



UNIVERSITAS WIRARAJA
LEMBAGA PENELITIAN DAN PENGABDIAN
KEPADA MASYARAKAT

Alamat : Jalan Raya Sumenep-Pamekasan Km.5 Patean-Sumenep 69451

Telp. : (0328) 664272 Fax : (0328) 673088

Website : www.lppm.wiraraja.ac.id , E_mail : lppm.wiraraja@gmail.com

SURAT PERNYATAAN

Nomor : 094/SP.HCP/LPPM/UNIJA/XI/2019

Yang bertanda tangan di bawah ini :

Nama : Anik Anekawati, M.Si
Jabatan : Ketua LPPM
Instansi : Universitas Wiraraja

Menyatakan bahwa :

Nama : Mujib Hannan, S.K.M., S.Kep., Ns., M.Kes
Jabatan : Staf Pengajar Fakultas Ilmu Kesehatan

Telah melakukan cek plagiarisme ke LPPM menggunakan *software turnitin.com* untuk artikel dengan judul "**Family Support and Family Economic Status With**" dan mendapatkan hasil similarity sebesar 11.0%

Demikian surat pernyataan ini dibuat untuk digunakan dengan sebaik-baiknya.

Sumenep, 15 November 2019

Ketua LPPM

Universitas Wiraraja,

Anik Anekawati, M.Si

NIDN. 0714077402

FAMILY SUPPORT AND FAMILY ECONOMIC STATUS WITH

by Mujib Hannan

Submission date: 12-Nov-2019 02:23PM (UTC+0700)

Submission ID: 1212119249

File name: 217-Original_Article-1305-3-10-20190829.pdf (287.32K)

Word count: 3161

Character count: 16745



FAMILY SUPPORT AND FAMILY ECONOMIC STATUS WITH DEPRESSION LEVEL ON PATIENTS END STAGE RENAL DISEASE (ESRD) IN GATOEL HOSPITAL MOJOKERTO DISTRICT INDONESIA

Muhith Abdul¹, Lutfi K.², Tatik Sutarti³, Hannan Mujib⁴, Lantin Sulistyorini⁵, Saiful Siyoto⁶

^{1,2} Associate Professor in Nursing Department of STIKes Majapahit Mojokerto

³ Lecturer in STIKIP PGRI Pacitan

⁴ Lecturer in Faculty of Nursing Community Universitas wiraraja Sumenep, Indonesia

⁵ Lecturer in Faculty of Nursing Universitas Jember

⁶ Departemen Public Health of STIKes Surya Mitra Kediri, Indonesia

Email: abdimuhith1979@gmail.com, mujib@wiraraja.ac.id, lantin_s.psik@unej.ac.id

ABSTRACT

Keywords

Patients with hemodialysis therapy have uncertainty as to how long hemodialysis is required and should accept the fact that therapy is needed throughout life. Because it appears anxiety response, rejection and anger. ESRD patients undergoing hemodialysis therapy, require support from the family. The purpose of this study was to determine the relationship of family support and economic status with depressed ESRD patients who underwent hemodialysis therapy <1 year. The design of this research is descriptive correlation with cross sectional research method, by using simple random sampling technique with the number of samples of 47 ESRD patients who are undergoing hemodialysis at Gatoel Hospital Mojokerto. The Research done in April 2017. The results obtained most of the respondents have economic ability Above the Provincial Minimum Wage of 27 respondents (57.4%). Most of the respondents stated that they received good family support in 30 categories (63,8%) and most of respondents had light depression 24 respondents (51,1%). Based on statistical test of spearman's rho with significance level α 0,05 obtained result $(r) = 0,462$ meaning bigger than value signifikansi $(0,462 > 0,05)$ hence H1 rejected which mean there is no significant relation between economic status with depression level In ESRD patients and Spearman's rho statistical test results obtained significance value $0,000 < 0,05$ which means there is a significant relationship between family support with depression levels in ESRD patients. The economic level does not affect depression because the cost of hemodialysis therapy all respondents is covered by health insurance, whereas family support has a positive influence where the better the family support the lighter the depression level in ESRD patients undergoing hemodialysis therapy

Family support, economic status, depression level, hemodialysis

INTRODUCTION

End-stage renal failure is the rate of kidney failure that can cause death unless renal replacement therapy (Smeltzer & Bare 2004 in Marlina & Andika 2012). Until now, Hemodialysis is still the main alternative to renal function replacement therapy for CKG patients because of the more accessible costs and the risk of bleeding lower when compared with peritoneal dialysis (Wartilisna et al 2015). Hemodialysis action in chronic renal failure patients takes 12-15 hours for dialysis each week, or at least 3 -4 hours of therapy interval. This activity will take place continuously throughout his life (Jhony Y.K et al, 2015). The state of dependence on hemodialysis machines results in changes in the life of ESRD sufferers undergoing hemodialysis therapy (Anggita et al, 2016). Not only have an impact on the economy, most patients with ESRD undergoing hemodialysis never return to their usual activity or occupation, resulting in a loss of employment, decreased income, loss of freedom, hope, self-esteem, and identity. The presence of a sense of loss, inadequate feelings, fear, and anxiety can lead to a mental disorder of depression (Wartilisna et al, 2015).

