CHAPTER - V

Discussion
One of the most challenging aspects of research is interpretation and discussion of the results obtained. Not only does each individual statistic obtained have to be given meaning but the composite and integrated picture of the phenomena must be evolved.

The researcher studied two groups of subjects, those that lived in conditions of uninterrupted high stress referred to as prolonged stress group and those that lived in conditions where there was no continuous stress, referred to as non prolonged stress group. The basic contention of the researcher was that prolonged stress would result in certain deep core changes which would be manifested in the form of depersonalization and hopelessness. This basic contention has been fully supported by findings obtained (Table 1 and 2). When we observe that the prolonged stress group subjects show a significantly higher score both on depersonalization and hopelessness, it is a reiteration of what we had anticipated.

Our next important premise was that while prolonged stress may lead to behaviors like depersonalization and hopelessness, there are certain factors which may exercise a moderating influence. The two factors which we had decided to explore were social intimacy and religiosity. We were provoked to study these two factors because both theory and empirical evidence strongly suggested their possible contribution.

When subjects belonging to prolonged stress group who were high on religiosity were compared to subjects low on religiosity, a marked difference in terms of depersonalization was seen. Religiosity really
seemed to protect them from the experience of depersonalization and we found that those who were highly religious were significantly less depersonalized. In the same manner high social intimacy in the PSG resulted in low scores on depersonalization, supporting our contention that social intimacy moderates the effects of prolonged stress on depersonalization (Table 3 and Table 5).

However, both for religiosity and social intimacy this type of phenomena was not observed vis-a-vis hopelessness (Table 4 and Table 6). There was no difference in the experience of hopelessness on the basis of religiosity or social intimacy. In this connection it would be appropriate to understand a major difference between depersonalization and hopelessness.

The phenomena of depersonalization may be seen as a type of breakdown of certain psychological processes which keep one intact and unified. It is a response emanating out of the sheer impact of certain traumas. Hopelessness on the other hand is a behaviour or frame of mind which emerges in terms of active evaluations and attributions. It is to a great extent a well thought out position taken by the individual. We may say that it is more person-determined than depersonalization which is probably more external phenomena determined. Thus this aspect would probably be less affected by interventions which can exercise an influence on depersonalization. Therefore hopelessness may have remained unaffected by social intimacy and religiosity.

Social intimacy definitely provides opportunity for catharsis and alleviation of stress and undoubtedly it is of great therapeutic value but it has not touched upon the experience of hopelessness.
It could also indicate that perhaps, while, social intimacy may have an alleviating effect at a particular level of stress experiences, the prolonged stress experience becomes much more internalized and therefore a relatively external experience like social intimacy is not able to buffer it.

But religiosity is a much more personal experience and on the face of it one would have expected that it would protect from succumbing to hopelessness. At this point it is important to appreciate that the concept of religiosity is a complex concept, both practices and expressed behaviors together with deep belief and philosophy constitute the total concept of religiosity. There may be individuals who show a high score on religiosity but since the contribution of either of these factors may be more marked, a similar score may not indicate an identical position. Further there can be vast individual differences in the perspective within which religion is placed. Depending upon the vision of God which an individual has, there may be either a sense of reassurance which religion gives, or a sense of strain which people who emphasize the role of God as punisher for sins may have.

Religiosity as a phenomenological concept is basically a subjective and personalized view of God and beliefs regarding him. All religions present two aspects of God - the forgiver who cherishes and takes care of His creation and the punisher who dispenses justice and gives retribution for wrongs done. Each individual may cognize both aspects but for some the second may be predominant which would result in a sense of strain and pressure rather than strength. In future studies when religiosity is studied as a factor, this particular aspect should be taken into consideration.
In a study conducted by Exline & Yali (2000), this fact is brought out clearly. It was found that for some subjects religion was comforting, for others it was strain producing. Religious strain was associated with greater depression and suicidality and depression was linked with religious fear and guilt.

