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Lived Experiences of Dialysis Nurses in Caring for an Aging Population with End-Stage Renal Disease Undergoing Dialysis Treatment as a Basis for Implications for Improving the Quality of Care

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ABSTRACT

This study explored the lived experiences of dialysis nurses caring for an aging population with end-stage renal disease (ESRD) as a basis for improving the quality of care. A descriptive qualitative research design was used, involving 11 dialysis nurses from dialysis centers in General Santos City selected through purposive sampling. Data were collected through semi-structured interviews and analyzed using thematic analysis. The findings revealed eight key themes: duality of nursing work, holistic dialysis practice, elderly care complexity, workload and resource strain, personal emotional coping, team-based adaptation, professional development support, and institutional support gaps. The results showed that nurses experience their work as both physically demanding and meaningful, requiring a balance between technical skills and emotional care. Challenges such as complex patient conditions, heavy workload, and limited institutional support were found to affect the delivery of care. The study concludes that strengthening institutional support, improving staffing, and providing continuous training are important in enhancing nurse well-being and ensuring quality dialysis care for elderly patients.

***Keywords**: Dialysis nurses, aging population, end-stage renal disease, quality of care*

INTRODUCTION

End-stage renal disease (ESRD) is a life-changing condition that continues to grow as a health concern, particularly among older adults who face the combined challenges of aging and multiple chronic illnesses (Rout & Aslam, 2025; Kidney Care UK, 2025; Greer et al., 2021). In the Philippines, the rising number of patients requiring dialysis has placed heavy demands on healthcare facilities, making the role of dialysis nurses indispensable (DOH, 2025). These nurses not only ensure safe and effective treatment but also provide emotional support, embodying the balance of technical skill and compassion that defines dialysis care. Yet, while patient outcomes are often emphasized, the lived experiences of nurses remain underexplored, even though their coping strategies and working conditions directly influence care quality (Palaganas et al., 2021; Santos et al., 2024; Osuna et al., 2023).

This study sought to highlight their voices, offering insights that can guide healthcare institutions in strengthening staffing, training, and support systems to better serve both patients and the nurses who care for them.

Statement of the Problem

This study aimed to explore the lived experiences of dialysis nurses caring for an aging population with end-stage renal disease undergoing dialysis treatment as a basis for implications for improving the quality of care.

Specifically, this study sought to answer the following questions:

1. What are the lived experiences of dialysis nurses in enhancing quality of care for aging populations with end-stage renal disease on dialysis treatment?
2. What are the encountered nursing challenges in enhancing the quality of care for the aging population with end-stage renal disease on dialysis treatment?
3. What are the coping mechanisms of dialysis nurses in the challenges faced in enhancing the quality of care for aging populations with end-stage renal disease?
4. What kind of institutional support that the dialysis nurses receive in regard to their experiences?
5. Based on the findings, what are the implications suggested for improving the quality of care of dialysis nurses in caring for an aging population with end-stage renal disease undergoing dialysis treatment?

Scope and Delimitations

This study explored the lived experiences of dialysis nurses in General Santos City as they cared for elderly patients with end-stage renal disease. It highlighted their daily challenges, coping strategies, and the support they receive, while noting limits such as the small sample size and reliance on self-reported accounts. Despite these, the findings offer valuable insights into the realities of dialysis nursing and its impact on patient care and quality of life.

Review of Related Literatures

Caring for elderly patients with end-stage renal disease is demanding, as age brings frailty and multiple illnesses that make dialysis more complex (Greer et al., 2021; Vaidya & Aeddula, 2024). Nurses carry the responsibility of ensuring safety and treatment while offering emotional support, yet they often face heavy workloads and limited resources that can lead to stress (Alenezi et al., 2024; Palaganas et al., 2021; Bednarski, 2025). To cope, they lean on self-care, teamwork, and institutional support, but their lived experiences remain underexplored—making it vital to hear their voices to improve both patient care and nurse well-being (World Health Organization, 2021).

Theoretical Framework

This study was guided by Jean Watson's Theory of Human Caring, which emphasizes empathy, presence, and dignity in patient care (Watson, 1979, 2008), and Paterson and Zderad's Humanistic Nursing Theory, which views nursing as a meaningful relationship built through experience and interaction (Paterson & Zderad, 1976). These frameworks highlight how dialysis nurses go beyond technical procedures, offering emotional support and understanding to elderly patients with end-stage renal disease. Grounded in a constructivist–interpretivist perspective, the study explored how nurses interpret their challenges and experiences, showing that dialysis care is both technical and deeply relational.