In ESRD patients undergoing hemodialysis therapy, requires support from the family. Good emotional support, instrumental support, and information support. A person who gets support from the family will undergo hemodialysis with a passion (Anggraeni et al, 2016). Although the disease Kidney failure is not included in the ten deadly diseases in the world, the disease remains a concern of world health agencies. According to the World Health Organization (WHO), globally more than 500 million people suffer from chronic renal failure (Ratnawati 20014 in Anggraeni, et al 2016). In Indonesia itself, according to Kidney Care Foundation there are 40.000 patients with chronic renal failure. But of that number, only about 3000 patients who

usually enjoy the service of dialysis or hemodialysis (Anggraeni et al, 2016). Based on a preliminary study on December 7 2016, recorded the number of patients who perform hemodialysis as many as 170 people. Based on interviews conducted on 10 patients who were diagnosed with medical End Stage Renal Disease (ESRD) and underwent hemodialysis less than 1 year found 3 of (10) 30% of patients have middle economic status with family support less likely to have severe depression level. And 7 out of 10 (10) 70% of patients with low economic status with good family support tend to have moderate levels of depression.

The state of dependence on hemodialysis machines results in changes in the life of ESRD sufferers undergoing hemodialysis therapy (Smeltzer & Bare, 2013 in Anggita et al, 2016). Not only have an impact on the economy, most patients with ESRD undergoing hemodialysis never return to their usual activity or occupation, resulting in a loss of employment, decreased income, loss of freedom, hope, self-esteem, and identity. There is a sense of loss, an inadequate feeling, fear, and anxiety that can lead to a mental disorder of depression (Muhith A., 2015). It is strongly associated with high mortality, high morbidity, and hospitalization (Kojima, 2012). ESRD patients undergoing hemodialysis usually start experiencing light to severe anxiety in the 2nd to 6th months, because at the beginning of the month the patient is still facing a stage of adjustment to hemodialysis action that must be done for the rest of his life (Ainivi, 2015). Patients confronted with hemodialysis therapy have uncertainty as to how long hemodialysis is required and should accept the fact that hemodialysis therapy is required throughout life (Safitri V.W, 2013 in Ainivi et al, 2015). Because it appears anxiety response, rejection, and anger. It is a common response caused by stress that would have more impact on the state of depression (Marwati, 2005 in Ainivi et al, 2015).

At first, the patient will fall into anxiety state, anxiety that is not immediately overcome can bring the individual into the deeper psychological problems of depression, it will more impact on the final phase of the individual is the desire to end his life (suicide). In ESRD patients undergoing hemodialysis therapy, requires support from the family. Good emotional support, instrumental support, and information support. A person who gets support from the family will undergo hemodialysis with a passion (Anggraeni et al, 2016). Family support is an important factor for individuals when faced with health problems, in which families play a role in the health care function of their family members in order to achieve optimal health. Advice and affection from family members can provide a positive perception for individuals to achieve everything in reaching their dreams, so they are confident and optimistic about the future expectation. In addition, it is expected that sick family members can make the family as a collection of hope, where to tell, where to ask questions, and where to issue complaints when faced with problems (Danies, 2013)

Family support is an important factor for individuals when faced with health problems, in which families play a role in the health care function of their family members in order to achieve optimal health. Advice and affection from family members can provide a positive perception for individuals to achieve everything in reaching their dreams, so they are confident and optimistic about the future expectation. It is also expected that sick family members can make the family a collection of hope, where to tell, where to ask, and where to issue complaints when they are having problems (Danies, 2013). Support from the family can be an alternative to reduce depression levels, so the quality of life in patients with medical diagnoses End Stage Renal Disease who undergo hemodialysis therapy can be further improved. **The purpose** of this study was to

determine the relationship of family support and economic status with depression levels in ESRD patients who underwent hemodialysis therapy less than 1 year in the Gatoel hospital Mojokerto District Indonesia.

RESEARCH METHODOLOGY

This research uses descriptive correlation with cross sectional research method. The population in this study were patients with a medical diagnosis of End Stage Renal Disease (ESRD) who underwent hemodialysis therapy in the Gatoel Hospital Mojokerto Indonesia. The sample of this research was 47 respondents taken using simple random sampling technique. This research was conducted at Gatoel Hospital of Mojokerto in April 2017. Data analysis in this study using Spearman rho statistical test. The instruments used in this study were the questionnaire sheet of Family Support, Economic Status, and Depression Rate.

