



Analysis of Factors Affecting Self-Efficacy in Hemodialysis Patients Based on The Health Promotion Model Theory

Fitri Ariani¹, Fitri Arofiati^{2*})

¹ Master of Nursing, Muhammadiyah University of Yogyakarta, Indonesia

² Department of Medical-Surgical Nursing, Master of Nursing, Muhammadiyah University of Yogyakarta, Indonesia

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ABSTRACT

Introduction: Low self-efficacy that occurs in chronic renal failure patients undergoing hemodialysis therapy not only has an effect on physical disorders but also has an effect on the occurrence of patient psychiatric disorders. There needs to be a scientific study on improving self-efficacy, one of which is guided by the health promotion model theory. **Method:** The design of this study is cross-sectional. The study sample totaled 139 respondents. The sampling technique uses executive sampling. Respondents were selected based on inclusion and exclusion criteria. The research instrument uses a questionnaire of self-efficacy, biological, psychological and sociocultural factors. The data obtained were processed using spearman rank and logistic regression. **Results:** This study found that biological, psychological, and sociocultural factors are associated with the self-efficacy of hemodialysis patients with a p-value = 0.000 < 0.05. Psychological factors most influence self-efficacy with p-value = 0.000 < 0.05, and biological and social factors affect self-efficacy with p-value = 0.004 < 0.005. **Conclusion:** Biological, Psychological and Sociocultural Factors based on the theory of health promotion model are related to self-efficacy and can affect self-efficacy in chronic renal failure patients undergoing hemodialysis therapy

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*) corresponding author

Fitri Arofiati, S.Kep., Ns., MAN., PH.D

Department of Medical Surgical Nursing,
Master of Nursing Study Program,
Muhammadiyah University of Yogyakarta
Gedung Pascasarjana UMY, Jl. Tamantirto,
Brawijaya, Kasihan, Bantul, Yogyakarta

Email: fitri.ariani.psc21@mail.umy.ac.id

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ABSTRAK

Pendahuluan: Rendahnya self-efficacy yang terjadi pada pasien gagal ginjal kronik yang menjalani terapi hemodialisa tidak hanya berefek pada gangguan fisik, namun juga berefek pada terjadinya gangguan psikologis pasien. Perlu adanya kajian ilmu dalam meningkatkan self-efficacy tersebut salah satunya berpedoman kepada teori health promotion model. **Metode:** Desain penelitian ini adalah cross sectional. Sampel penelitian berjumlah 139 responden. Teknik pengambilan sampel menggunakan executive sampling. Responden dipilih berdasarkan kriteria inklusi dan ekklusi. Instrumen penelitian menggunakan kuesioner self-efficacy, faktor biologis, psikologis dan sosialkultural. Data yang diperoleh diolah menggunakan spearman rank dan regresi binary logistik. **Hasil:** Penelitian ini memperoleh hasil bahwa faktor biologis, psikologis dan sosialkultural berhubungan dengan self-efficacy pasien hemodialisa dengan nilai p value = 0,000 < 0,05. Faktor psikologis paling mempengaruhi self-efficacy dengan p value = 0,000 < 0,05, dan faktor biologis serta sosialkultural mempengaruhi self-efficacy dengan p value = 0,004 < 0,005. **Kesimpulan:** Faktor Biologis, Psikologis dan Sosialkultural berdasarkan theory health promotion model berhubungan dengan self-efficacy dan dapat mempengaruhi self-efficacy pada pasien gagal ginjal kronik yang menjalani terapi hemodialisa.

