# Conflict in the Family and Social Support as determinant of Dialysis Patient's Compliance.

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**Abstract**

The study investigated the relation of dialysis patient's compliance to the levels of family conflict and the levels of social support. This study utilized the descriptive-correlational design employing quantitative approach in determining if there is a correlation between the Levels of Conflict in the Family, the levels of Social Support and the compliance of the patient. Moreover, the study was conducted in the different dialysis centers in Cebu City and the respondents of the study are the 60 dialysis patients that were selected using a simple random sampling approach. Furthermore, the research instrument used in the study is a researcher made questionnaire. The findings of the study revealed that there was a significant relationship between the Levels of Conflict in the Family and Levels of Social Support to the compliance of the patient. The study concluded that both family and friends are an important fragment in surviving patient on dialysis and they should be flexible on the schedules of the patient and must adjust to the changes in roles and lifestyle

**Keywords**. *Patient's compliance, Conflict in the family, Social Support*

## 1. Introduction

The intention of all health management is to grasp positive desired results for the patient. These desired results are part of the objectives in the management of the diseases However, in spite of all the utmost intention and efforts on the part of the nurse, those results might not work if the patients are non-compliant. This gap may also have serious and damaging effects from the outlook of disease management. Moreover, for any medical conditions effective health management is necessary for a patient's survival and quality of life. A major hurdle for successful health management is the patient's failure to follow the recommended management of the physician and the healthcare provider. Patient compliance can take many varieties; the advice given to patients by their healthcare professionals to cure and regulate the disease is too often misinterpreted, carried out incorrectly, forgotten, or even completely ignored.

Chronic kidney disease is a problem with unpredictable predicaments. not only does it encompass the body physically, but it also distresses one's relationship, self-esteem and conduct. Price (1996) describes a dialysis patient as someone that needs to responds to changes in health, his or her involvement with healthcare professionals, and the emotional changes associated with pathology, grief and management of stress. The identification of a chronic illness and its subsequent management carries a unique experiences and implications to the patients and their families. In addition, Chronic renal disease requires strict compliance to the health management. The patient should adhere to the medical treatment and advice of the physician. But if the patient does not follow the treatment, it could lead to complications like heart failure.

Derasin (2019) described that surviving kidney disease requires the precise attitudes and behaviors that a dialysis patient should possess that would help him survive his condition. This would start with the acceptance on his condition being a patient with chronic kidney disease and then being optimistic about what life could still offer even with the disease. There is also a motivation to living normally despite the disease. Furthermore, behavior modification is also needed which infers a complete change in the routine like following the regular dialysis management schedule, following the diet plan, compliance with the advised of the physician such as taking the maintenance medication and finally learning from personal and other dialysis patient's experiences

No matter how much effort being put by the health provider, compliance is on the rise for any type of patients because man by nature always seeks pleasure even if it is not good for them. compliance to the management may pose little threat to patients with acute illness but to those people suffering from chronic illness this may prove to be fatal.

The goal of nursing care has always been to always help the patient, make them always feel comfortable in their stay in the hospital. Nursing care centers on health promotion and collaboration with individual, family, or community and self-care or management of chronic condition (Corbin and Strauss, 1981). And therefore is the goal of this research study to improve the care and compliance of patient with chronic kidney disease.

## 2.    Methods and Materials

This study will utilize descriptive-correlational design employing quantitative approach in determining if the Levels of Conflict in the Family and levels of Social Support determines the compliance of the patient. Moreover, the study was conducted in the different dialysis centers in Cebu City and the respondents of the study are the 60 dialysis patients that were selected using a simple random sampling approach. Furthermore, the research instrument used in the study is a researcher made questionnaire which is divided into three parts which was tested for validity and reliability through pilot testing. The first part entails the questionnaire to determine the levels of conflict in the family, the second part is to determine the level social support in the family and the third is to determine the level of non – compliance.

### Ethical Consideration

To preserve and protect the ethical standards in conducting researches. an informed consent was disclosed to the respondent. Moreover, it was disclosed to them all information regarding the research study this includes presenting information about the research to the respondents such as the reasons for conducting the study, the reasons why they are selected as the respondents of the study, the possible benefits and burdens of partaking. Likewise, they were also informed that withdrawal from participation of the study at any time is possible and Informed them that participation is voluntary in nature. On the same manner, they were also guaranteed that their identities are protected throughout the study and any information they revealed are treated with high respect and confidentially. Additionally, the respondents are being given an assurance that anything they want to know about the results/findings of the study is provided to them. The respondents are also given ample time to consider or decide whether to take part or not in the study and lastly, letting the respondents signed and have a copy of a consent document.