Another study conducted by Murphy and Others (2000) highlights the fact that religious belief but not religious behaviour is a significant predictor of lower levels of depression and hopelessness. Perhaps in our study the impact of religiosity on hopelessness may have been somewhat levelled out by the fact that for some subject religiosity may have been related to strain and for some related to comfort.

Pincus (1997), in his study on religious communities pointed out that the protection which religion gives results from a coherent world view, an amplified sense of belonging, rest and meditation associated with frequent prayer. Therefore some aspects of religion which are comfort providing may be helpful, others may not. If studies which study religiosity under two separate dimensions namely belief and practice and God's image of comforter and punisher are conducted and each dimension is studied separately, we could obtain some more in depth results, which may be different from what we observed.

Results obtained with regard to subjects belonging to NPSG, show that subjects who are not under severe prolonged stress, social intimacy was found to lower the feelings of hopelessness. Thus, the experience of depersonalization and hopelessness were occurring to a very limited degree
in the NPSG. Perhaps, no protective buffer was needed and the scores for both groups remained the same.

We studied subjects belonging to nuclear and joint family systems on the various dimensions. Since nuclear and joint family conditions drastically differ in terms of inputs received by the individual, in the joint family system inputs would be from a greater age-difference range, a greater social-distance range than nuclear family structure, it was visualized that differences may be observed. We found a different pattern of configuration in the two family systems.

We found that subjects living in the nuclear family systems do not show the influence of social intimacy and religiosity on the experience of depersonalization and hopelessness. In the joint family system however, it was observed that the subjects who were high on religiosity were much lower on both depersonalization and hopelessness than counterparts who were low on religiosity. In the same manner social intimacy also operated to lower the experience of depersonalization and hopelessness.

Nuclear families are definitely well knit families with immediate close family members living in proximity. However, the number of persons is limited, joint families on the other hand have a larger spectrum in terms of people with different personalities and affinities, thus increasing chances of more compatible target person for expressions. The warmth and safety of numbers is also an important asset in situations like that in Kashmir. Religiosity is also an attribute which older members of the family hand out
to the younger members. Chances of this are much greater in the joint family system. Furthermore not only imbibing of religiosity but learning the significance of religiosity is also greater when the older age group is a source of learning. Therefore religiosity was more likely to be a moderating and buffering factor in joint family than nuclear family. In terms of social intimacy also a similar buffering effect was observed. As pointed out earlier the quality and extensiveness of social relationships is much richer in the joint family scenario than in the nuclear family. In the nuclear family situation it is adults with direct and immediate responsibility of nurturance that constitute this family system and with the business of struggling in life, relationships between members may be deep but limited in frequency of occurrence. In the joint family on the other hand opportunities of expression are much greater because certain figures symbolizing great trust, warmth and security, such as parents, grandparents are always there as confidantes and persons with whom catharsis and opening can be done at all times. Thus our basic premise of social intimacy and religiosity being moderators of prolonged stress is borne out by information obtained from joint family system. Further perusal of this data also suggests to us that perhaps not merely social intimacy but quality and frequency of interaction should also be taken into consideration.

Gender is an important variable which determines our behaviour on many aspects. Some gender differences are the outcome of role learning, societal expectations and some may be differences accruing from intrinsic differences between male and female. When we observe the results obtained by us in terms of intra gender comparisons in PSC and NPSC, we
see that males living in PSC do not differ from males living in NPSC on either depersonalization or hopelessness. In terms of religiosity and social intimacy also both the groups fall on the same position. However, from table 18 we observe that males and females do not differ from each other on religiosity, depersonalization and hopelessness, only on social intimacy females have a significantly higher score than males. Thus in the overall sample differences in terms of gender exist only on social intimacy, females scoring higher but by and large gender is not an important variable.