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INTRODUCTION

The prevalence of chronic renal failure worldwide based on USRDS data (2018) shows that more than 50 million patients are diagnosed with renal failure. In the United States, there are 500,000 patients who experience hemodialysis. In Indonesia based on Basic Health Research Data (Riskesdas) in 2018, data shows that the prevalence of chronic renal failure is around 0.38% or 739,208 people, and active patients undergoing hemodialysis therapy are around 77,892 patients. In the Special Region of Yogyakarta (DIY) in 2017 based on IRR (Indonesia Renal Registry) data (2017), there were 359 patients with new cases, this data is based on reports from 26 hemodialysis units in Yogyakarta. The results of a preliminary study at PKU Gamping Muhammadiyah Hospital Yogyakarta, in the room of the hemodialysis agency, have a therapy schedule of 2 shifts a day. In the last 2 months, there were 214 patients diagnosed with chronic renal failure undergoing hemodialysis therapy. When interviewed in hemodialysis therapy, patients often feel fatigued, and do not have the confidence to live longer which will result in the absence of motivation to undergo therapy.

Patients who experience hemodialysis therapy will feel many changes, physical, psychological and social changes (Sousa, 2018), This situation will have an impact on the level of quality of life of hemodialysis patients (Kurniawan et al., 2019). There are a variety of factors that can affect the quality of life in hemodialysis patients, personal factors and social factors. Personal factors in the quality of life of hemodialysis patients can be subdivided into several factors including self-esteem, coping strategies, the resilience of emotional management, and self-efficacy (Chang et al., 2016). According to Bandura, self-efficacy is a person's ability to increase motivation in oneself, cognitive sources, as well as a series of actions necessary in meeting the demands of the situation that will or is being faced (Abadiyah & Isnaini, 2017). From the above understanding, in line with the research conducted by (Anasulfalah, 2018) which states that self-efficacy has an important role to improve the quality of life in patients undergoing the hemodialysis therapy process. High self-efficacy in hemodialysis patients will be able to

make patients routine, or obedient in undergoing the treatment process.

The state of self-efficacy of hemodialysis patients is low, the patient will more easily experience physical, mental, and even psychological disorders where the patient will feel anxiety, depression, and fatigue (Rahimi et al., 2014). In the study of health sciences, a concept is needed that aims to be applied in solving a problem faced, one of which is by using the health promotion model theory (Khoshnood et al., 2020). The theory of health promotion model is centered on the theory of social learning from Albert Bandura, in this case, it is conveyed the importance of cognitive processes in every occurrence of changes in individual behavior. In the theory health promotion model, cognitive-specific characteristics can be influenced by these characteristics and experiences as opposed to personal factors, such as biological, psychological, and sociocultural factors (Alligood, 2018)

METHOD

The design of this study is cross-sectional. The population in the GKK patient study who underwent hemodialysis therapy was 214 patients, and the sample taken in this study was 139 respondents using the consecutive sampling technique, which is a technique according to inclusion and exclusion criteria. The inclusion criteria are respondents who have chronic renal failure, respondents who have undergone routine hemodialysis therapy ≥ 6 months, respondents aged 26 years and over, and respondents with comorbidities. Exclusion Criteria, namely respondents who were not willing to participate in the study and respondents who died during the study. The general self-efficacy scale questionnaire instrument, Biological, Psychological and Sociocultural Factors Questionnaire has been tested for validity at Arifin Achmad Hospital Pekanbaru. The data obtained in this study were processed using univariate, bivariate analysis tests using spearman rank tests and multivariate analysis using logistic regression tests.

RESULTS

Table 1 The results of the univariate analysis of the frequency distribution of sex, age, and length of time undergoing HD with the number of respondents n=139

Characteristics of Respondents	Respondents	
	Frequency	Percentage (%)
Gender		
Male	74	53.2
Female	65	46.8
Old		
26 - 35 years old	23	16.5
36 - 45 years old	30	21.6
46 - 55 years old	42	30.2
56 - 65 years old	33	23.7
65 Years and above	11	7.9
Long-Lived HD < 5 Tahun		
> 5 - 10 years	80	57.6
> 10 - 15 years	46	33.1
> 15 years	13	9.4

Based on table 1.1, it can be seen that most of the respondents are male, namely 74 respondents (53.2%). The majority of respondents, namely 46 years - 55 years (30.2%),

and more than half of respondents have undergone hemodialysis for < 5 years as many as 80 respondents (57.6%).

