



**Psychosocial Experiences Of  
Patients With End Stage Kidney Disease: A Phenomenological Study  
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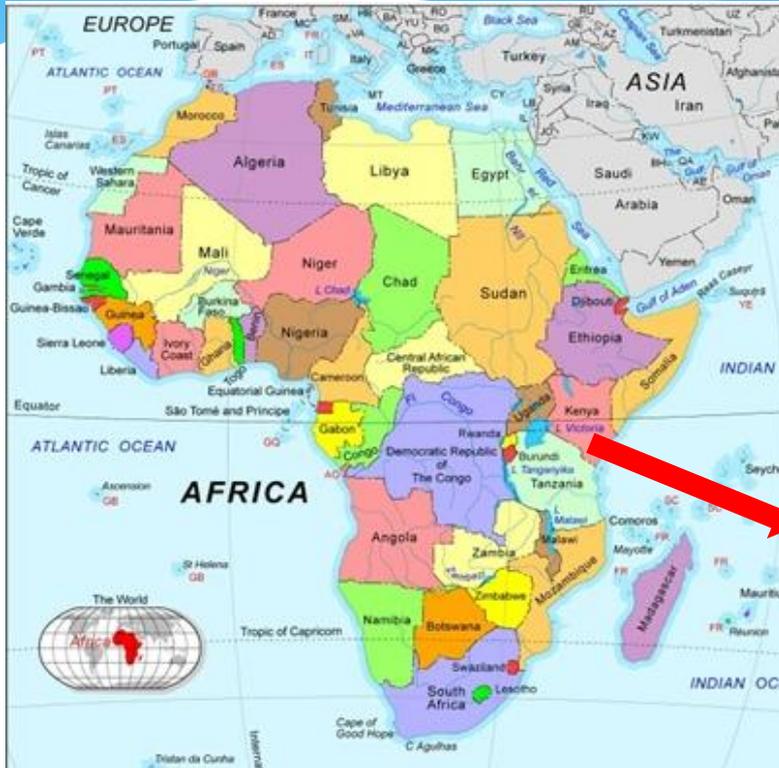
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# KENYA 8,847.2 KM AWAY FROM PRAGUE





# BACKGROUND



- \* Kenya Renal association observes that over 10,000 Kenyans are annually diagnosed annually with End Stage Kidney Disease (ESKD) Opiyo, Nyasulu, Olenja, et al (2019 )
- \* Over 10% of this population undergo some form of renal replacement therapy (RRT) to sustain life.
- \* RRT often leads to some changes in one's life style that the patient may consider unpleasant or restrictive
- \* Over 50% of patients on RRT do not comply with therapy because of the unpleasant psychological and social experiences associated with their life style adjustment



## BACKGROUND (Cont.)



- \* Understanding patients experiences Is the first step towards improving compliance and consequently health outcomes for patients

**Main Objectives.** To explore psychosocial experiences of patients with ESKD



# METHODOLOGY



**Design:** A cross sectional descriptive qualitative study-using the phenomenological approach.

**Study site:** A National referral hospital

**Duration of data collection :** 12 weeks.

**Sample size:** 14 patients selected purposively using the principle of data saturation.

**Inclusion criteria:** Patients diagnosed with ESKD undergoing RRT

**Ethical considerations:** Autonomy, non-maleficence, beneficence, Justice observed



# METHODOLOGY CONT.



## **Data collection Procedure:**

In-depth interviews , audio -recording ,field notes.

Duration of interviews - 35-45 minutes.

## **Explicitation of the data :**

Transcribed data from the interviews and field notes.

Delineated units of meaning and clustered them to form themes

Identified themes and patterns were categorized and psychosocial experiences of the patients were constructed





# RESULTS / FINDINGS



<b>PARTICIPANTS' CHARACTERISTICS</b>	<b>NO.</b>
<b>Age</b>	
18-28	1
29-39	4
40-50	5
51-61	4
<b>Gender</b>	
Male	6
Female	8
<b>Marital status</b>	
Single	5
Married	5
Separated	1
Widowed	3
<b>Employment status</b>	
Employed	5
Not Employed	9
<b>Duration of RRT in moths</b>	
Less than 12 months	8
More than 12 months	6



# Categories of experiences



## Psychological Experience

- **Anger-** Anger directed at family members who are blamed for abandoning the individual
- **P2** “ *My wife has become very negligent she no longer listens to me ,she does not spend time with me, she is just annoying*”
- **Fear** – Of being alone, probably due to perceived impending death
- **P10** “ *When am alone I feel so afraid, I wish my people would stay by my side always, but I know it is impossible*”

## Social Experience

- **Lack of concern** –By the people around patients
- **P4** “*people just pity us but they don’t care; If they did, they would come to our Harambees*”
- **P13** “*everyone is just busy with their own lives; nobody can give us priority in a queue*”
- **Isolation:** *By the friends for various reasons*
- **P1** “ *Since I left work, my friends no longer visit; I don’t know if they think I shall beg from them*”



# Discussion ,Conclusions and Implications



**Discussion: Similar** psychosocial experiences have been reported by various researchers such as: Gerogianni.(2016)-Social isolation;Griva (2018)-Anxiety and depression;Shahgholian, and Yousefi, (2018)-Psychosocial experiences

**Conclusion:** Psychological and social experiences of clients undergoing renal replacement therapy are real and left unattended, may act as barriers to therapy compliance

**Implications for nurses:** As clinical practitioners always evaluate and emphasize their significance to students under supervision



# Some References



- Gerogianni S.(2016), social life of patients undergoing hemodialysis,' *international journal of caring sciences*, 9(1)122-134
- Giussepina D., (2016), Quality of life, clinical outcome personality and coping in chronic hemodialysis patients,' *Renal failure*, 39 (1 ) 43-53.
- Griva K., (2018), Anxiety and depression inpatient with end stage renal disease:impact and management challenges:a narrative review.' *International Journal of Nephrology and Reno vascular diseases* vol (11 ).98-102.
- Opiyo, R. O., Nyasulu, P. S., Olenja, J., Zunza, M., Nguyen, K. A., Bukania, Z., ... & Were, A. O. (2019). Factors associated with adherence to dietary prescription among adult patients with chronic kidney disease on hemodialysis in national referral hospitals in Kenya: a mixed-methods survey. *Renal Replacement Therapy*, 5(1), 1-14.
- Shahgholian, N., & Yousefi, H. (2018). The lived experiences of patients undergoing hemodialysis with the concept of care: a phenomenological study. *BMC nephrology*, 19(1), 338-345



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**THANK YOU  
FOR  
YOUR ATTENTION**