Result and Discussion

A. Economic status with level of depression in patients End Stage Renal Disease (ESRD) at Gatoel Hospital Mojokerto

Table 1. Cross-tabulation of economic status with levels of depression in End Stage Renal Disease (ESRD) patients in Gatoel Hospital Mojokerto

No	Economic State	Depression level											
		Heavy		Moderate		Light		Normal		Total			
		f	%	f	%	f	%	f	%	f	%		
1	≤ Minim wage	2	10	5	25	2	10	5	25	0	0	0	0
	> Minim wage	1	5	1	5	1	5	4	20	6	30	2	10
2	≤ Minim wage	3	15	5	25	8	40	3	15	2	10	7	35
	> Minim wage	1	5	5	25	1	5	2	10	8	40	1	5
Total		5	25	10	50	11	55	8	40	16	80	7	35

Significant value of spearman's rho test = 0,462

The above results show that from 20 respondents who have economic capability less or equal to minimum wage (Rp 1.388.000), most of them are experiencing light depression that is 11 respondents (55%) while 27 respondents have economic ability above minimum wage (Rp 1,388,000) was obtained almost half of the light depression that is 13 respondents (48,1%). After knowing the result of cross-tabulation, then done the calculation by using Spearman's rho with a level of significance value α : 0,05. Spearman's rho test results obtained significance value 0.462 <0.05 which means there is no significant relationship between economic status with depression level in patients End Stage Renal Disease (ESRD) in Gatoel Hospital Mojokerto.

These values are the ability of respondents in meeting the needs of everyday life, especially the needs of clothing, food, and boards. Economic status is the position of a person or family in the community based on income per month. Economic status can be seen from the income adjusted to the price of staple goods (Anita 2013). Factors affecting the economic level of individuals, including education, employment, economic circumstances, cultural background, and income. Work is a means to earn money in order to meet the needs of life, including the desired health services (Muhith, 2014). In those who experience End Stage Renal Disease (ESRD) costs approximately Rp. 8.000.000 per month to undergo hemodialysis therapy perceived their income is still very less. Still very far to cover medical expenses. But with the health insurance, they are very helpful, because 100% of the cost of hemodialysis therapy is borne by the insurance. So they no longer need to worry about the cost of therapy is not a little every week, the patient just needs to think about other costs such as accommodation costs.

The results of the study did not show the relation of an economic level with the depressed patient level of End Stage Renal Disease (ESRD). It can be explained that income is not even able to make a person happy or not depressed if they experience pain, especially late-stage illness. For all respondents, money seems meaningless and will surely run out no matter how much money if the illness does not heal. Moreover, hemodialysis therapy is not for treatment or healing, but rather to maintain the life of the patient. They sometimes feel the therapy experienced is just useless. One factor that keeps them on hemodialysis therapy is because the cost of hemodialysis therapy is covered by health insurance, so they are quite helped by the health insurance program.

B. Family support with level of depression in End Stage Renal Disease (ESRD) patients in the Gatoel Hospital Mojokerto

Table 5. Cross-tabulation of family support with level of depression in End Stage Renal Disease (ESRD) patients in the Gatoel Hospital Mojokerto

No	Family support	Depression levels								Total	
		Heavy		Moderate		Light		Normal		f	%
		f	%	f	%	f	%	f	%		
1	Less	2	40	2	40	1	20	0	0	5	100
2	Moderate	2	67	1	33	0	0	0	0	3	100
3	Good	1	33	0	0	1	33	0	0	2	100
	Total	5		3		2		0		8	

Significant value of spearman's rho test = 0,000

The table above shows that 12 respondents who claimed to get enough support from the family, most of them had moderate depression, which was 8

respondents (66.7%). Whereas from 30 respondents who claimed to get good support from the family found most experienced a mild depression that is as much as 21 respondents (70%). After knowing the result of a cross-tabulation table then done the calculation by using Spearman's rho with a level of significance value α : 0,05. Spearman's rho test results obtained significance value $0.000 < 0.05$ which means there is a significant relationship between family support with depression level in patients End Stage Renal Disease (ESRD) in RS. Gatoel Mojokerto. The relationship is in a strong category (0.728) and positive which means the better the family supports the more normal the level of depression the patient end Stage Renal Disease (ESRD).

Family support is a form of attention, encouragement that individuals get from others through interpersonal relationships that include attention, emotional and judgment (Anggita, 2016). In ESRD patients undergoing hemodialysis therapy, requires support from the family. Good emotional support, instrumental support, and information support. A person who gets support from the family will undergo hemodialysis with passion (Anggraeni et al, 2016). For long treatment requires patience and encouragement from his family. Many patients are saturated with the disease because of treatment. The family is seen as an important area of the client and therefore the family is the greatest support to the client. Families who care about health, will pay attention to their families very well (Muhith, 2015). Support provided by the family can be identified through a questionnaire of research results. Based on the emotional support and appreciation that most of the respondents said his family always loved and paid attention to the state of the patient during illness.

CONCLUSION

Based on the results of the study titled Relation of family support and economic status with depression levels in patients with End Stage Renal Disease (ESRD) who underwent hemodialysis therapy less than 1 year in the hospital. Gatoel Mojokerto on 47 respondents can be concluded research results as follows:

1. Most respondents have economic capability above Provincial Minimum Wage (UMP).
2. Most respondents claimed to have family support in either category.
3. Most of the respondents had mild depression.
4. Spearman's rho test results indicate no significant relationship between economic status and depression level in End Stage Renal Disease (ESRD) patient in the hospital. Gatoel Mojokerto
5. Spearman's rho test results showed no significant association between family support and depression levels in patients with End Stage Renal Disease (ESRD) in hospitals. Gatoel Mojokerto. The relationship is in the strong and positive category which means the better the family support the more normal the depression level of patients End Stage Renal Disease (ESRD)

