



THE RELATIONSHIP OF SPIRITUALITY AND RESILIENCE IN PATIENTS THAT RECEIVED HEMODIALYSIS

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ABSTRACT

Patients undergoing hemodialysis result in physical and psychological problems. Psychological problems can cause a decrease in the resilience of hemodialysis patients, resulting in delays in the healing process, so spirituality is needed to help overcome the problem. The purpose of this study was to determine the relationship between spirituality and resilience in patients undergoing hemodialysis at Al-Ihsan Hospital, Bandung Regency. This type of research is quantitative research with correlational methods. Research instrument with Spiritual Well-Being Scale (SWBS) and Connor and Davidson Resilience Scale (CD-RISC). The study population was 180 patients with a sample of 125 hemodialysis patients, using purposive sampling technique. Data analysis with univariate and bivariate using Spearman rank correlation test. The results of the study of high spirituality (90.4%), low resilience (51.2 %), the relationship between spirituality and resilience (ρ) = 0.022. Based on the results of the study, there was a significant relationship between spirituality and resilience in patients undergoing hemodialysis at Al-Ihsan Hospital, Bandung Regency. It is hoped that further researchers can examine other resilience factors in patients undergoing hemodialysis.

Keywords: hemodialysis patients; resilience; spirituality

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INTRODUCTION

Non-communicable diseases get high attention because these cases show significant increase in every year. Based on data from Riskesdas (2013), the prevalence of hypertension (25.8%), stroke (7%), DM (6.9%), CKD (2%) and cancer (1.4%). Riskesdas (2018) mentioned that an increase in the prevalence of non-communicable diseases, namely hypertension (34.1%), stroke (10.9%), DM (8.5%), CKD (3.8%) and cancer (1.8%). Chronic kidney disease (CKD) is a chronic non-communicable disease which rank 4th of the top 5 highest in 2018. Kidney is one of the top 5 highest in 2018. Kidney is one of the vital organs which function to carry out metabolism in the body, impaired kidney function will impact on other body organs (Dewi et al. al., 2019). Chronic kidney disease is a progressive deterioration of kidney function caused by various diseases, so that the kidneys are unable to maintain metabolism and fluid balance which indicated with an increase level in urea (Rustandi et al., 2018).

Based on Riskesdas data (2018), there were several risk factors that cause chronic kidney disease in Indonesia, namely hypertension (34.1%), obesity (21.8%), and diabetes mellitus (8.5%). The progress of kidney function in patients with kidney disease reached 10% to 15% of the normal limit at stage 5. Loss of kidney function could not be cured, therefore, to slow

down the kidney damage it can be done by kidney replacement therapy (Dewi, 2016). The kidney replacement therapy in patients with chronic kidney disease in Indonesia that become a main choice was hemodialysis compared to continuous ambulatory peritoneal dialysis (CAPD) and kidney transplantation (Indonesian Renal Registry., 2018).

Hemodialysis is one of the kidney replacement therapies through vascular blood vessels to maintain the patient's quality of life which is carried out 2 times a week for live. Hemodialysis aims to remove metabolic waste, prevent fluid overload disorders, and prevent complications due to kidney damage (Rahayu et al., 2018). Prolonged hemodialysis therapy in patients with chronic kidney disease can cause psychological problems such as depression, stress, and anxiety (Rosmalia & Kusumadewi, 2018). To overcome psychological problems in patients undergoing hemodialysis requires resilience because it can change the patient's condition to accept their situation, without resilience the patient could not control the situation caused by psychological problems (Taylor, 2012).

Resilience is a process of change to rise from negative experiences for better adaptation (Hendriani, 2018). Resilience means an individual who survives in difficult circumstances to adapt and become better (Mufidah, 2017). Good resilience helps patients become optimistic by having believes that the problem will become better (Sumirta et al., 2016). Factors that affect resilience are social support, illness perception, hope, self-efficacy, optimism, anxiety, stress, depression, education level, economic level, duration of illness, spirituality, treatment adherence. An important resilience factor in hemodialysis patients is spirituality. Spirituality plays an important role for patients who undergoing hemodialysis, because having healthy lifestyle, feel happier and more satisfied in their lives (Mahdian & Ghaffari, 2016). Spirituality is a belief hold by someone relating with the creator by means of prayer or meditation to gain peace in life, as well as coping mechanisms for mental health based on hard life experiences (Erisen & Sivrikaya., 2017). Spirituality has a positive impact on giving strength to negative events caused by trauma, thus providing expectation by interpreting it as the meaning of life (Bravin et al., 2019).

Research by Bôas & Nakasu (2021) has proven that spirituality can help people to solve a problem. The relationship between resilience and spirituality is an important strategy in understanding the condition of kidney disease patients in dealing with their stress by forming a belief system in beliefs and carrying out organized religious activities. Research by Duran et al (2020) showed that the average value of the patient's spiritual well-being was 122.70 ± 16.75 , which means that the patient's level of spiritual well-being is categorized as high, as a statistically significant predictive factor of patient resilience.

Based on interviews with patients, when the doctor diagnosed the disease, they refused and did not accept their condition. After a few months to years, the patients had started to accept the disease. According to interviews with 8 patients, 5 patients said they were supported by family and spirituality because they had surrendered, sincerely and always prayed by getting closer to Allah SWT, 2 patients revealed that they were assisted with family support only, and 1 person had accepted the disease, because he had a family member who suffered same disease. Based on the description above, the researcher is curious about the relationship between spirituality and resilience in patients undergoing hemodialysis at the Al-Ihsan Regional General Hospital, Bandung Regency.

