanese Cultural Tribe. Participants come from different educational backgrounds ranging from who never went to school, elementary, junior high and senior high school. Work history of 3 participants including traders, laborers, and retired Indonesian Air Force and 2 participants who unemployment, with different income levels according to their work history.

Experience to Stay Calm Participants Respond

Experience to stay calm participants respond and express emotions when dealing with the reality of doing hemodialysis (HD) therapy such as: shortness of breath, dropping, fear, questioning, normal, shocked, sad, difficult, and feelings of not being accepted. In resilience, emotional expression, either negative or positive, is a healthy and beneficial thing as long as it is done properly. The expression of these emotions is one of the resilient individual abilities (Hendriani, 2018).

"I fell normal" (P1).

"I'm afraid... how can it be like this, but I think that hopefully it can be better" (P2).

"At first I dropped and my family had to wait (P2).

"I was surprised, at first I had diabetes, and how could it spread to the kidneys. Yes, it is sad because it can spread to the kidneys" (P3).

"Actually, when I was hospitalized for 10 days, my body was swollen, it was difficult to breathe, I kept being ordered to dialysis. To accept the reality is difficult, at first I couldn't accept it either" (P4).

"Oh, I feel like it's normal... I'm not afraid, I never think about anything like that, for example: for my pain, I'm not afraid, it's just normal" (P5).

After showing the first response and expressing emotions, the participants showed an effort to remain calm, surrender, sincere, consider this a gift from God and explain the source of calm that comes from the people around them. The source of tranquility can come from within a person or from the surrounding environment, as experienced by the participants where the source of their calm comes from the enthusiasm given by their children, their families, and from surrounding people such as relatives and neighbors. In line with this, other studies have shown that family social support can provide positive results on the health and well-being of patients with chronic diseases. The higher the family's social support for family members who are sick, the higher the resilience will be (Hadiningsih, 2014).

"So, the ones that make me to calm, is my children, their said" please mother, make enthusiasm "like that." (P2).

"It is a big support for me. It is a gift from God has given me. Praise God that I am like that" (P4).

The experience of staying calm in chronic renal failure patients with hemodialysis therapy begins with providing an early response when HD, expressing their emotions appropriately, and being able to find/get a source of calm and focus so that it helps to relieve existing emotions. This is in line with the theory stated by Reivich and Shatte that a resilient person is able to control emotions and be calm despite being under pressure (Rini, 2016). This is in line with the theory by Benard 2004 in Hendriani 2018 that there are several things that the environment can provide to increase one's resilience, one of which is a caring relationship, namely caring support based on trust and unconditional love. Caring relationships are characterized as a basis for positive rewards. Ex-

amples include holding the shoulder, smiling, greeting, and providing support.

Experience in Controlling Impulses

Impulse control is the ability to control desires, urges, likes, and pressures that appear by Reivich and Shatte 2002 in Hendriani 2018 Chronic renal failure patients on hemodialysis therapy have experience controlling impulses by making decisions not to stop HD, limiting drinking and eating to control preferences, and having a diet strategy as a form of controlling desire. This is in line with the opinion of Pane (2014) which shows that a high level of resilience in a person can provide benefits for effective healthy diet control behaviors. In addition to controlling desires and preferences, participants also show that they are able to deal with stimulation from the environment such as following advice, accepting doctor's advice, receive nutritionist advice, receive nurse's advice, and receive positive encouragement from family.

"So, if at home it depends on who serves me, the children are prepared for what, I eat it, don't use coconut milk, I want that, for food, for example, just boiled meat" (P1).

"At that time, it was still hospitalized, it was directly in HD, so I said 'yes, I am', and follow the doctor's advice directly in HD"... especially from my family, my family encouraged me, first from myself I was afraid but from my family I pushed so that I lived (P3).

"What is clear is that we are trying to follow the existing rules, for example, limiting drinking, eating is regulated, being able to accept reality, having to be disciplined to follow HD, that's what we hope we are disciplined according to the doctor's rules" (P4).

"Yes, clearly we are trying to follow the existing rules" (P5).

