



# Analysis of Factors Affecting Self-Efficacy in Hemodialysis Patients: A Literature Review

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## Abstract

Patients undergoing hemodialysis therapy will experience changes, including physical, psychological and social changes that have an impact on their level of quality of life. One factor that affects hemodialysis patients' quality of life is self-efficacy. This review aims to determine the factors that can affect self-efficacy in hemodialysis patients. This study used a systematic review method by taking articles from 3 databases, namely PubMed, ProQuest and Ebsco. Articles were selected based on predetermined criteria, namely published in 2016-2021, have the complete text, speak English, and use a quantitative methodology with the keywords self-efficacy and hemodialysis. The search results obtained 178 articles, which were then reviewed using a prism diagram to obtain five journal articles. The analysis of this review article uses JBI's critical appraisal. Five articles deserve to be reviewed; two articles state that the factors that influence self-efficacy in hemodialysis patients are self-management. The other three articles each stated that the factors of exercise activity, stress management, and social support could increase self-efficacy in hemodialysis patients. Social support (Family), stress management, self-management and activity training can increase self-efficacy in patients undergoing hemodialysis therapy.

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**Keywords** hemodialysis;  
therapy;  
PubMed;  
ProQuest;  
Ebsco;

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## Introduction

Worldwide attention in the health sector focuses on one chronic disease (Barcellos et al., 2015). Diseases that are classified as chronic diseases include chronic kidney failure. (KacarogluVidcan&GulsevenKarabacak, 2016). Chronic kidney failure requires special therapy, one of which is haemodialysis. Haemodialysis therapy aims to stabilize the body's system and eliminate toxins that can cause permanent injury and even complications that will arise (Barzegar et al., 2016).

The incidence of chronic kidney failure worldwide is estimated at more than 50 million patients diagnosed with kidney failure. In the United States, there are 123,111 patients diagnosed with kidney failure. That year, about 500,000 patients underwent kidney transplantation (URSDS, 2018). According to data for Basic Health Research in Indonesia in 2018, four out of 1000 Indonesians were diagnosed with kidney failure, and the data shows that the prevalence of chronic kidney failure is around 739,208 people. Patients who are actively undergoing haemodialysis are around 77,892 patients (IRR, 2018).

Patients undergoing haemodialysis therapy feel many changes. The changes that occur include physical, psychological and social changes. These changes will have an impact on the level of quality of life of patients undergoing haemodialysis (De Sousa, 2008). The quality of life in haemodialysis patients is lower compared to healthy patients in the general population. The high or low quality of life of each patient is influenced by Self-Efficacy (Chang et al., 2016).

