

APPENDIX A

Consent Form

My name is Zhang Jing Ping. I am a second year master degree student major in medical nursing in Xian Medical University. I am conducting a nursing research to explore family support and quality of life in hemodialysis patients in order to ascertain if there is any relationship between family support and quality of life of hemodialysis patients. The result obtained will contribute to finding effective nursing interventions for improving hemodialysis patients' quality of life.

The study will not do any hurt on you and your family. The procedures for this study are as followings: at first, I would like to ask you some questions about your demographic characteristics. Then, I would like you to cooperate with me and answer two interview forms which are to describe your family support and your quality of life. It will take you about 20-40 minutes to be interviewed and complete the interview forms. Please give your answers according to your real situations. Please ask me if you have difficulty understanding any of the items. It will

depend on your own will whether to participate it or not. Your refusal will not have any effect on the treatment or nursing care for you. Even during the process, you have the right to withdraw or neglect any items you would not like to answer. I will be greatly appreciated your concern and participation in this study. If you agree with me, please sign this form.

Signature	
Date	·

APPENDIX B

Instrument

Subject No

date _

	Part 1 Demog	raphic I	Data Form		
The following	items are to	obtain	some info	ormation	about
yourself and	your family.	Please	give the	answers	most
close to your s	situations.		•		
1. Age	years old				
2. Sex:	() Male	() Fe	emale		
3. Mari	tal Status				
()	Married	(() Single	e	
()	Divorced	•	() Separ	ated	
()	Widowed	ı	() Other	s	
4. Educ	cationye	ars			
5. Occupation	1				
()	Teacher	()	Governme	nt servic	e
()	Worker	()	House ke	eping	
()	Business per	son ()	Farmer		-
()	Health perso	nnel()	Other(pl	ease writ	down)

6. Income Yuan/person/month

7. Way of Medical Payment
() Total reimbursed or insurance
() Partial reimbursed
() Total self paid
() Others
8. Do you have any other additional chronic illness
() Yes () No
If Yes, please specify the diagnosis and main signs
and symptoms
9. How long have you been on hemodialysis?
(months)
10. How often have you been on hemodialysis?
times/per week
11. Present treatment
() Hemodialysis only
() Hemodialysis and western medicine
() Hemodialysis and traditional medicine
12. How many family members are there in family,
such as grandparents, parents, siblings, spouse, children,
and close relatives? please list your family members, such
as father, mother, etc

13	. I	f you	have s	some pi	coblems,	who :	is tl	he help	īul
in	you	r fami	ly?						
	() gran	.dmothe:	r ()	grandf	ather	()	both of	them
	() moth	er		father		()	both of	them
	() Chil	d or cl	nildre	ì				•
	() spou	.se					·	•
	() sibl	ings						
	() clos	e rela	ives					
	() othe	r (plea	ase exp	olain)				
		in you (((((in your fami () gran () moth () Chil () spou () sibl () clos	<pre>in your family? () grandmother () mother () Child or ch () spouse () siblings () close relate</pre>	<pre>in your family? () grandmother () () mother () () Child or childrer () spouse () siblings () close relatives</pre>	<pre>in your family? () grandmother () grandf () mother () father () Child or children () spouse () siblings () close relatives</pre>	<pre>in your family? () grandmother () grandfather () mother () father () Child or children () spouse () siblings () close relatives</pre>	<pre>in your family? () grandmother () grandfather () () mother () father () () Child or children () spouse () siblings () close relatives</pre>	<pre>() grandmother () grandfather () both of () mother () father () both of () Child or children () spouse () siblings () close relatives</pre>

Part II Modified Quality of Life Questionnaire

Component I. Life satisfaction.

Component II. Self-concept.

Component III. Health and functioning.

Component IV. Socio-economic factors.

Please choose the number that best describe your feelings.