From the results of interviews and theories that have been written, it proves that a resilient person can minimize misunderstandings and misconceptions, so as to be able to provide the right response in facing problems.

Experience in Having Positive Expectations

Resilient individuals have clear and positive expectations for the future and believe that they can control the direction of their lives. Individuals with good resilience are optimistic individuals, believing that things can change for the better (Poetry, 2014). Patients with kidney failure with hemodialysis therapy are hoping to recover, be healthy, live a normal life as

before, be given a long life, not return to hospitalization as well as positive desires, enthusiasm from themselves and believe in God, given miracles by God who supports their hopes.

"Yes, I already know that the hope for recovery is small. Hopefully, apart from being cured, you are healthy, anyway, dialysis is still dialysis, hopefully I don't go to bed again I have been in bed 3 times, hopefully it will continue to be healthy" (P2).

"Everyone has hopes of a full recovery. Healing is the hope of me, and my family. now I am still undergoing treatment, my recovery will determine the doctor" (P3)

"Hopefully we can be given a long life; God will give us a miracle" (P4).

"My hope is that I want to be healthy, take care of my children and grandchildren, we want to go anywhere, to the market, to the beach, that's happy..." (P5).

Patients with a diagnosis of chronic disease, especially in this study were chronic kidney failure patients with hemodialysis therapy, they tend to be closer to God, have high hopes, and accept sincerely the problems they receive from God's gifts. Resilient individuals have clear and positive expectations for the future and believe that they can control the direction of their lives. Individuals with good resilience are individuals who are optimistic, believing that everything can change for the better (Pane, 2014). The results of Roellyana & Listiyandini (2016) research reveal that optimism plays a significant role in resilience and shows that the higher the age, the higher the optimism. In line with this study, Berk (2010) argues that adult individuals have good conflict resolution skills, have confidence to achieve desires, have strong moral character and have a sense of personal responsibility. Patients with renal failure with hemodialysis therapy in this study were in the age range of 47-66 years, which can be said to be a mature age so they tend to have high optimism. In addition, the age range of 47-66 years is the age that can be said to have experienced various kinds of life experiences and difficulties that have been passed, so that in the process of experiencing chronic kidney failure and undergoing hemodialysis therapy, they remain optimistic and have strong confidence in any circumstances.

Experience in Focus on Problems and Solve Problems

Chronic kidney failure patients with hemodialysis therapy can focus and solve problems by knowing

the causes of the problems they are experiencing, explaining the signs and symptoms they feel, and knowing the disease they are experiencing, encounter some difficulties and responding by taking them as warnings from God, realizing mistakes in the past. Then, to be grateful, not to complain, not to be a problem, not to be bothered and to be pleased. Then overcome the problem by communicating of the difficulties, experiencing discussing with other parties/ family, working on it, finding a way out, choosing to focus on HD therapy, and looking for alternative treatments.

"First, I had cold sweats, and shortness of breath, then I was taken to the Puskesmas, then I was referred to a large hospital which is located near here ... and until now the hospital continues with a diagnosis of renal failure" (P1).

"Oh yeah, now we've been reminded from the above, we have a disease like this, don't eat what it is" (P2).

"We have to follow, first I continued running on Fridays to exercising, so after I was retirement, I am lazy to exercise.... He - he" (P4).

Seligman 2002 revealed a concept related to the analysis of the causes of problems, namely explanatory thinking style. Explanatory thinking style is a way that individuals usually use to explain something, good and bad things that happen to them (Hendriani, 2018). In this study, participants did not try to blame themselves or blame others for what they experienced. In addition, participants tend to view failure from the positive side and try to do better at every opportunity. Purnomo (2014) argues that men tend to use problem-focused coping because men usually use ratios or logic, while women are more likely to use emotion-focused coping because they use feelings more or are more emotional so they rarely use logic or ratios. In addition to gender that affects decision making, there is also an opinion that the level of education affects the mindset of individuals where a high level of education will broaden their thinking (Poetry, 2014). In this study, the educational history of the participants came from various levels of education ranging from person who never went to school, elementary, junior high and senior high school. Highly educated patients have better abilities and knowledge so they tend to be able to solve life problems, while patients with low education will have low knowledge and abilities so they have limitations in coping patterns with the problems they experience (Septiyan, Erwin, & Sabrian, 2013). Reivich and Shatte revealed that individuals who have broad thinking will have good

cognitive flexibility so that they can be said to have good resilience too (Hendriani, 2018).