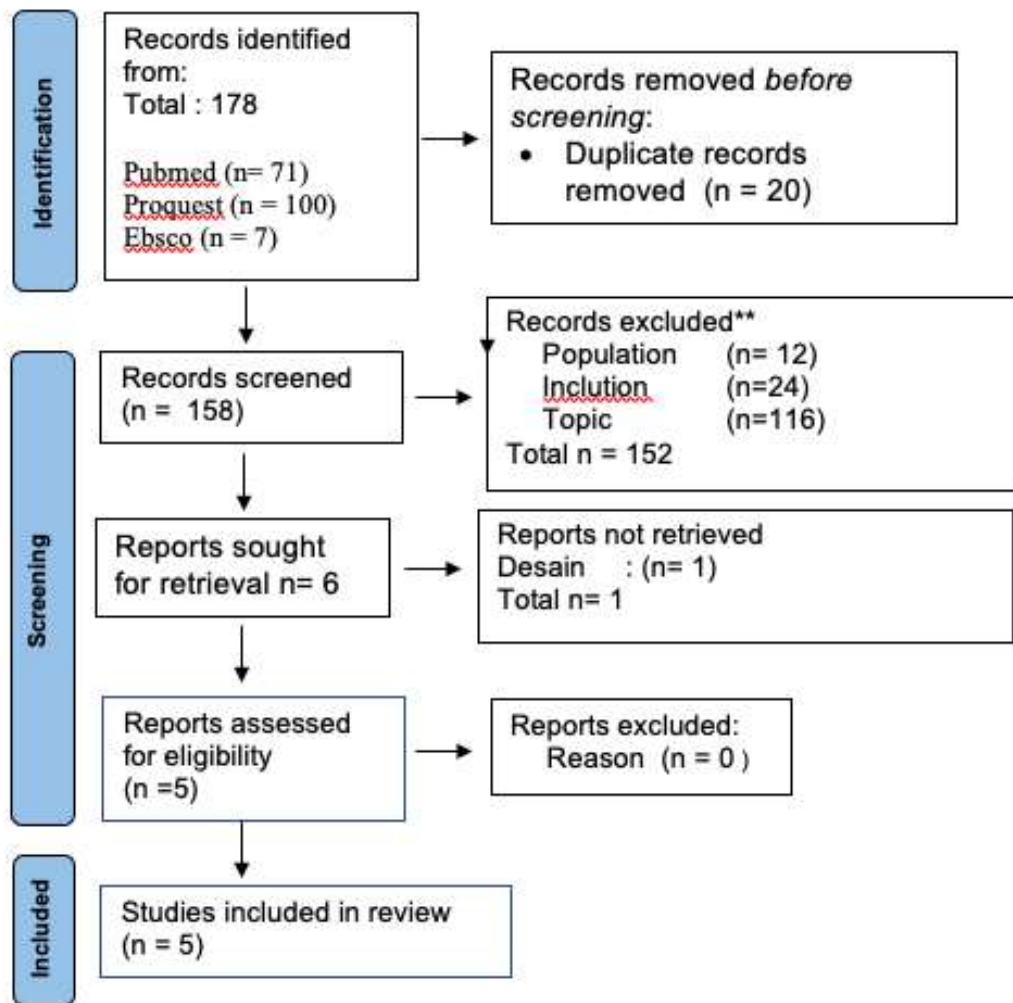
Self-efficacy is an individual's belief or motivation in himself in the ability to take action (Li et al., 2014). In the process of undergoing haemodialysis therapy in CKD patients, it can be seen in the patient's self-efficacy. The higher the patient's self-efficacy, the more routine the patient will undergo therapy and be obedient to the treatment process. Many factors influence self-efficacy, including stress and family support (Hasna et al., 2020). This literature review aims to determine the factors that influence the Self-Efficacy of Haemodialysis Patients.

## 2 Materials andMethods

The review method used is review literature. The selected article has been selected based on inclusion criteria such as year (over the past five years, 2016-2021), full text, databases used for international journal articles, namely, PubMed, Ebsco, and ProQuest with the keyword self-efficacy, and the population is sufferers Hemodialysis, speak English, use quantitative research design. From the search for three databases, 178 articles were successfully identified and filtered with PubMed databases producing 71 articles, ProQuest 100 articles, and Ebsco 7 articles, so the total article was reviewed as many as five articles. Journal analysis was carried out through a prism diagram to identify journal articles entered into the inclusion criteria, each article by inclusion criteria; the researcher analyzed the journal using the AppraisalTool's critical from JBI to assess the quality of articles that will be reviewed or not

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Figure 1. PRISM Flow



### 3 Results and Discussions

#### a. Results

No	Researcher Name & Year	Research Title	Method	Respondent	purposes	intervention	Results	Factor Finding
1	(Hatef et al., 2020)	The Effects of Exercise Training on Physical Performance and Self-efficacy in Haemodialysis Patients: A Randomized Controlled Clinical Trial	Quantitative , with controlled clinical trials Random	Respondents to the study were 60 haemodialysis patients who visited the hospital.	The goal of investigating the effects of exercise on physical performance and self-efficacy in haemodialysis patients	The participants were randomly divided into two groups. Patients in the intervention group received an 8-week exercise program. Patients in the control group received routine care..	Exercise programs that can improve Self-Efficacy and physical performance in haemodialysis patients. This intervention can be recommended for haemodialysis patients because of its effectiveness, simplicity, and uncomplicated characteristics	Physical activity exercise may increase self-efficacy of haemodialysis patients
2	(GhasemiBahraseman et al., 2021)	The impact of stress management training on stress-related coping	Quantitative , Quasi randomized	Respondents in this study amounted to 60	To find out impact of stress	Participants in the intervention group were	The results showed that stress	Stress management may improve