METHOD

The type of research used in this research is quantitative research. The population in this study were 180 hemodialysis patients with a total sample of 125 patients undergoing hemodialysis. The sampling technique used was purposive sampling which was determined based on the inclusion criteria and exclusion criteria. The data analysis used was univariate analysis to determine the characteristics of the patient's spirituality and bivariate analysis to determine the relationship between the two variables. The data collection technique used a spirituality research instrument, namely the Spiritual Well-Being Scale (SWBS). The SWBS developed by Pultzian and Ellison includes 20 question items consisting of 2 subscales, namely religious well-being (RWB) and existential well-being (EWB). The Likert scale that is assessed has 6 points with the results of the validity and reliability test being Cronbach's alpha of 0.82. While the resilience research instrument is the Connor and Davidson Resilience Scale (CD-RISC). The CD-RISC developed by Conner and Davidson includes 25 question items consisting of 3 subscales, namely tenacity, strength and optimism. The Likert scale that is assessed has 5 points with the results of the validity and reliability test being Cronbach's alpha of 0.927.

RESULTS

The total number of subjects who participated in this study were 125 patients who underwent hemodialysis at the Al-Ihsan Regional General Hospital, Bandung Regency. The following is a table of the frequency distribution of characteristics of patients undergoing hemodialysis. Based on the results of the data analysis of the spirituality variable, there are medium and high categories. The following is a table of the distribution of spirituality frequencies in patients undergoing hemodialysis:

Table 1.
Distribution of Spsituality Frequency in Patients Undergoing Hemodialysis (n=125)

Categori	f	%
Medium	12	9.6%
High	113	90.4%

Based on table 2 above, the spirituality of 125 patients undergoing hemodialysis at Al-Ihsan Hospital, Bandung Regency showed high social support as many as 113 patients (90.4%). There are low and high categories of resilience variables. The following is a table of the frequency distribution of resilience obtained in patients undergoing hemodialysis:

Table 2.
Distribution of Resilience Frequency in Patients Undergoing Hemodialysis (n=125)

Categori	f	%
Low	64	51.2
High	61	48.8

Based on table 3 above, the resilience of 125 patients undergoing hemodialysis at Al-Ihsan Hospital, Bandung Regency showed low resilience as many as 64 patients (51.2%). The results of the Spearman rank spirituality correlation test with resilience in this study are as follows:

Table 3.

Correlation Test of Spirituality and Resilience			
Variabel	(r)	(p)	Ket
Spirituality Resilience	0.205	0.022	Significan t

Based on table 4, after analyzing the Spearman rank correlation between spirituality and resilience variables, it was found that the significant coefficient (ρ) = 0.022, which means it is smaller than 0.05. This shows that there is a relationship between spirituality and resilience in patients undergoing hemodialysis. So it can be concluded that the hypothesis in this study is H_a failed to be rejected. The results of the Spearman rank correlation test of spirituality indicators with resilience in this study are as follows:

Table 4.
Correlation Test of Spirituality and Resilience Indicators

Variable indicator	(r)	(p)
RWB	-0.087	0.337
EWB	0.308	0.000

Based on table 5 shows RWB 0.337 and EWB 0.000. These results indicate that existential well-being is related to resilience.

DISCUSSION

Based on the statistical tests with Spearman rank correlation, it was obtained the significant coefficient results value of 0.022 ($\rho < 0.05$) which indicates a significant relationship between spirituality and resilience in patients undergoing hemodialysis at Al-Ihsan Hospital, Bandung Regency or it can be said that H_a failed to be rejected. Spirituality can affect the resilience of patients undergoing hemodialysis so that the patient's resilience can be high to overcome the problems. Spirituality assists individuals to obtain a better quality of life and as a guide in overcoming the problems. Spirituality activities in Islam are carried out worship such as prayer. Praying can build communication with God to convey our wish about the difficulties, to help people to overcome and relieve the pressures that arise in their lives. Spirituality activities help individuals feel grateful, patient, sincere, and resigned to the problems (Munawaroh & Mashudi, 2019).

Research by Ebrahimi et al (2021) showed that there was a significant relationship between spiritual health and resilience in patients undergoing hemodialysis. Spirituality is one of the important factors to increase the resilience of patients undergoing hemodialysis to speed up recovery. In line with the research of Duran et al (2020) which stated that there was a relationship between spiritual well-being and resilience, which can affect the increase in resilience. The research results related to spirituality indicators, namely religious well-being and existential well-being. The results of correlation between resilience and religious (0.337) showed that there was no relationship with resilience, while the existence (0.000) showed that there was a relationship with resilience. Based on this, the life satisfaction of patients undergoing hemodialysis at the AL-Ihsan Hospital greatly affects the increase in resilience. However, it was not in line with the research of Boas & Nakasu (2021) that high religiousness was a crucial aspect to improve the quality of life in terms of psychological, social, and environmental.

Spirituality related to religion becomes a good resource for overcoming patients' psychological problems as meaning in their life. Activity in spirituality is indicated by independently solving the problems. Prayer activities can affect resilience in dealing with

problems, thereby improving the patient's quality of life (Boas & Nakasu, 2021). Therefore, religious activities as important supporting tools to overcome problems and increase resilience in patients undergoing hemodialysis.

CONCLUSION

Based on the description of the results of the research and discussion, it was found that there was a relationship between spirituality and resilience in patients undergoing hemodialysis at Al-Ihsan Hospital, Bandung Regency, namely = 0.022. Based on these results, it is hoped that further researchers can become basic data to examine other resilience factors such as hope, self-efficacy, self-esteem, treatment adherence, and perception of disease in patients undergoing hemodialysis.

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