Experience in Having Positive Social Relationships

Empathy is closely related to the ability to read emotional and psychological conditions, as well as interpret non-verbal signs shown by others, such as facial expressions, voice intonation, body language and capture what other people feel or think, therefore, someone who is able to empathize will have positive social relationships (Hendriani, 2018). The empathy possessed by chronic kidney failure patients with hemodialysis therapy is shown in the form of knowing the condition of other people / fellow patients by feeling concerned, feeling not alone, feeling like they have the same friends, understanding the risks of others, understanding the pain of others, not getting carried away, and considering people others require more attention. A part from paying attention to other people with chronic renal failure patients with hemodialysis therapy, they also have good social relationships with fellow sufferers who attend HD at the HD unit by sharing their stories and providing support.

"I feel that it's not only me who is sick like this, many other people are sick just like me.. many friends" (P2).

"They are people who need attention in the sense that apart from the implementation of care, what are they needed ... support from the nurses" (P4).

"Yes, I was chatting with my friends, Encourage one another with friends, just like this,"(P5).

In addition to knowing other people's conditions, chronic kidney failure patients on hemodialysis therapy also establish social relationships with fellow sufferers who follow HD by sharing stories and providing support, which is shown in the following interview results:

"just telling stories, until there is a distended stomach, swollen legs, thank God I'm not like that. Then the story continues to drink Moringa leaves, pee glass and cat whiskers are boiled, I drink, my pee is smooth" (P2)

"Sometimes we talk, the term is exchange of knowledge, so for example "why do I have this complaint, I was given this medicine, it's cured" it can be input for other people who have the same complaint so that it can be cured, automate it can be input" (P3)

"Telling story with friends..... Always encour-

age each other, respect each other, make life relaxed so that you can be healthy, so that you will be more enthusiastic" (P5).

Empathy is shown by comparing the conditions of other people who have had the same experience as motivation, giving advice to each other, sharing information, helping and caring for each other (Savitri & Siswati, 2018).

Experience in Having Confidence and Trust so as to Achieve Problem Solving

Self-efficacy of chronic renal failure patients with hemodialysis therapy is in the form of confidence and trust so as to achieve problem solving. Confidence and trust are to have enthusiasm and confidence in themselves, and believe in God in every hardship of life. Then achieve problem solving by accepting the situation, improving health, eating regularly, and discipline.

"I'm sure I can go through all of them and God has given me a very supportive family so I won't be to down" (P4).

"Yes, we are trying to follow the existing rules, for example, limiting drinking, eating is regulated, being able to accept the reality, having to be disciplined to follow HD, yes that is what we hope with discipline according to the doctor's rules. God gives miracles for us like that." (P4).

"Yes, just pray to Allah, I'm sure it can be healthy. Besides that, I can get enthusiasm from my child, from my husband" (P5).

In difficult situations, a person will try their best, confident that they are capable, even if they fail, they will still try and find a way out. All exams are the same, whether light / severe, must be carried out and try to solve problems without creating new problems (Savitri & Siswati, 2018).

Experience in Able to Achieve Positive Values in Life

Resilience is an ability that includes increasing the positive aspects of life. Individuals who increase the positive aspects of life are able to do these two aspects well, namely being able to distinguish between realistic and unrealistic, having meaning and purpose in life and being able to see the big picture of life (Hendriani, 2018). Chronic renal failure patients with hemodialysis therapy are able to achieve positive values in life with difficulty from adversity, such as taking lessons in the situation they are experiencing,

making problems as experiences, becoming more careful, eating regularly, and learning about sports and health problems. In addition to rising from adversity, the meaning and purpose of life, such as not wanting the problems that befall him to happen to others, hopes that nurses who provide support will be of benefit to others, must be disciplined, think about the hereafter, and obey worship.