Table 2 Univariate results descriptive biological, psychological and sociocultural factors against respondents' self-efficacy n = 139

Variabel	Responden	
	N	%
<i>Self-efficacy</i>		
Low	53	38.1
High	86	61.9
<i>Theory Health Promotion model</i>		
Biological		
Low	72	51.8
High	67	48.2
Psychological		
Low	78	56.1
High	61	43.9
Sociocultural		
Low	53	38.1
High	86	61.9

Based on Table 2, it is explained that the minimum and maximum scores at the level of self-efficacy of GGK patients undergoing hemodialysis therapy are in a high self-efficacy position of 86 respondents (61.9%). Biological patients with a minimum score of 9 and a maximum of 33 are classified as low biological. 78 respondents (56.1%) were classified as psychologically low, with a minimum score of 8 and a maximum of 32 with a score. In sociocultural respondents, a minimum score of 8 maximum value of 31 was obtained and was at a high sociocultural level of 86 respondents (61.9%).

Table 3 Results of bivariate analysis of biological, psychological, and sociocultural

Variabel	Self-efficacy	
	R	P-value
<i>Theory Health Promotion Model</i>		
Biological	0,402	0,000
Psychological	-0,559	0,000
Sociocultural	0,512	0,000

Based on the analysis of research data in table 4.4, it can be seen that there is a relationship between biological factors, psychological factors, and sociocultural factors based on the theory of the health promotion model against self-efficacy with a p = value < 0.05. The closeness of the relationship between biological to self-efficacy with a value of 0.402, means that biological factors have a fairly strong degree of strength with self-efficacy. Psychological to self-efficacy with a relationship attachment of -0.559, a value that indicates that psychological factors towards self-efficacy have the opposite relationship,

Analisis Multivariate

Table 4 Multivariate Analysis Results of logistic binary regression of biological, psychological, and sociocultural factors

Variabel	B	Wald	Sig
<i>Theory Health Promotion Model</i>			
Biological	0.162	8.399	0,004
Psychological	- 0,302	19.237	0,000
Sociocultural	0,148	8.166	0,004
Constanta	0,308	0.022	0,881

The table above explains that the constant value of 0.308. From the results of binary logistic regression obtained the significant value of each variable < 0.05. So it can be concluded that the theory of health promotion model (biological, psychological, and sociocultural factors) can affect self-efficacy in GGK patients undergoing hemodialysis therapy, with the logistic binary regression equation obtained is:

$$Y = a + b1X1 + b2X2 + b3X3$$

$$Self-efficacy = 0,308 + 0,162 \times X1 + (-0,302) \times X2 + 0,148 \times X3$$

DISCUSSION

Relationship of Biological Factors Based on Health Promotion Model Theory To Self-Efficacy In Chronic Renal Failure Patients

Patients undergoing hemodialysis therapy will feel a dependence on the hemodialysis machine. Dependence on hemodialysis machines will affect changes, including a decrease in activity and a decrease in physical health conditions (Suwanti et al., 2017). Patients will also be faced with a condition of changing blood pressure, when excessive fluid withdrawal occurs which can cause a decrease in blood pressure (Noradina, 2018). Patients will also experience a lack of nutritional intake (Sitanggan, 2020), and patients also feel a lot of decreased sexual function (libido) (Suwanti et al., 2017)

The decline in physical health conditions that occur can affect the patient's self-concept of the condition experienced. Self-concept is one of the things that will be related to trust and confidence (self-efficacy) (Suliswati, 2015). In the Theory of health promotion model, self-efficacy that can be understood by individuals about themselves is always related to biological factors, namely the gender and age of a person. The male sex will be more likely to have a higher self-efficacy in overcoming various problems on their own and be able to find solutions to their problems independently (Wantiyah, 2014). In the process of undergoing hemodialysis therapy, men will also be able to confidently make decisions in choosing treatment for their health.