		strategies and self-efcacy in haemodialysispatient s: a randomized controlled clinical trial	controlled clinical trial experiment	respondents by a Convenience sampling and were divided into two groups of interventions (n =30) and controls. (n=30))	management training on stress coping strategies and self-efficacy in patients in Southeast Iran	trained in a stress management training program in 8 one-and-a-half-hour sessions, held twice a week. The data were measured by stress coping strategies and general self-efficacy questionnaires before, immediately, and one month after the intervention.	management strategy scores and Self-Efficacy scores in all dimensions differed markedly between the intervention group and the control group.	self-efficacy of haemodialysi s patients
3	(Hafezieh et al., 2020)	Self-management, self-efficacy and knowledge among patients under haemodialysis: a case in Iran	This study uses quantitative methods with cross-sectional studies	The sample in this study was patients undergoing haemodialysis respectively at the hospital's Shahid Rahnamoun, Shahid Sadoughi,	This research aims to examine self-management and its relationship to self-efficacy, and knowledge of haemodialysi s in patients	This form of haemodialysis knowledge questionnaire and the scale of the self-efficacy of chronic diseases are used to collect data. There are three parts of	The results showed that the amount of self-management in haemodialysis patients was moderate. There is also a significant	Self-management , improving self-efficacy of haemodialysi s patients

				Seyedolshohada, and Goodarza total of 159 respondents	undergoing haemodialysis in Yazd, Iran	the questionnaire, namely self-management, self-efficacy and patient knowledge, using an interview approach before or after dialysis based on patient preferences.	relationship between Self-Efficacy, knowledge, and self-management. Therefore, the higher the level of self-management in patients, the higher the self-efficacy. and his knowledge	
4	(Kiajamali et al., 2017)	Correlation between social support, self-efficacy and health-promoting behaviour in haemodialysis patients hospitalized in Karaj in 2015	Quantitative with descriptive cross-sectional correlational	Respondents totalled 200 haemodialysis patients selected from four hospitals in Karaj based on cluster sampling	To find out the relationship between social support, self-efficacy with health promotion behaviour in haemodialysis patients who are hospitalized in Karaj city	The data was collected using the General Questionnaire method, Perception Self Efficacy Scale, Multidimensional Perception Social Support Scale, and Health Promotion Lifestyle.	Self-efficacy has a significant positive correlation with social support (family) and a significant negative correlation with health-enhancing behaviour, and social support has a	Social support (Family) can increase the self-efficacy of haemodialysis patients

							significant negative correlation with health. Promote behaviour. The results showed that self-efficacy had an important role rather than perceived social support in explaining health-promoting behaviors.	
5	(Lee et al., 2021)	Effectiveness of a self-management program in enhancing quality of life, self-care, and self-efficacy in patients with haemodialysis: A quasi-experimental design	Quantitative quasi-experimental design	The number of respondents amounted to 32 respondents from control groups and experimental groups.	To determine whether a self-management program can improve the quality of life, self-care behaviour, and self-efficacy of	The intervention of the self-management program lasts four weeks, and the post-test is three months later. Questionnaires included a 36-Item Short-Form Health Survey,	The results three months after the intervention, self-management programs have improved the quality of life-related to patient health	Self-management improves the self-efficacy of haemodialysis patients

					haemodialysis patients, so that such interventions can be for clinical treatment reference.	Chronic Kidney Disease Self-Care Instruments, and Chronic Kidney Disease Self-Efficacy Instruments	in the mental health component, but not in the physical health component. The program also promotes patient self-care behaviour and self-efficacy..	
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The search for three databases using self-efficacy keywords and the population of patients with kidney failure undergoing hemodialysis therapy found five journal articles that meet the inclusion criteria. The results of the analysis of the literature review are found that the factors that influence self-efficacy in patients with chronic kidney failure undergoing hemodialysis therapy are as follows:

#### 1. Self-management factor

Two articles state that self-management can increase self-efficacy in GSK sufferers who undergo hemodialysis therapy. Articles from Lee et al., (2021) Research on Effectiveness of a Self-Management Program in Enhancing Quality of Life, Self-Care, and Self-Efficacy in Patients with Hemodialysis with research results after the intervention, personal management programs have improved quality of life-Related to the patient's health in the mental health component, but not on the physical health component. This program also promotes patient self-care behavior and self-efficacy. In the next article by Hafezieh et al. (2020), In research on self-management, self-efficacy and knowledge among patients under hemodialysis, the result that the level of self-management in hemodialysis patients is classified, i.e. the higher the level of self-management in patients, the higher the efficacy of himself.