REFERENCE

- Ainivi F. Tangian, dkk. (2015). *Hubungan Lamanya Menjalani Hemodialisis Dengan Tingkat Kecemasan Pada Pasangan Hidup Pasien Yang Menderita Penyakit Ginjal Kronik Di RSUP Prof. Dr. R.D. Kandou*

- Manado. *Jurnal e-Clinic Vol. 3 No. 1*
- Anggita Yuliani, P., dkk. (2016) . *Hubungan Dukungan Keluarga Terhadap Tingkat Depresi pada Pasien Gagal Ginjal Kronik Di Ruang Hemodialisis Di RSUD Tugurejo Semarang.*
- Anggraini Rostanti, dkk. (2016). *Faktor-faktor Yang Berhubungan Dengan Kepatuhan Menjalani Terapi Hemodialisis Pada Penyakit Ginjal Kronik Di Ruangan Dahlia Dan Melati RSUD Prof. Dr. R.D. Kandou Manado. Jurnal Keperawatan Vol. 4 No. 2*
- Askandar Tjockroprawiro. (2015). *Bahan Ajar Ilmu Penyakit Dalam : Fakultas Kedokteran Universitas Airlangga Rumah Sakit Pendidikan Dr. Soetomo Surabaya. Surabaya : Airlangga University Press (AUP)*
- Baradero Mary, (2009). *Seri Asuhan Keperawatan Kliem Gangguan Ginjal . Jakarta : EGC*
- Befly F. Tokala, dkk. (2015) . *Hubungan antara Lamanya Menjalani Hemodialisis dengan Tingkat Kecemasan pada Pasien dengan Penyakit Ginjal Kronik Di RSUP Prof. Dr. R. D. Kandou Manado. Jurnal e-Clinic Vol. 3 No. 1*
- ² Brunner & Suddarth, (2002). *Buku Ajar Keperawatan Medikal-Bedah. Edisi 8. Jakarta: EGC*
- Jhoni Y.K. Jangkup, dkk. (2015). *Tingkat Kecemasan Pada Pasien Penyakit Ginjal Kronik (PGK) Yang Menjalani Hemodialisis di BLU RSUP Prof. Dr. D. Kandou Manado. Jurnal e-clinic Vol. 3 No. 1*
- Joyce & Jane. (2014). *Keperawatan Medikal Bedah Manajemen Klinis untuk Hasil yang Diharapkan. Edisi 8- Buku 1. Jakarta : Elsevier*
- Kojima Masayo. (2012). *Epidemiologic Studies Of Psychosocial Factors Associated With Quality Of Life Among Patients With Chronic Diseases In Japan. J Epidemiol Vol 22 No 1*
- M. Clevo Rendy & Margareth TH. (2012). *Asuhan Keperawatan Medikal Bedah dan Penyakit Dalam. Yogyakarta : Numed*
- ⁴ Muhith, A., (2015). *Pendidikan Keperawatan Jiwa Teori dan Aplikasi. Cv. Andi : Yogyakarta*
- Muhith, A., dkk (2014). *Kondisi Ekonomi Dan Budaya Keluarga Dengan Status Gizi Balita. Jurnal Ners Vol.9 No.1.*

Muhith, A., Hasanah Sulusul (2015).
7 *Perilaku caring perawat dengan kecemasan pada anak pra sekolah di rumah sakit anak dan bersalin (RSAB) Muhammadiyah Kota Probolinggo. Medica Majapahit Vol. 7 No.2*

Muhith, A., Mahar Ranum Ayuningtyas (2012). *Penatalaksanaan Tugas Keluarga Dalam Pemenuhan Nutrisi Dengan Status Gizi Penderita TB Paru Di Wilayah*

Kerja Puskesmas Gayaman Mojoanyar Mojokerto. Medica Majapahit Vol. 4 No.2

4 Muhith, A., Nasir (2011). *Buku Ajar Metodologi Penelitian Kesehatan. Yogyakarta: Nuha Medika*

Wartilisna Ia. Musa, dkk (2015). *Hubungan Tindakan Hemodialisa dengan Tingkat Kecemasan Klien Gagal Ginjal di Ruang Dahlia RSUP ProfDr.R. Kandou Manado.*

FAMILY SUPPORT AND FAMILY ECONOMIC STATUS WITH

ORIGINALITY REPORT

11%

SIMILARITY INDEX

10%

INTERNET SOURCES

5%

PUBLICATIONS

7%

STUDENT PAPERS

PRIMARY SOURCES

1	media.neliti.com Internet Source	3%
2	Submitted to iGroup Student Paper	2%
3	Khanifah Khanifah, Jaka Isgiyarta, Indah Lestari, Udin Udin. "The Effect of Gender, Locus of Control, Love of Money, and Economic Status on Students' Ethical Perception", International Journal of Higher Education, 2019 Publication	1%
4	ejournalwiraraja.com Internet Source	1%
5	www.neliti.com Internet Source	1%
6	www.scribd.com Internet Source	1%
7	ejurnalp2m.stikesmajapahitmojokerto.ac.id Internet Source	1%

elevate.fkep.unand.ac.id

8	Internet Source	1%
9	garuda.ristekdikti.go.id Internet Source	1%
10	Liya Novitasari, Abdul Wakhid. "HUBUNGAN DUKUNGAN KELUARGA DENGAN EFIKASI DIRI PASIEN GAGAL GINJAL KRONIK YANG MENJALANI HEMODIALISA DI RSUD KABUPATEN SEMARANG", Jurnal Keperawatan dan Kesehatan Masyarakat Cendekia Utama, 2018 Publication	<1%
11	jom.unri.ac.id Internet Source	<1%
12	elibrary.almaata.ac.id Internet Source	<1%
13	ejournal.stikestelogorejo.ac.id Internet Source	<1%

