

Thesis Title Coping and Quality of Life of Patients with Chronic Renal Failure Undergoing Hemodialysis and Their Spouses

Major Program Adult Nursing

Author Mr. Kusman Ibrahim

Academic Year 2003

Abstract

Coping and quality of life of chronic renal failure (CRF) patients and their spouses has become an important issue, since the beginning of CRF and hemodialysis treatments, which imposed many problems on patients. In Indonesia, despite a large number of CRF patients undergoing hemodialysis, there is yet no known study related to coping and quality of life in CRF patients and their spouses. This study aimed to examine the relationships between coping and quality of life of hemodialysis patients and their spouses. The descriptive correlational design involved ninety-one couples; patients and spouses were purposively recruited from three hemodialysis units of three selected hospitals in Bandung, Indonesia was conducted. A "Demographic Data and Health Information Form" was used to obtain subjects' demographic characteristics and health status. The 40-item Jalowiec Coping Scale (JCS) was used to measure coping and the 26-item WHOQoL-Bref instrument to measure quality of life of patients and their spouses. Pearson's product moment correlation was used to examine the relationships between coping and quality of life.

The findings showed that the most common coping methods used by patients and spouses included 'pray; put your trust in God', followed by 'hope that things will get better', 'meditate (dzikir); find out the calm mind by doing relaxation techniques',

'try to maintain some control over the situation', and 'settle for the next best thing to what you really want'. Most of the patients rated their overall quality of life as very poor to fair, and general health as either dissatisfactory or very dissatisfactory, whereas the spouses' overall quality of life was good to very good and they were satisfied with their general health. There was a negative relationship between affective focus coping score and quality of life, but no correlation of problem solving focus coping and total coping score with quality of life score in either patient or spouse group.

The findings support the notion that using affective focus coping might have a negative effect on quality of life when used for long period of time because the problems still remained. Nurses should regularly assess patients' coping strategies and facilitate appropriate coping for each individual undergoing of hemodialysis.