#### 2. Physical activity exercises.

Of the five articles, only one journal discussed that physical activity exercises affect self-efficacy in chronic kidney failure patients undergoing hemodialysis therapy. Articles from Hatef et al., (2020) About The Effects of Exercise Training on Physical Performance and Self Efficacy in Hemodialysis. The results of his research are that exercise programs can increase self-efficacy and physical performance in hemodialysis patients. Physical exercise interventions are recommended for hemodialysis patients due to their effectiveness, simplicity, and uncomplicated characteristics

#### 3. Stress management

The article found stress management factors in the research of GhasemiBahraseman et al. (2021) with the title The Impact of Stress Management Training on Stress-Coping Strategies and Self-Efficacy in Hemodialysis Patients. The results showed that the stress management strategy score and self-efficacy scores in all dimensions significantly differed between the intervention group and the control group. Stress management interventions through coping strategies increase the self-efficacy in patients with chronic kidney failure undergoing hemodialysis therapy.

#### 4. Social support

Social support factors also influence self-Efficacy in Patients with chronic kidney failure undergoing hemodialysis therapy. From the article, there is a journal that discusses social support, such as research from Kajamali et al. (2017), which examines the Correlation between social support, self-efficacy and health-promoting behavior in hemodialysis patients, with the result that self-efficacy has a positive correlation which is significant with social support such as family support. The results show that self-efficacy felt by patients has a greater role than the social support felt in explaining the behavior of promoting health

#### b. Discussion

Self-efficacy is the most important requirement for changes in behaviour in achieving a quality of life. Self-efficacy refers to the beliefs individuals possess in carrying out certain activities, including beliefs to carry out these activities when obstacles arise. Self-efficacy predicts various health behaviours and positively influences health behaviour (Kauric-Klein et al., 2017). Some factors that influence self-efficacy in patients with GSK undergoing haemodialysis therapy need to be analysed and discussed for nurses to increase patient self-efficacy.



### **Self-management factor**

Self-management in patients suffering from chronic kidney failure undergoing haemodialysis therapy is classified in the medium category. The medium category means his treatment of treatment, the ability to monitor themselves against the status of the disease, and the handling of symptoms that appear not so good, following the opinion of the Sebalum et al. research that self-management is interpreted as an effort to haemodialysis patients, which includes aspects of how patient self-care behaviour, self -monitoring of disease status, and handling symptoms of diseases felt by patients (Richard & Shea, 2011). If the patient can manage themselves well, haemodialysis patients will be able to achieve the expected results in effective treatment, reduce complications, and increase the level of use of health services (Lee et al., 2021), so that self-management will affect the quality of life of the patient better.

Self-management has a significant relationship with self-efficacy and the knowledge of GGK patients about compliance in undergoing haemodialysis. Therefore, the higher the level of self-management in patients, the higher the self-efficacy and knowledge. Interventions with self-management programs can increase the self-efficacy of patients undergoing haemodialysis; it is recommended to intervene in self-management programs because it is more effective in increasing self-efficacy compared to traditional health education (Lee et al., 2021). Self-management in haemodialysis patients is an effective process in minimizing the occurrence of mortality, overcoming the side effects of a disease, and improving patients' quality of life (Griva et al., 2011). Self-management can also increase patient trust in their ability to achieve their goals so that the change in behaviour (Lee et al., 2021).

### **Physical activity exercises**

The problem that is often complained of by chronic kidney failure patients undergoing haemodialysis therapy is muscle tension. The patient's condition will usually experience weaker muscle tension; the weakness is due to a reduction in activity, autopathic atrophy, neuropathy and others (Hatef et al., 2020). Muscle is an important function for the human body as a support for daily activities, so it is important to maintain muscle health. Maintaining muscle health can be done by constructing muscles, one of which can be done with physical activist exercises. Physical exercise is a planned, structured movement to improve or maintain aspects of physical fitness. Physical exercise is important because it can withstand body fitness and overall health (Eva Segura- & Orin, 2010).

During the dialysis process at the hospital, and under the supervision of nurses, physical exercise can last for 30-45 minutes, physical exercise that can be done such as the Range of Motion (ROM) exercise. Physical exercise aims to increase blood flow in the muscles, and enlarge the capillaries, thereby increasing the transfer of urea and toxins from the tissue to the vascular and then flowing to the dialyzer (Parsons et al., 2006). When haemodialysis patients are at home, physical exercise can be done on foot (Hanson & Jones, 2015).