### Data Gathering Procedure

The data gathering by determining the respondents of the study with of social media, specifically Facebook the researchers was able to identify possible respondents, the researcher selected the respondent using a simple random sampling method from a list. After which the researchers then sent personal messages to the selected respondents, inviting them to participate in the study. After consent was secured, the researcher administered the questionnaire online.

## 3.    Results

The four tables below presented the findings of the study, the first table described the levels of conflict in the family of the respondent, the second table entailed the levels of social support of the respondent, the third table articulate the patient's level of compliance and the fourth table presented the correlation of the levels conflict and the levels of support to the patient's level of compliance.

**Table 1. Levels of conflict in the family of the respondents**

| Levels of conflict in the family | Weighted mean | interpretation |
|---|---|---|
| In the family we fight a lot (Not physically) | 2.50 | Low |
| In the family we often criticize each other | 2.45 | Low |
| When conflict arise in the family, we most like loss our temper | 2.60 | Low |
| Most of the time we raise our voice, when there is conflict in the family | 2.65 | average |
| When there is conflict, we get so angry that we throw things. | 2.53 | Low |
| We often try to out-do each other in the family | 2.57 | Low |
| Sometimes we hit each other in the family. | 2.49 | Low |
| If we disagree in the family, we do not try to smooth things over | 2.54 | Low |
| Family related strain interfere with our daily activities | 2.56 | Low |
| The demands of my family or spouse / partner interference with my daily activities | 2.61 | average |
| Grand Mean | 2.55 | Low |

**Legend**

| Rating Score | Adjectival rating | Parameter limits | Interpretation |
|---|---|---|---|
| 5 | Strongly agree | 4.21- 5.00 | Very high |
| 4 | agree | 3.41 -4.20 | High |
| 3 | undecided | 2.61 – 3.40 | average |
| 2 | disagree | 1.81 – 2.60 | Low |
| 1 | Strongly disagree | 1.00 -1.80 | Very low |

Table 1 presented the Levels of conflict in the family of the respondents. It revealed that with a grand mean of 2.55 the respondent has a low level of conflict in the family. With the highest mean coming from fourth item (Most of the time we raise our voice, when there is conflict in the family) having a mean of 2.65 which is classified as average level. All in all, the result implied that most dialysis patient experienced fewer conflict with their families.

**Table 2. Levels of social support of the patient**

| Social support | Weighted mean | interpretation |
|---|---|---|
| If I wanted to go to my dialysis treatment, I would easily find someone to go with me. | 4.70 | Very high |
| I feel that there is always someone I can share my most private worries and fears with my illness | 4.69 | Very high |
| When I am feeling sick, I could easily find someone to help me with my daily chores | 4.82 | Very high |
| There is someone I can turn to for advice about handling my problems with my illness | 4.83 | Very high |
| When I need suggestions on how to deal with a personal problem, I can always find someone. | 4.72 | Very high |
| When I feel lonely, there are several people I can talk to. | 4.84 | Very high |
| If I decide to go to the hospital for my check ups and laboratories, I could easily find someone to go with me. | 4.80 | Very high |
| If I needed some help during a medical crisis, I would easily find someone to help me | 4.75 | Very high |
| I often meet and talk with family or friends | 4.65 | Very high |
| If I needed a ride to the to my dialysis center very early in the morning, I could easily find someone to take me. | 4.68 | Very high |
| There is someone I can count on to help me with my medical finances. | 4.77 | Very high |
| If I were sick and needed someone to take me to the doctor, I would have easily find someone. | 4.76 | Very high |
| There are numerous people who I trust to help solve my problems. | 4.87 | Very high |
| Grand Mean | 4.76 | Very high |

**Legend**

| Rating Score | Adjectival rating | Parameter limits | Interpretation |
|---|---|---|---|
| 5 | Strongly agree | 4.21- 5.00 | Very high |
| 4 | agree | 3.41 -4.20 | High |
| 3 | undecided | 2.61 – 3.40 | average |
| 2 | disagree | 1.81 – 2.60 | Low |
| 1 | Strongly disagree | 1.00 -1.80 | Very low |

Table 2 presented the levels of social support of the respondent. It described that with a grand mean of 4.76, the respondent has a very high level of social support. Likewise, the highest mean score is coming from the last item (There are numerous people who I trust to help solve my problems) having a mean of 4.87 classified as very high. The result inferred that that respondent felt that they have a lot of people, like friends and families that would supports them in their journey as a chronic illness patient.

