INFLUENCE OF SPIRITUALITY ON QUALITY OF LIFE AND GENERAL WELL-BEING IN PATIENTS WITH END-STAGE RENAL DISEASE (ESRD)

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Background: End-stage renal disease (ESRD) introduces physical, psychological, social, emotional and spiritual challenges into patients’ lives. Interest in studying spirituality and its effect on health outcomes and well-being is increasingly emerging in the literature. Spirituality has been found to contribute to improved health outcomes in the areas of quality of life (QOL) and well-being. However, there is lack of research addressing spirituality and its contribution to adjustment in patients with ESRD. In addition, no studies exist to explore the influence of spirituality on the health outcomes and general well-being in patients with ESRD receiving haemodialysis (HD) treatment in Scotland. The study was therefore carried out to examine and explore spirituality in the day-to-day lives of patients with ESRD receiving HD treatment and how it may influence their health outcomes and, in particular, QOL and general well-being.

Materials and Methods: A sequential mixed method approach over two stages was used; quantitative and qualitative. This abstract presents the findings from the qualitative part. Ethical approval was obtained prior to data collection. A sample of 21 participants was recruited from 11 dialysis units distributed over four Health Boards in Scotland. The participants were regular patients currently receiving HD treatment and attending the dialysis units three times per week, diagnosed with ESRD, aged 18 years and older and English speaking. Data was collected using semi-structured interviews and thematic approach using Framework Analysis informed the qualitative data analysis.

Results: Four main themes emerged from the qualitative interviews; ‘Emotional and Psychological Turmoil’, ‘Life is Restricted’, ‘Spirituality’ and ‘Other Coping Strategies’. The findings from the interviews revealed that patients’ QOL might be affected because of the physical challenges such as unremitting fatigue, disease unpredictability, or being tied down to a dialysis machine, or the emotional and psychological challenges imposed by the disease into their lives such as wholesale changes, dialysis as a forced choice and having a sense of indebtedness. The findings also revealed that spirituality was an important coping strategy for the majority of participants who took part in the qualitative component (n=16). Different meanings of spirituality were identified including connection with God or Supernatural Being, connection with the self, others and nature/environment. Spirituality encouraged participants to accept their disease and offered them a sense of protection, instilled hope in them and helped them to maintain a positive attitude to carry on with their daily lives, which may have had a positive influence on their QOL and general well-being. The findings also revealed that humour was another coping strategy that helped to diffuse stress and anxiety for some participants and encouraged them to carry on with their lives.

Conclusion: The findings from this study contribute knowledge to increase our understandings about the influence of spirituality on the health outcomes and general well-being of patients with ESRD.
currently receiving HD treatment. Based on the findings from this study further research is required to obtain better understanding of spirituality and how it may influence the health outcomes and general well-being of patients with chronic illnesses in general and, in particular, among those receiving HD treatment.

Biography: Ali Alshraifeen is an Assistant Professor in Department of Adult Health- Faculty of Nursing at Hashemite University, Jordan. He was graduated in 1998 with a BSc degree in Nursing from Jordan University of Science and Technology, Jordan. He holds his PhD in Nursing from University of Stirling, United Kingdom in 2015. He also obtained both a Master’s degree and a Graduate Diploma in Nephrology in Nursing from Glasgow Caledonian University, United Kingdom in 2006. He had a clinical experience of more than 10 years in ICU, CCU, Emergency Department as well as in Out-patient Department. His research interests are in the areas of chronic illness and mainly patients with ESRD, quality of life, spirituality influence on the health outcomes and well-being. Also interested in employing/adopting simulation in the training of nursing students during their time within his school.