Physical activity such as walking in patients with kidney failure can be the right activity to increase daily physical activity, reduce dependence, and increase independence in haemodialysis patients due to easy, safe, cheap, can be done anytime and anywhere, and does not require special equipment. Therefore, nurses use the physical activity training method in haemodialysis patients to increase self-efficacy and the patient's physical performance. According to the research results from Hatef et al. (2020), educational planners, managers,



nephrologists, and medical staff can use exercise as a non-pharmacological treatment to rehabilitate haemodialysis patients.

### **Stress management**

Patients who experience haemodialysis therapy will often feel many physical, social, and psychological changes (De Sousa, 2008). In haemodialysis, patients more often experience stress. Physical stress is related to pain, feelings of restlessness, and limitations of fluids and food (Saeida et al., 2012). Stress that is felt will hurt patients, such as putting pressure (physical and psychological) concerns, mood changes, lack of motivation to seek treatment to reduce confidence in accepting haemodialysis therapy, and causing other physical diseases. In this condition, it is necessary to overlap to manage stress management (Hasanzadeh&Naderi, 2017).

Manage stress management in chronic kidney failure patients undergoing haemodialysis therapy to overcome better life's needs and challenges (Nyklíček&Kuijpers, 2008). Steps that can be taken in stress management include relaxation. Relaxation exercises can reduce oxygen consumption, stabilize breathing rhythm, can also reduce muscle tension. For individuals who experience pain in the body due to chronic diseases, this exercise can certainly increase their sense of comfort and reduce their anxiety (Kwekkeboom&Gretsarsdottir, 2006). Stress management can be done through training programs through counselling effectively to improve stress coping strategies and self-efficacy (GhasemiBahraseman et al., 2021).

Self-efficacy patients undergoing Haemodialysis therapy in a low category (Lee et al., 2021); based on the study results, management is needed to increase self-efficacy. The results of training from GhasemiBahraseman et al. (2021) state that stress management can increase self-efficacy,

and it is recommended to nurses to use easy, feasible, and inexpensive stress management interventions while providing health care for dialysis patients in stress management, and increase patient self-efficacy (GhasemiBahraseman et al., 2021). When the patient can manage his stress well, it can increase his self-efficacy and change the patient's behaviour in receiving haemodialysis therapy.

### **Social support**

Kammerer (2007) explains that important factors in compliance with medical programs are social support in the form of emotional support from other family members, friends, time, and money. Motivation is everything that encourages someone to do something (Nursalam, 2014). Social support is important considering that chronic kidney failure patients must undergo haemodialysis therapy throughout their lives, usually 1-3 times a week, and every time it takes 2-5 hours, or until it gets a new kidney through kidney transplant surgery (between et al., 2020; Maulana et al., 2022). So the patient is required to obey to carry out therapy.

Compliance with haemodialysis patients is important to note; if the patient is not obedient in undergoing haemodialysis therapy, it will have an extraordinarily negative impact including, patients will experience diseases that interfere with the quality of life, physical, psychological and social disorders, fatigue, or extraordinary fatigue that causes frustration. This negative impact causes high mortality and morbidity in CKD patients (Hutagoel, 2017; Situmorang et al., 2022). For that, we need good family support.

Family support is one factor that influences increasing patients' motivation to carry out haemodialysis treatment. Without family support, the haemodialysis program cannot be done according to the patient's schedule. Family



involvement is similar to the empowerment of systems that seek to help individuals (family members) to control themselves and influence the community by empowering individuals and families to increase family knowledge, skills, and capacity to become reliable protectors for their own families (Keliat, 2005; Suwarsi & Baua, 2021). The support obtained by patients undergoing haemodialysis from friends, family, and relatives can also have a good influence on the patient's self-efficacy, which will be related to patient compliance with fluid restrictions (Kammerer, 2007).

### CONCLUSION

Factors influencing self-efficacy in chronic kidney failure patients undergoing haemodialysis therapy the most influential sequence is the factors of self-management, physical exercise, stress management, and family support.

### LIMITATION OF THE STUDY

In this review literature, the research limit is self-efficacy, specifically in patients with chronic kidney failure undergoing haemodialysis therapy.

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