Exclude quotes On

Exclude matches < 10 words

Exclude bibliography Off

FAMILY SUPPORT AND FAMILY ECONOMIC STATUS WITH

by Mujib Hannan

Submission date: 12-Nov-2019 02:23PM (UTC+0700)

Submission ID: 1212119249

File name: 217-Original_Article-1305-3-10-20190829.pdf (287.32K)

Word count: 3161

Character count: 16745



FAMILY SUPPORT AND FAMILY ECONOMIC STATUS WITH DEPRESSION LEVEL ON PATIENTS END STAGE RENAL DISEASE (ESRD) IN GATOEL HOSPITAL MOJOKERTO DISTRICT INDONESIA

Muhith Abdul¹, Lutfi K.², Tatik Sutarti³, Hannan Mujib⁴, Lantin Sulistyorini⁵, Saiful Siyoto⁶

^{1,2} Associate Professor in Nursing Department of STIKes Majapahit Mojokerto

³ Lecturer in STIKIP PGRI Pacitan

⁴ Lecturer in Faculty of Nursing Community Universitas wiraraja Sumenep, Indonesia

⁵ Lecturer in Faculty of Nursing Universitas Jember

⁶ Departemen Public Health of STIKes Surya Mitra Kediri, Indonesia

Email: abdimuhith1979@gmail.com, mujib@wiraraja.ac.id, lantin_s.psik@unej.ac.id

ABSTRACT

Keywords

Patients with hemodialysis therapy have uncertainty as to how long hemodialysis is required and should accept the fact that therapy is needed throughout life. Because it appears anxiety response, rejection and anger. ESRD patients undergoing hemodialysis therapy, require support from the family. The purpose of this study was to determine the relationship of family support and economic status with depressed ESRD patients who underwent hemodialysis therapy <1 year. The design of this research is descriptive correlation with cross sectional research method, by using simple random sampling technique with the number of samples of 47 ESRD patients who are undergoing hemodialysis at Gatoel Hospital Mojokerto. The Research done in April 2017. The results obtained most of the respondents have economic ability Above the Provincial Minimum Wage of 27 respondents (57.4%). Most of the respondents stated that they received good family support in 30 categories (63,8%) and most of respondents had light depression 24 respondents (51,1%). Based on statistical test of spearman's rho with significance level α 0,05 obtained result $(r) = 0,462$ meaning bigger than value signifikansi $(0,462 > 0,05)$ hence H1 rejected which mean there is no significant relation between economic status with depression level In ESRD patients and Spearman's rho statistical test results obtained significance value $0,000 < 0,05$ which means there is a significant relationship between family support with depression levels in ESRD patients. The economic level does not affect depression because the cost of hemodialysis therapy all respondents is covered by health insurance, whereas family support has a positive influence where the better the family support the lighter the depression level in ESRD patients undergoing hemodialysis therapy

Family support, economic status, depression level, hemodialysis

INTRODUCTION

End-stage renal failure is the rate of kidney failure that can cause death unless renal replacement therapy (Smeltzer & Bare 2004 in Marlina & Andika 2012). Until now, Hemodialysis is still the main alternative to renal function replacement therapy for CKG patients because of the more accessible costs and the risk of bleeding lower when compared with peritoneal dialysis (Wartilisna et al 2015). Hemodialysis action in chronic renal failure patients takes 12-15 hours for dialysis each week, or at least 3 -4 hours of therapy interval. This activity will take place continuously throughout his life (Jhony Y.K et al, 2015). The state of dependence on hemodialysis machines results in changes in the life of ESRD sufferers undergoing hemodialysis therapy (Anggita et al, 2016). Not only have an impact on the economy, most patients with ESRD undergoing hemodialysis never return to their usual activity or occupation, resulting in a loss of employment, decreased income, loss of freedom, hope, self-esteem, and identity. The presence of a sense of loss, inadequate feelings, fear, and anxiety can lead to a mental disorder of depression (Wartilisna et al, 2015).

In ESRD patients undergoing hemodialysis therapy, requires support from the family. Good emotional support, instrumental support, and information support. A person who gets support from the family will undergo hemodialysis with a passion (Anggraeni et al, 2016). Although the disease Kidney failure is not included in the ten deadly diseases in the world, the disease remains a concern of world health agencies. According to the World Health Organization (WHO), globally more than 500 million people suffer from chronic renal failure (Ratnawati 20014 in Anggraeni, et al 2016). In Indonesia itself, according to Kidney Care Foundation there are 40.000 patients with chronic renal failure. But of that number, only about 3000 patients who

usually enjoy the service of dialysis or hemodialysis (Anggraeni et al, 2016). Based on a preliminary study on December 7 2016, recorded the number of patients who perform hemodialysis as many as 170 people. Based on interviews conducted on 10 patients who were diagnosed with medical End Stage Renal Disease (ESRD) and underwent hemodialysis less than 1 year found 3 of (10) 30% of patients have middle economic status with family support less likely to have severe depression level. And 7 out of 10 (10) 70% of patients with low economic status with good family support tend to have moderate levels of depression.