Patients with an increasingly mature age will allow patients to focus on their self-efficacy in achieving goals so that individuals will be more able to solve various problems faced (Noratri et al., 2016). The research of (Alamsyah et al., 2020) stated that a person aged 36 years, the individual will have a level of confidence in his ability (Self-efficacy) in managing and controlling diseases for the better. Patients will be better able to maintain their health status and control their symptoms in maintaining health functions. However, what can increase the patient's self-efficacy biologically is by maintaining physical exercise. Physical exercise functions to maintain overall body fitness and body health in patients. Physical exercise at home sakIt during HD can be done for 30-45 minutes but must be under the supervision and recommendation of nurses and doctors. While at home, physical exercise can be done on foot (Ariani & Arofiati, 2022)

Relationship of Psychological Factors Based on Theory Health Promotion Model to Self-Efficacy in Chronic Renal Failure Patients Undergoing Hemodialysis Therapy

Psychological disorders that occur in GJK patients undergoing hemodialysis therapy can be related to self-adjustment to the condition of illness and side effects caused by hemodialysis (cramps, dizziness, nausea-vomiting, and infection) and are related to how long the patient has been undergoing hemodialysis therapy. In Dewi (2015) reaserch stated that the longer the patient undergoes hemodialysis therapy, the more likely the patient has reached the stage of being able to accept the reality that must be faced, while patients who have just done hemodialysis therapy will tend to face the condition of not being able to accept the reality that must be faced and are still at a low level of self-efficacy, which can allow patients to tend to have behaviors that lead to maladaptive. Psychological disorders with maladaptive behavior can be caused by symptoms that are often felt by patients, namely depression, anxiety and stress (Rosmalia et al., 2018).

Stress begins with an imbalance between the demands and resources of the individual (Istanti, 2012). The higher the gap, the higher the level of stress that will be experienced by each individual (Kozier et al., 2015). The perception of stress is indicated by the presence of behavioral changes such as preferring to withdraw, getting angry, desperate, and it can be said that the individual is experiencing a crisis of self-efficacy.

Relationship of Sociocultural Factors Based on Health Promotion Model Theory to Self-efficacy in Chronic Renal Failure Patients Undergoing Hemodialysis Therapy

Sociocultural factors can be related to self-efficacy because in patients who undergo hemodialysis therapy that causes many changes to force patients to adjust to sick conditions, patients must be encouraged to be able to have abilities such as the ability to face every problem that will arise in the hemodialysis therapy process, and the ability to carry out effective self-management. To support this, the patient must first have great self-efficacy to be able to accept his condition, and instill in him to be able to achieve his recovery target. Of course, this will not be separated from the support obtained by patients socially, both support from family, friends and neighbors and the environment. In line with research conducted by Novitasari and Wakhid (2018) that there is a relationship between family support in the form of social support, with the self-efficacy of chronic renal failure patients undergoing hemodialysis at the Semarang Regency Hospital with a p-value of 0.000,

Patients who get the support of loved ones will have more self-efficacy, so the patient will have confidence, and the ability to be able to do everything as before they underwent hemodialysis therapy. In addition, patients can also believe that the therapy that is being undergone is a process to be able to help their health, so that patients will be more able to be grateful for what is being lived (Novitasari & Wakhid, 2018). Family support will also make the patient psychological calm in dealing with his condition (Pranandari & Supadmi, 2015). Family support will also be used as a place for interaction to share their feelings.

According to (Setiadi, 2018) the family support provided can be in the form of emotional support, support that includes expressions of love, trust, emotions, and concern for others. Appreciation support, which is a support that will be conveyed through encouragement, approves ideas to

individual feelings. Instrumental support, is support in the form of direct assistance such as helping temporarily to do the tasks of someone who is in trouble. While information support can be in the form of advice, motivation and feedback for how a person can act.