METHODOLOGY

This study used a descriptive qualitative approach to explore the experiences of dialysis nurses caring for elderly patients with end-stage renal disease. It focused on understanding their perspectives based on their actual work situations. Data were gathered through interviews and analyzed to identify common patterns and themes.

Research Design

This study used a descriptive qualitative research design to describe the lived experiences of dialysis nurses caring for elderly patients with end-stage renal disease. This design was appropriate because it allowed the researcher to gather detailed information based on the participants' own experiences and perspectives. It focused on understanding how nurses describe their work, the challenges they encounter, and how they respond to these situations in actual practice.

Research Steps

The study followed a clear and respectful process. Permission was first obtained from dialysis centers in General Santos City, and nurses who met the criteria were invited to join after being informed about the purpose of the research. With their consent, semi-structured face-to-face interviews were conducted in private, comfortable settings, allowing them to share their experiences openly. These conversations were recorded, transcribed, and carefully analyzed using thematic analysis, so the findings truly reflected the voices and realities of the nurses caring for elderly ESRD patients.

Data Collection and Sample Selection

The study used purposive sampling, involving eleven(11) dialysis nurses from centers in General Santos City with at least six months of experience caring for elderly ESRD patients. Data were gathered through semi-structured face-to-face interviews lasting 30–60 minutes in private settings, allowing nurses to share openly. With consent, sessions were recorded and transcribed to capture their experiences, challenges, coping strategies, and sources of support.

Data Analysis Methods

The interviews were analyzed using Braun and Clarke's six-step thematic analysis. The researcher immersed in the transcripts, identified meaningful statements, and organized them into codes. These codes were grouped into themes, refined against the original data, and clearly defined to reflect the study's objectives. The themes were then presented with direct quotes, capturing nurses' lived experiences, challenges, coping strategies, and support systems

.Research Hypotheses and Validation

Since this was a descriptive qualitative study, no formal hypothesis was formulated but instead, it was assumed that participants would provide honest accounts reflecting typical dialysis care for elderly patients with end-stage renal disease. To ensure rigor, the interview guide was reviewed by experts and trustworthiness was maintained through credibility, dependability, and confirmability. this was achieved by accurate representation of responses, consistent data collection, and systematic documentation of the analysis process.

Study Limitations and ethical considerations

This study was limited to eleven(11) dialysis nurses from selected centers in General Santos City, which may affect generalizability, and relied on self-reported accounts that could

be influenced by recall or perception. Despite these limitations, ethical standards were upheld through Ethics Review Board approval, informed consent, voluntary participation, and strict confidentiality with secure data storage and respectful interview practices.

RESULTS AND DISCUSSION

SOP 1: What are the lived experiences of dialysis nurses in enhancing quality of care for aging populations with end-stage renal disease on dialysis treatment?

The lived experiences of dialysis nurses revealed two major themes: Duality of Nursing Work and Holistic Dialysis Practice.

Duality of Nursing Work

These findings suggest that dialysis nursing involves a balance between exhaustion and fulfillment, where nurses remain committed to their role even under pressure. Similar findings were reported by Santos et al. (2024), which showed that nurses often feel tired but continue because they find meaning in patient care.

Holistic Dialysis Practice

This supports previous findings that nursing care requires a holistic approach, especially for elderly patients undergoing long-term treatment.

SUMMARY

This study explored the lived experiences of dialysis nurses caring for elderly patients with end-stage renal disease. Findings revealed that their work is both demanding and meaningful, requiring technical skill and emotional care, while challenges such as complex patient conditions, heavy workload, and limited resources affect care delivery. Nurses cope through emotional regulation, teamwork, and continuous learning, though gaps in staffing and institutional support remain. Overall, both individual and organizational factors shape the quality of dialysis care.

CONCLUSIONS

This study showed that caring for elderly patients with end-stage renal disease is both challenging and meaningful for dialysis nurses. Their role goes beyond technical tasks, involving emotional care and constant patient interaction, yet heavy workloads, limited resources, and complex conditions make care difficult. Nurses cope through teamwork, emotional regulation, and continuous learning, but stronger institutional support and better working conditions are needed to enhance both nurse well-being and patient outcomes.

RECOMMENDATIONS

Healthcare institutions should support dialysis nurses by addressing workload, staffing, and resource needs while recognizing the physical and emotional demands of their work. Nurses are encouraged to continue a holistic approach that blends technical skill with emotional care, supported by training for complex patient needs and communication challenges. Ongoing professional development, teamwork, and personal coping strategies like self-care and emotional regulation can further strengthen both nurse well-being and patient outcomes

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AI DECLARATION STATEMENT:

AI-supported tools helped with grammar and structure in creating this article. No AI tools were used to collect, analyze, or interpret data; all authors are credited for their academic contributions.

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