The state of dependence on hemodialysis machines results in changes in the life of ESRD sufferers undergoing hemodialysis therapy (Smeltzer & Bare, 2013 in Anggita et al, 2016). Not only have an impact on the economy, most patients with ESRD undergoing hemodialysis never return to their usual activity or occupation, resulting in a loss of employment, decreased income, loss of freedom, hope, self-esteem, and identity. There is a sense of loss, an inadequate feeling, fear, and anxiety that can lead to a mental disorder of depression (Muhith A., 2015). It is strongly associated with high mortality, high morbidity, and hospitalization (Kojima, 2012). ESRD patients undergoing hemodialysis usually start experiencing light to severe anxiety in the 2nd to 6th months, because at the beginning of the month the patient is still facing a stage of adjustment to hemodialysis action that must be done for the rest of his life (Ainivi, 2015). Patients confronted with hemodialysis therapy have uncertainty as to how long hemodialysis is required and should accept the fact that hemodialysis therapy is required throughout life (Safitri V.W, 2013 in Ainivi et al, 2015). Because it appears anxiety response, rejection, and anger. It is a common response caused by stress that would have more impact on the state of depression (Marwati, 2005 in Ainivi et al, 2015).

At first, the patient will fall into anxiety state, anxiety that is not immediately overcome can bring the individual into the deeper psychological problems of depression, it will more impact on the final phase of the individual is the desire to end his life (suicide). In ESRD patients undergoing hemodialysis therapy, requires support from the family. Good emotional support, instrumental support, and information support. A person who gets support from the family will undergo hemodialysis with a passion (Anggraeni et al, 2016). Family support is an important factor for individuals when faced with health problems, in which families play a role in the health care function of their family members in order to achieve optimal health. Advice and affection from family members can provide a positive perception for individuals to achieve everything in reaching their dreams, so they are confident and optimistic about the future expectation. In addition, it is expected that sick family members can make the family as a collection of hope, where to tell, where to ask questions, and where to issue complaints when faced with problems (Danies, 2013)

Family support is an important factor for individuals when faced with health problems, in which families play a role in the health care function of their family members in order to achieve optimal health. Advice and affection from family members can provide a positive perception for individuals to achieve everything in reaching their dreams, so they are confident and optimistic about the future expectation. It is also expected that sick family members can make the family a collection of hope, where to tell, where to ask, and where to issue complaints when they are having problems (Danies, 2013). Support from the family can be an alternative to reduce depression levels, so the quality of life in patients with medical diagnoses End Stage Renal Disease who undergo hemodialysis therapy can be further improved. **The purpose** of this study was to

determine the relationship of family support and economic status with depression levels in ESRD patients who underwent hemodialysis therapy less than 1 year in the Gatoel hospital Mojokerto District Indonesia.

RESEARCH METHODOLOGY

This research uses descriptive correlation with cross sectional research method. The population in this study were patients with a medical diagnosis of End Stage Renal Disease (ESRD) who underwent hemodialysis therapy in the Gatoel Hospital Mojokerto Indonesia. The sample of this research was 47 respondents taken using simple random sampling technique. This research was conducted at Gatoel Hospital of Mojokerto in April 2017. Data analysis in this study using Spearman rho statistical test. The instruments used in this study were the questionnaire sheet of Family Support, Economic Status, and Depression Rate.

Result and Discussion

A. Economic status with level of depression in patients End Stage Renal Disease (ESRD) at Gatoel Hospital Mojokerto

Table 1. Cross-tabulation of economic status with levels of depression in End Stage Renal Disease (ESRD) patients in Gatoel Hospital Mojokerto

No	Economic State	Depression level											
		Heavy		Moderate		Light		Normal		Total			
		f	%	f	%	f	%	f	%	f	%		
1	≤ Minim wage	2	10	5	25	2	10	5	25	0	0	0	0
	> Minim wage	1	5	1	5	1	5	4	20	6	30	2	10
2	≤ Minim wage	3	15	5	25	8	40	3	15	2	10	7	35
	> Minim wage	1	5	5	25	1	5	2	10	8	40	1	5
Total		5	25	10	50	11	55	8	40	16	80	7	35

Significant value of spearman's rho test = 0,462

The above results show that from 20 respondents who have economic capability less or equal to minimum wage (Rp 1.388.000), most of them are experiencing light depression that is 11 respondents (55%) while 27 respondents have economic ability above minimum wage (Rp 1,388,000) was obtained almost half of the light depression that is 13 respondents (48,1%). After knowing the result of cross-tabulation, then done the calculation by using Spearman's rho with a level of significance value α : 0,05. Spearman's rho test results obtained significance value 0.462 <0.05 which means there is no significant relationship between economic status with depression level in patients End Stage Renal Disease (ESRD) in Gatoel Hospital Mojokerto.