The fact that gender differences were not seen to exist is also an important finding because it contradicts the popular presumption that males and females are bound to differ on various behavioural dimensions. With the passage of time and with men and women having similar opportunities, a large number of differences are being levelled out. Only intrinsic differences based upon actual physiological and psychological differences in the make up of the two genders are really operative. Thus social intimacy which reflects the desire and ability to share, open up and confide may be a distinctive feature of the female. The intra gender comparison of females PSC and NPSC reflects differences in social intimacy and hopelessness indicative of the fact the prolonged stress condition reduces social intimacy amongst females and increases their sense of hopelessness. This difference was not seen amongst males. We may venture to state that under prolonged stress conditions the females may react slightly differently, although in the overall analysis the gender difference is not operative. However, when high & low religiosity males were compared we found that both on depersonalization and hopelessness the high religiosity males were
significantly lower i.e. religion was a moderating factor for prolonged stress impact studied as depersonalization and hopelessness.

On the other hand this phenomena was not observed amongst high social intimacy male subjects in the same way. Social intimacy had no effect on depersonalization, both high and low social intimacy (male) groups showing similar scores on depersonalization. However the high social intimacy group was significantly low on hopelessness as compared to the low social intimacy group. Females with high social intimacy also show lower scores on hopelessness as compared to low social intimacy females. Thus for both men and women social intimacy is a buffering factor for the experience of hopelessness. This result is in conformity with studies carried out by Grant (2000). He examined individual (coping strategies) and family (parent-child relationship) involvement variables as potential protective factors. Results indicated that a positive relationship with parents (an important kind of social support) buffered the effects of stress on externalizing symptoms for both males and females.

While the impact of social intimacy on hopelessness was same for both males and females, we find that in terms of religiosity there is a marked gender difference. As stated earlier religiosity exercised a buffering effect on both depersonalization and hopelessness amongst males, religiosity had no such effect on females. This is an interesting observation because one commonly associates religious activities, greater dependence upon and acceptance of God's will and the fate. He has decreed amongst females rather than males.
It is possible that the component of religion which the women in our sample who were not as highly educated as men, had acquired was to a greater extent the rites and practices rather than a philosophy. It should also be pointed out that it is a common stereotype to associate women with a type of frailty which compels her to look up to a superior omnipotent power for succourance, and the male with strength and thus a relative independence. Recalling the theoretical model of Jung which talks of the anima, animus archetypes we feel tempted to point out that the male psyche also has a female component, therefore, this characteristic of looking up to a higher power can be a male behaviour as much as a female behaviour.

Different age groups represent a different stage of development, varying amounts and types of experiences in life, differing perspectives and expectations for the future. What is chronological difference in terms of years is psychologically a difference in psychosocial situations and perceptions. Many studies have indicated that age is one of the factors that may influence the effect of stress on the individual. One of the studies carried out by Nussbaum and Goreczny (1995) investigated the influence of personality variables of individuals reactions to stress. Results illustrated that there was a negative relationship between age and subjective level of stress. It was for this reason that this variable was selected for study.

It was natural to expect that the younger and the older people would manifest some difference in terms of where they stood on these variables and the type of difference that would be seen. It was however observed that the younger and older age groups did not differ at all in terms of any of the variable under study. In both the age groups absolutely no
difference was observed in depersonalization and hopelessness and even in
terms of the moderating factors namely social intimacy and religiosity
there was no difference. The results obtained by us however, indicate that
the impact of prolonged stress was similar across all ages. This is an
interesting observation and is perhaps indicative of the fact that an extended
period of stress gives rise to some behaviors amongst individuals of all
ages.

When the two age groups were compared in terms of PSC and
NPSC there were some differences which strengthened one aspect of our
basic finding namely that those experiencing prolonged stress are higher on
hopelessness than the non-prolonged stress group. On depersonalization
however, there was no significant difference. It appears that the impact of
prolonged stress runs through all age groups in a similar manner. The
manner in which it operates on the psyche is not dependent upon age related
differences.

The interesting observation which is apparent from results of age
comparison is that age per se is not a condition which influences the
phenomena under study.