"Worship is carried out as usual, sholat is done sitting down because I am not too strong, if it's time to pray, I have to pray.... (P1).

"We just pray, what we do is sholat, we always pray" (P2).

"With me who was sick because one of them was a lack of discipline in the sense of maintaining health, it also happened like that, hopefully our family and the others do not experience it like me. It means that you want to exercise, discipline in eating, discipline in drinking" (P4).

"Yes, be more careful, eating everything is not allowed to eat, but followed the doctor said" (P5).

Reivich and Shatte in Hendriani (2018) said resilience is not only someone who has the ability to overcome adversity and rise up, but is the capacity of the individual to achieve the positive aspects of a downturn that occurs in them.

In the research of Halawati & Kusuma (2017) with the title Description of Family Resilience of Chronic Kidney Disease Patients Undergoing Hemodialysis, there are similarities about the research method using qualitative phenomenology. The differences are that the participants are family members, while in this study the respondents were patients with chronic kidney failure who underwent hemodialysis. With the results of this study on the experience of emotional regulation, optimistic impulse control, causal analysis, attitudes, self-efficacy, reaching out, namely interpreting positive values after experiencing problems in chronic kidney failure patients with hemodialysis therapy.

In Arumingtyas Titisari's research (2017) with the title The Relationship Between Family Social Support and Resilience in Kidney Failure Patients Undergoing Hemodialysis Therapy. The method used in this research is a quantitative method, while this research is qualitative with phenomenology. The equation of this study is the variable, namely resilience and the participant, namely patients with kidney failure undergoing hemodialysis therapy. With differences in the results of the Arum research (2017) there is a positive relationship between family social support and

resilience in kidney failure patients undergoing hemodialysis therapy. Meanwhile, this study produces data on experience of emotional regulation, optimistic impulse control, causal analysis, attitudes, self-efficacy, reaching out, namely interpreting positive values after experiencing problems in chronic kidney failure patients with hemodialysis therapy.

The limitation of this research is interview via video call. This prevented the researcher from observing non-verbal responses and the environment around the participants. So that the data regarding the facial expressions and body gestures of the participants are less observable. Participants in this study belong to the vulnerable group. When data collection, the researcher met participants whose condition decreased / dropped because they had just finished undergoing hemodialysis therapy, as a result, the data collection process on these participants was stopped, and the researcher looked for new participants. For further research, it is hoped that this research will be able to develop this research related to the experience of resilience based on the stages of resilience experienced by patients with chronic kidney failure with hemodialysis therapy.

Suggestions for Practical in Hospitals: It is hoped that this research can be a source of reference for medical personnel, especially nurses to improve health services in the form of education provided to patients undergoing Hemodialysis.

CONCLUSION

Based on the results of this research on the experience of resilience of chronic renal failure patients with hemodialysis therapy at one of the Hospitals in Yogyakarta Indonesia 2020, There were 5 participants in this study. With the characteristics of the five participants, 3 participants are female, 2 participants are male with an age range of 47-66 years who all come from the Javanese Cultural. Participants come from educational backgrounds which varies from no education, elementary, junior, and high school. Employment history of 3 participants including traders, laborers, and retired from Indonesian National Army and 2 participants are unemployment, with different income levels according to history their job. It can be concluded that the participant response is good, the resilience of the five participants is good and in accordance with the source of formation / basic resilience ability, as evidenced by the 7 themes raised from the results of the interview namely experience to remain calm, experience of controlling impulses, having positive expectations, focusing on problems

and solving problems, having positive social relationships, belief and trust to achieve problem-solving, and able to achieve positive values in life. Recommendations of this study for the Hospital can be a source of reference, especially in the HD Unit to improve health services in the form of education given to patients undergoing HD and Suggestion to the nursing practice can be a source of reference and motivation for chronic renal failure patients with hemodialysis therapy to increase resilience when facing difficulties.

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