**Table 3 patients level of Non-Compliance**

| Patient's Level of compliance | Weighted mean | interpretation |
|---|---|---|
| I regularly monitor my blood pressure | 2.50 | low |
| I always follow the diet for my condition | 2.71 | average |
| I know the importance of my medication | 2.67 | average |
| I occasionally do not miss my appointment on my scheduled dialysis treatment | 2.65 | average |
| I do not make my own modifications on the doses of the prescribed drugs. | 2.60 | average |
| I do not forget taking my medications. | 2.69 | average |
| I control my everyday fluid intake. | 2.76 | average |
| I get plenty of rest every day. | 2.86 | average |
| I always follow the advice of my physician regarding the management of my condition. | 2.59 | low |
| I continuously take my medication on time. | 2.77 | average |
| Grand Mean | 2.68 | average |

*Legend*

| Rating Score | Adjectival rating | Parameter limits | Interpretation |
|---|---|---|---|
| 5 | Strongly agree | 4.21- 5.00 | Very high |
| 4 | agree | 3.41 -4.20 | High |
| 3 | undecided | 2.61 – 3.40 | average |
| 2 | disagree | 1.81 – 2.60 | Low |
| 1 | Strongly disagree | 1.00 -1.80 | Very low |

Table 3 presented the level of patient's compliance. It revealed that with a grand mean of 2.68 the respondents have an average level of compliance. Moreover, the highest mean score is in eight item (I get plenty of rest every day) which is considered as average. The result inferred that most patient to some degree does not fulfill the medical management.

**Table 4. Correlation of the Levels of Family Conflict and Levels of Social Support to the Level of Patient's compliance.**

| Variables | Pearson's value | P - value | decision | interpretation |
|---|---|---|---|---|
| Levels of conflict in the family and the level of patient's compliance | -.472** | .000 | Reject the null hypothesis | Significant relationship |
| Social support and the level of patient's compliance | .302* | .019 | Reject the null hypothesis | Significant relationship |

**. Correlation is significant at the 0.01 level (2-tailed).
*. Correlation is significant at the 0.05 level (2-tailed).

Table 4 articulated the correlation between the Levels of Family Conflict and Levels of Social Support to the Level of Patient's compliance. It described that with a Pearson's value of -.472** and a p value of .000 there is a significant relationship between the levels of conflict in the family and the level of patient's compliance. Likewise, with a Pearson's value of .302* and a p value of .019 there is a significant relationship between the level of social support and the level of patient's compliance.

## 4. discussion

Compliance for the longest period has been acknowledged as a significant issue in the health-care arena. Compliance with recommended medical treatment, the extent to which these recommendations are charted, presented a multifaceted of challenges (miller, 1997). The findings of the study revealed two factors that holds a bearing to the compliance of a dialysis patient to the recommended regimen. Namely; the level of conflict in the family and level of social support.

The anxieties of daily plans of living, stress, and the usual conflict in the family are the prime obstacles to compliance (Penkower, Dew, Ellis, Sereika, Kitutu, and Shapiro, 2003). since family members are supposed to help the patients in many ways to acclimate to the lifestyle modifications and to cope with the illness. In collaboration with the with healthcare specialists, members of the family deliver support in the management compliance involving the medical treatment, exercise, and diet (Miller and DiMatteo, 2013). Moreover, in connection to the unity of the family, in which families are described as warm, accommodating, and close, the probabilities of compliance to the medical management were higher when compared with families without unity (DiMatteo, 2004). Which imply that the family's ' non supportive behaviors are linked with the patient being less adherent to the medical management (Mayberry, Mulvaney, Johnson and Osborn, 2017).

Furthermore, the second finding s of this study is that the level of social support contributes to the patient's compliance. Most nursing theorist suggested the need for social support as a vital element; family members are the most substantial foundation of that support (kang et. Al., 2010). This confirmed by Shaw *et al*. (2006) which described that members of the family followed by friends delivered the highest social support for patients. Likewise, it has been related to the promotion of health practices as well as to the use of services in health and compliance with medical management. Moreover, Social support was also found to influenced the aptitude to cope with situation and live with illness (Hegelson & Cohen, 1999).

## 5. Conclusion

The findings from this study are significant as they highlighted the relationship between the compliance of hemodialysis patients and the conflict in the family and the social support. Likewise, it is noteworthy to described that both family and friends are an important fragment in surviving patient on dialysis. They should be flexible on the schedules of the patient and must adjust to the changes in roles and lifestyle because dialysis patients often feel helpless in confronting their illness. This feeling of helplessness causes negative impact on the part of the patient such as being isolated and depressed.

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