These values are the ability of respondents in meeting the needs of everyday life, especially the needs of clothing, food, and boards. Economic status is the position of a person or family in the community based on income per month. Economic status can be seen from the income adjusted to the price of staple goods (Anita 2013). Factors affecting the economic level of individuals, including education, employment, economic circumstances, cultural background, and income. Work is a means to earn money in order to meet the needs of life, including the desired health services (Muhith, 2014). In those who experience End Stage Renal Disease (ESRD) costs approximately Rp. 8.000.000 per month to undergo hemodialysis therapy perceived their income is still very less. Still very far to cover medical expenses. But with the health insurance, they are very helpful, because 100% of the cost of hemodialysis therapy is borne by the insurance. So they no longer need to worry about the cost of therapy is not a little every week, the patient just needs to think about other costs such as accommodation costs.

The results of the study did not show the relation of an economic level with the depressed patient level of End Stage Renal Disease (ESRD). It can be explained that income is not even able to make a person happy or not depressed if they experience pain, especially late-stage illness. For all respondents, money seems meaningless and will surely run out no matter how much money if the illness does not heal. Moreover, hemodialysis therapy is not for treatment or healing, but rather to maintain the life of the patient. They sometimes feel the therapy experienced is just useless. One factor that keeps them on hemodialysis therapy is because the cost of hemodialysis therapy is covered by health insurance, so they are quite helped by the health insurance program.

B. Family support with level of depression in End Stage Renal Disease (ESRD) patients in the Gatoel Hospital Mojokerto

Table 5. Cross-tabulation of family support with level of depression in End Stage Renal Disease (ESRD) patients in the Gatoel Hospital Mojokerto

No	Family support	Depression levels								Total	
		Heavy		Moderate		Light		Normal		f	%
		f	%	f	%	f	%	f	%		
1	Less	2	40	2	40	1	20	0	0	5	100
2	Moderate	2	67	6	86	2	67	0	0	10	100
3	Good	1	33	0	0	2	67	8	26	11	100
	Total	5	60	8	93	5	67	8	100	26	100

Significant value of spearman's rho test = 0,000

The table above shows that 12 respondents who claimed to get enough support from the family, most of them had moderate depression, which was 8

respondents (66.7%). Whereas from 30 respondents who claimed to get good support from the family found most experienced a mild depression that is as much as 21 respondents (70%). After knowing the result of a cross-tabulation table then done the calculation by using Spearman's rho with a level of significance value α : 0,05. Spearman's rho test results obtained significance value $0.000 < 0.05$ which means there is a significant relationship between family support with depression level in patients End Stage Renal Disease (ESRD) in RS. Gatoel Mojokerto. The relationship is in a strong category (0.728) and positive which means the better the family supports the more normal the level of depression the patient end Stage Renal Disease (ESRD).

Family support is a form of attention, encouragement that individuals get from others through interpersonal relationships that include attention, emotional and judgment (Anggita, 2016). In ESRD patients undergoing hemodialysis therapy, requires support from the family. Good emotional support, instrumental support, and information support. A person who gets support from the family will undergo hemodialysis with passion (Anggraeni et al, 2016). For long treatment requires patience and encouragement from his family. Many patients are saturated with the disease because of treatment. The family is seen as an important area of the client and therefore the family is the greatest support to the client. Families who care about health, will pay attention to their families very well (Muhith, 2015). Support provided by the family can be identified through a questionnaire of research results. Based on the emotional support and appreciation that most of the respondents said his family always loved and paid attention to the state of the patient during illness.

CONCLUSION

Based on the results of the study titled Relation of family support and economic status with depression levels in patients with End Stage Renal Disease (ESRD) who underwent hemodialysis therapy less than 1 year in the hospital. Gatoel Mojokerto on 47 respondents can be concluded research results as follows:

1. Most respondents have economic capability above Provincial Minimum Wage (UMP).
2. Most respondents claimed to have family support in either category.
3. Most of the respondents had mild depression.
4. Spearman's rho test results indicate no significant relationship between economic status and depression level in End Stage Renal Disease (ESRD) patient in the hospital. Gatoel Mojokerto
5. Spearman's rho test results showed no significant association between family support and depression levels in patients with End Stage Renal Disease (ESRD) in hospitals. Gatoel Mojokerto. The relationship is in the strong and positive category which means the better the family support the more normal the depression level of patients End Stage Renal Disease (ESRD)

REFERENCE

- Ainivi F. Tangian, dkk. (2015). *Hubungan Lamanya Menjalani Hemodialisis Dengan Tingkat Kecemasan Pada Pasangan Hidup Pasien Yang Menderita Penyakit Ginjal Kronik Di RSUP Prof. Dr. R.D. Kandou*