As in the total sample, Stress condition influences hopelessness
in the two age group. In both age groups subjects living under prolonged
stress conditions are higher on hopelessness than those living under non-
prolonged stress condition. In the general sample when the two groups were
studied merely in terms of age without emphasis on stress condition no
difference was seen in them on hopelessness. The impact of the buffer
variables on hopelessness can also be observed in the younger age group where high social intimacy shows a low score on hopelessness. By and large, age did not emerge as a significant variable exercising influence on prolonged stress. True, there are a large number of factors which are influenced by age. Our experiences in life mature us and make us more realistic - coping with everyday problems, managing social interactions, planning for the future are all aspects for which age may definitely play a role. But suppose a devastating occurrence like earthquake or nuclear explosion occurs, it is likely to shake people of all ages almost equally, within variations existing as individual difference. In the same manner a situation of prolonged stress is a gnawing, erosive phenomena which breaks down all who experience it. The vulnerabilities and the defenses function within similar limits for all persons irrespective of age.

For the human being who has potential to grow, to achieve and to contribute to human society factors like prolonged stress which retard and inhibit positive growth are unfortunate. Except for victims of natural disasters and a few personal cases of uninterrupted trauma, the majority have a political and historical basis. Alleviation of this aspect is not in the hand of the social scientist but identifying phenomena which are able to minimize the trauma and contribute to management of the situation would be a considerable contribution. This was the intention of the present researcher to try and identify factors which can help to encourage healthy practices and strategies so that the core psychic systems of the individual does not break down and is able to cope physically as well as psychologically.
We have been able to empirically demonstrate two important variables namely social intimacy and religiosity which exercise a protective influence on the individual and reduce depersonalization, for feelings of hopelessness the buffering effect was not unequivocally evident. Ever more important is the fact that both these factors can be enhanced by application and practice, therefore they can be used as active interventions.

The investigator is conscious of limitations in the work done. Individual research must necessarily be very limited in terms of scope and size of sample. Therefore it is important that more work in the area should be undertaken to ensure that information which will help us to make statements more convincingly is obtained.

Hindsight is always more wise than foresight. When a researcher begins work, it is within a frame work of conjectures, but by the time the work is done many aspects which would have made the work more informative have come to the mind of the investigator. Since research is a continuous process some suggestions for further research are being given to be guiding factors both for the present researcher and for other.
SUGGESTIONS FOR FURTHER RESEARCH

The first important point that strikes the researcher is in terms of methodology. It is felt that for a study of this nature, not merely scores of the subject on various dimensions are important but more informative would be an insight into his phenomenological world, the meaning which he assigns to the stress and trauma being experienced. In the domain of psychology, it is being appreciated more and more that analysis which brings out the phenomenological world view of the individual, the processes which are involved in a particular outcome should be studied rather than forming conclusions merely on the basis of a quantitative score. Quantification is necessary for systematic and scientific analysis but if we proceed from the qualitative towards quantitative it would be more informative and appropriate. Therefore it is suggested that study on a smaller sample conducted with an idiographic bias which would make available the individuals' views and feelings expressed in narrative forms, together with interview which would expound and clarify, should be undertaken. After the conduct of this research, the investigator felt curious to study in an indepth fashion, individuals who showed maximum depersonalization and minimum depersonalization within prolonged stress conditions. In terms of hopelessness too, there was a desire to know more about those having extreme scores on hopelessness. Since it was not practicable to reapproach subjects at this juncture for getting detailed information, the researcher strongly feels that the constructivist approach should be used in studying of the phenomena, atleast it should form an important component of the total strategy.
The second important feature which needs to be looked at in a new perspective is the factor of religiosity. The individual's concept of God as Nuturer or Punisher, the concept of religiosity as a philosophy (beliefs) or as rituals (practices) needs to be demarcated and studied separately. Perhaps this would automatically be taken care of if the study is done with a constructivist bias. Our contention that the concept of social intimacy should be supplemented with concept of quality and frequency of interactions will also be incorporated in the scheme of things through the narrative, interview and qualitative approach.

Studies which explore into the human being's unique, dynamic psychosocial repertoires are a methodological challenge. To study such personalised phenomena within the restrictions and dictates of science is not an easy task but still the psychologist must continue in this endeavour. What can be more important than discovering strengths within ourselves, qualities within us that can counter the ill effects of events which are beyond control. It gives hope to human existence and if this study can contribute an iota of optimism to human suffering, it will have fulfilled its purpose.