- 5 = very much
- 4 = much
- 3 = moderate
- 2 = little
- 1 = very little

For example: I am satisfied with life at present. If you Are satisfied with life at present very much, you may chose number 5.

I. Life satisfaction

Explanation: The following statement concern your feelings about your well-being in general since you have been treated with hemodialysis.

- 1. I am satisfied with life at present.....5 4 3 2 1
- 2. I feel suffering at this time period.....5 4 3 2 1
- 3. I am facing obstacles in my life...... 4 3 2 1
- 4. I have received everything I wish...... 4 3 2 1
- 5. I feel safe and secure for my life...... 4 3 2 1
- 6. I get love and care from my family......5 4 3 2 1

Part III Modified Perceived Social Support from Family (MPSS-Fa) Scale

Dir	ections : The statements which follow refer to feel	ing
	and experiences which occur to most people	at
	one time or another in their relationsh	ips
	. with their families. For each stateme	nt,
	there are two possible answers: Yes and	No.
	Please circle the answer you choose for e	ach
	item.	
1.	My family gives me the moral support I needYes	No
2.	I get good ideas about how to do their things	
	or make things from my familyYes	No
3.	Most other people are closer to their	
	family than I amYes	No
4.	When I confide in the members of my family who	
	are closest to me, I get the idea that it makes	
	them uncomfortableYes	No
5.	My family is willing to hear about	
	what I thinkYes	No
6.	Members of my family share many of	
	my interestsYes	No
7.	I rely on my family for emotional supportYes	No
8.	There is a member of my family I could go to	
	if I were just feeling down, without feeling	
	funny about it laterYes	No
9.	My family and I are very open about	
	what we think about thingsYes	No

APPENDIX C

Table 8 Mean and standard deviation of quality of life's scores in hemodialysis patients as presented by each item (n=60)

Item	mean	S.D.
Life satisfaction	3.62	0.71
1. Being satisfied with present life	3.07	1.19
2. Having much suffering now	2.93	1.46
3. Facing obstacles in life	2.75	1.58
4. Having received everything I wish	2.50	1.19
5. Feeling safe and secure for my life	e 3.07	1.45
6. Receiving family's love and care	4.50	0.68
7. Having a warm family	4.38	0.76
8. Receiving family's care when		
I am sick	4.55	0.83
9. Joining family life together	4.35	1.18
10. Feeling happiness with the family	4.12	0.87
Self-concept	3.10	0.51
11. Being satisfied with appearance	3.03	1.12
12. Feeling embarrassed and does not v	want	
to meet people	3.58	1.51

Table 8 Mean and standard deviation of quality of life's scores in hemodialysis patients as presented by each item (n=60)

Item	mean	S.D.
13. Feeling irritated since	I have been	
treated with hemodialysi	s 2.68	1.49
14. Feeling got bad luck bec	ause of	
receiving hemodialysis t	reatment 2.63	1.46
15. Feeling I still have sel	f-esteem	
and capability	3.60	1.22
16. Feeling I am a sick pers	on 3.83	1.24
17. Having hope because of r	eceiving	
hemodialysis treatment	2.82	1.32
18. Expecting to get over fr	om this	
illness	3.57	1.53
19. Being an easily giving-u	up person 3.67	1.35
20. Being important for my f	amily 4.57	0.83
21. Being a religious person	1.72	1.30
22. Having self-controlled	3.52	1.36
23. Feeling I am getting wea	ak 3.00	1.43
24. Feeling I am the burden	of family 2.85	1.60
25. Feeling I am valuable ar	nd useful to	
society	2.37	1.57
26. Feeling valuable at work	2.20	1.45

Table 8 Mean and standard deviation of quality of life's scores in hemodialysis patients as presented by each item (n=60)