- Manado. *Jurnal e-Clinic Vol. 3 No. 1*
- Anggita Yuliani, P., dkk. (2016) . *Hubungan Dukungan Keluarga Terhadap Tingkat Depresi pada Pasien Gagal Ginjal Kronik Di Ruang Hemodialisis Di RSUD Tugurejo Semarang.*
- Anggraini Rostanti, dkk. (2016). *Faktor-faktor Yang Berhubungan Dengan Kepatuhan Menjalani Terapi Hemodialisis Pada Penyakit Ginjal Kronik Di Ruangan Dahlia Dan Melati RSUD Prof. Dr. R.D. Kandou Manado. Jurnal Keperawatan Vol. 4 No. 2*
- Askandar Tjockroprawiro. (2015). *Bahan Ajar Ilmu Penyakit Dalam : Fakultas Kedokteran Universitas Airlangga Rumah Sakit Pendidikan Dr. Soetomo Surabaya. Surabaya : Airlangga University Press (AUP)*
- Baradero Mary, (2009). *Seri Asuhan Keperawatan Kliem Gangguan Ginjal . Jakarta : EGC*
- Befly F. Tokala, dkk. (2015) . *Hubungan antara Lamanya Menjalani Hemodialisis dengan Tingkat Kecemasan pada Pasien dengan Penyakit Ginjal Kronik Di RSUP Prof. Dr. R. D. Kandou Manado. Jurnal e-Clinic Vol. 3 No. 1*
- ² Brunner & Suddarth, (2002). *Buku Ajar Keperawatan Medikal-Bedah. Edisi 8. Jakarta: EGC*
- Jhoni Y.K. Jangkup, dkk. (2015). *Tingkat Kecemasan Pada Pasien Penyakit Ginjal Kronik (PGK) Yang Menjalani Hemodialisis di BLU RSUP Prof. Dr. D. Kandou Manado. Jurnal e-clinic Vol. 3 No. 1*
- Joyce & Jane. (2014). *Keperawatan Medikal Bedah Manajemen Klinis untuk Hasil yang Diharapkan. Edisi 8- Buku 1. Jakarta : Elsevier*
- Kojima Masayo. (2012). *Epidemiologic Studies Of Psychosocial Factors Associated With Quality Of Life Among Patients With Chronic Diseases In Japan. J Epidemiol Vol 22 No 1*
- M. Clevo Rendy & Margareth TH. (2012). *Asuhan Keperawatan Medikal Bedah dan Penyakit Dalam. Yogyakarta : Numed*
- ⁴ Muhith, A., (2015). *Pendidikan Keperawatan Jiwa Teori dan Aplikasi. Cv. Andi : Yogyakarta*
- Muhith, A., dkk (2014). *Kondisi Ekonomi Dan Budaya Keluarga Dengan Status Gizi Balita. Jurnal Ners Vol.9 No.1.*

Muhith, A., Hasanah Sulusul (2015).
7 *Perilaku caring perawat dengan kecemasan pada anak pra sekolah di rumah sakit anak dan bersalin (RSAB) Muhammadiyah Kota Probolinggo. Medica Majapahit Vol. 7 No.2*

Muhith, A., Mahar Ranum Ayuningtyas (2012). *Penatalaksanaan Tugas Keluarga Dalam Pemenuhan Nutrisi Dengan Status Gizi Penderita TB Paru Di Wilayah*

Kerja Puskesmas Gayaman Mojoanyar Mojokerto. Medica Majapahit Vol. 4 No.2

4 Muhith, A., Nasir (2011). *Buku Ajar Metodologi Penelitian Kesehatan. Yogyakarta: Nuha Medika*

Wartilisna Ia. Musa, dkk (2015). *Hubungan Tindakan Hemodialisa dengan Tingkat Kecemasan Klien Gagal Ginjal di Ruang Dahlia RSUP ProfDr.R. Kandou Manado.*

FAMILY SUPPORT AND FAMILY ECONOMIC STATUS WITH

ORIGINALITY REPORT

11%

SIMILARITY INDEX

10%

INTERNET SOURCES

5%

PUBLICATIONS

7%

STUDENT PAPERS

PRIMARY SOURCES

1	media.neliti.com Internet Source	3%
2	Submitted to iGroup Student Paper	2%
3	Khanifah Khanifah, Jaka Isgiyarta, Indah Lestari, Udin Udin. "The Effect of Gender, Locus of Control, Love of Money, and Economic Status on Students' Ethical Perception", International Journal of Higher Education, 2019 Publication	1%
4	ejournalwiraraja.com Internet Source	1%
5	www.neliti.com Internet Source	1%
6	www.scribd.com Internet Source	1%
7	ejurnalp2m.stikesmajapahitmojokerto.ac.id Internet Source	1%

elevate.fkep.unand.ac.id

8	Internet Source	1%
9	garuda.ristekdikti.go.id Internet Source	1%
10	Liya Novitasari, Abdul Wakhid. "HUBUNGAN DUKUNGAN KELUARGA DENGAN EFIKASI DIRI PASIEN GAGAL GINJAL KRONIK YANG MENJALANI HEMODIALISA DI RSUD KABUPATEN SEMARANG", Jurnal Keperawatan dan Kesehatan Masyarakat Cendekia Utama, 2018 Publication	<1%
11	jom.unri.ac.id Internet Source	<1%
12	elibrary.almaata.ac.id Internet Source	<1%
13	ejournal.stikestelogorejo.ac.id Internet Source	<1%

Exclude quotes On

Exclude matches < 10 words

Exclude bibliography Off