Patients and family members who are caring for sick family members expect support both socially, which is by traditional values that exist in the local culture (Zhoras,2012),(Simatupang et al., 2015) such as the Batak culture that gives rice or boras si pir ni tondi as well as special food to be given to the sick, or family members of the sick as a symbol of attention or affection from all parties to the sick (Simatupang et al., 2015).

Factors Affecting Self-Efficacy In Chronic Renal Failure Patients Undergoing Hemodialysis Therapy Based on the Theory Health Promotion Model

Self-efficacy is an important aspect in GJK patients undergoing hemodialysis therapy as an effort to improve the quality of life of patients (Nurohkim et al., 2018). To achieve this target, one of the ways can be done in helping to increase self-efficacy in hemodialysis patients, namely by reducing the symptoms of psychological disorders related to the mental state of each individual that leads to a condition of ability, or whether or not the individual can adjust to various kinds of demands in undergoing development in each individual's abilities, both from the outside and from within himself (Aliyono, 2012)

Individuals with psychological lead to maladaptive behaviors or experience low psychological with a negative mood, meaning that the individual will lead to a serious threat characterized by the presence of changes in the mood of the heart which are mostly depression, stress, and anxiety associated with his illness (Prasetyorini & Prawesti, 2012). If the individual's liver condition is positive, then he will be able to increase self-efficacy. Conversely, if the mood is negative, it will be able to reduce the self-efficacy of the individual. Negative moods such as experiencing stress, anxiety, and depress in hemodialysis patients will have an impact on decreasing patient self-efficacy. to be able to undergo treatment that can affect the patient's non-compliance with dietary modifications, treatment, diagnostic tests, and restrictions on fluid intake, and undergo hemodialysis therapy as scheduled (Baradero, 2015).

All those effects will cooperate since in principle psychological disorders such as stress will be able to affect thoroughly. In the physical, stress can threaten a person's physiological homeostasis. From a social perspective, stress can change the relationship in interacting with someone. Spiritually, stress will affect the values and beliefs of each individual. Emotionally, stress can generate constructive feelings towards oneself. While stress can intellectually affect the ability of the individual to solve problems (Kozier et al., 2015).

Hemodialysis patients will also feel many biological problems. This problem has the potential to influence the patient's self-concept of the condition related to self-efficacy to the beliefs and abilities that individuals can understand about themselves in making decisions (Suliswati, 2015).

The self-efficacy of hemodialysis patients can be improved by paying attention to social relations properly, with the surrounding community, especially the patient's family. Family support will affect the patient's self-efficacy because the support obtained can provide a sense of security, and comfort, and make the patient feel that they have self-esteem, and confidence in facing their problems from this

support can increase the patient's self-efficacy (Novitasari & Wakhid, 2018). In addition, patients or family members also expect to be able to get support both socially from traditional values that exist in the local area, as a form of attention or affection from all parties to the sick (Simatupang et al., 2015).

CONCLUSION

Based on the results of data analysis studies that have been carried out in this study, it is stated that self-efficacy in chronic renal failure patients undergoing hemodialysis therapy is related to biological, psychological, and sociocultural factors. All of these factors can influence the increase in self-efficacy in chronic renal failure patients undergoing hemodialysis therapy, and the most dominant factor in influencing self-efficacy, namely factors from the patient's psychological condition.

SUGGESTION

From the results of the research that has been completed, several suggestions need to be submitted including:

1. Share the Research Place

Nurses can assist in improving patient self-efficacy by providing support to patients so that patients can pay more attention to biological, psychological, and sociocultural conditions.

2. For future researchers

For future researchers Researchers can then conduct research on factors affecting self-efficacy in chronic renal failure patients undergoing hemodialysis therapy based on the theory of health promotion model using a qualitative approach, in order to interact directly with patients directly.

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