I	tem	mean	S.D.
Hea	lth and functioning	2.97	0.56
27.	Doing daily activities by myself	4.28	1.11
28.	Doing the house work as usual	2.78	1.39
29.	Being able to work and study as		
	usual	2.02	1.16
30.	Having ability to do the exercises	3 2.13	1.10
31.	Going upstairs to two-storey with	out	
	rest	3.30	1.33
32.	Joining and meeting with friends a	as	
	usual	3.20	1.19
33.	Having sexual activities as usual	1.47	0.75
34.	Going out on my own	3.22	1.53
35.	Riding bicycle or getting on a bus	s as	
	usual	2.78	1.40
36.	Being satisfied with present		
	capability	2.55	1.33
37.	Sleeping well	3.05	1.14
38.	Being worried about my health	2.28	1.30
39.	Feeling worried with the	•	
	complication	2.75	1.54

Table 8 Mean and standard deviation of quality of life's scores in hemodialysis patients as presented by each item (n=60)

Item .	n	nean	S.D.
40. Complying with medical	treatment	3.80	1.07
41. Taking medication as on	rder	4.37	0.76
42. Feeling I am getting be	etter after		
receiving hemodialysis		3.58	0.76
Socio-economic factors		3.08	0.69
43. Having enough income for	or the living	3.10	1.53
44. Having some to help me	if I have som	ne	
financial proble		2.73	1.45
45. Having problem with med	dical bill	2.87	1.70
46. Having family indebted	ness because	÷	
of hemodialysis treatme	ent	3.72	1.67
47. Having to work harder	o get enough		
income		1.82	1.30
48. Thinking my present jol	o is not		
suitable for being ill	and treated	3.30	1.75
49. Doing not work if having	ng enough		
income		3.18	1.67
50. Worrying about losing	job	4.22	1.46
51. Taking sick-leave with	out pay cut	2.18	1.69
52. Being more successful	if no illness	3.65	1.52

APPENDIX D

Table 9 Mean and Standard deviation of family support's scores in hemodialysis patients as presented by each item (N=60)

I	Ttem O	mean	s.D.
$\frac{-}{1}$	Receiving the moral support from fami	ly 0.95	0.22
2.	Getting good idea from family	0.82	0.39
3.	Having close relationship less than m	nost	
-	other people	0.82	0.39
4.	Getting the idea from my closest fami	.ly	
	Members that it makes them uncomforta		0.39
5.	My family is willing to hear about wh		•
•	I think	0.88	0.32
5.	Members of my family share many of		
	interests	0.68	0.47
7.	I rely on my family for emotional sur	oport 0.83	0.38
8.			
	go to if I were just feeling down,		
	without feeling funny about it later	0.85	0.36
9.	My family and I are very open about w	vhat	
	we think about things	0.88	0.32
10.	. My family is sensitive to my personal	l need 0.80	0.40
11.	. My family members are good at helping	g me to	
	solve problems	0.87	0.34
12.	. I having a deep sharing relationship		
	with a number of members of my family	y 0.47	0.50
13.	. When I confide in members of my fami:	ly,	
	it makes me uncomfortable	0.87	0.34
14.	. I do not have a relationship with a t	member	
	of my family that if as close as other	er	
	people's relationship with family men	mbers 0.83	0.38
15.	. I wish my family were much different	0.73	0.45

APPENDIX E

LIST OF EXPERTS FOR TESTING CONTENT VALIDITY OF INSTRUMENT

Sujitra Tiansawad RN, D.S.N., Assistant Professor,

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CURRICULUM VITAE

Surname, name

Mrs. Zhang JingPing

Date of birth

April 8, 1965

Curriculum vita

Diploma in nursing science in Hunan

Health School, Hunan, China

Graduated in 1980

Associate degree in nursing science

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Graduated in 1989

Experience

1980-1986 Nursing staff at medical ward of the

Second Teaching Hospital of Hunan

Medical University

1986-1989 Nursing student at Faculty of Nursing

of Shanghai Medical University

1989-1996 Office staff of the Second Teaching

Hospital of Hunan Medical University