ABSTRACT

The objective of the present endeavor was aimed to study hope and resilience as related to psychological well-being among HIV positive people. Keeping in view the objective of the study, an empirical investigation was undertaken and thereafter data were tabulated and analyzed with the help of Product-moment coefficient of correlation, t-test and Regression analysis for obtaining results.

The thesis comprises of five chapters. Chapter-I emphasizes on the present scenario of the HIV positive patients vis-à-vis independent variables i.e. hope and resilience and dependent variable psychological well-being as a part of the introduction of Ph.D thesis.

HIV, the human immunodeficiency virus, is the virus that causes AIDS, a debilitating and deadly disease of the human immune system. HIV is one of the world’s most serious health problems. Human Immunodeficiency Virus (HIV) is a lent virus (a member of the retrovirus family) that can lead to the immune system begins to fail, leading to life-threatening opportunistic infections. HIV infects certain cells and tissues of the human immune system and takes them out of commission, rendering a person susceptible to a variety of infections and cancers. The collection of diseases that arise because of HIV infection is called acquired immune deficiency syndrome, or AIDS.

Because the worldwide spread of AIDS has had such a great effect on millions of people worldwide, a number of misconceptions have arisen surrounding the disease. From the moment scientist identified HIV and AIDS, social responses of fear, denial, stigma and discrimination have accompanied the epidemic. Discrimination has spread rapidly, fuelling anxiety and prejudice against the groups most affected as well
as those living with HIV and AIDS. Despite a wealth of information about HIV transmission, HIV/AIDS remains the single largest sexually transmitted disease of our country. Because many misconceptions and stigma related to this disease, it can affect the person’s personality, emotional health and well-being.

Constructs related to hope began to be introduced into the psychological and psychiatric literature in the 1950’s. It enables an individual to cope with a stressful situation by expecting a positive outcome. Because a positive outcome is expected, the individual is motivated to act in the face of uncertainty. Hope is a belief in a positive outcome related to events and circumstances in one’s life. Hope implies a certain amount of perseverance i.e., believing that a positive outcome is possible even when there is some evidence to the contrary. Resilience in psychology is the positive capacity of people to cope with stress and catastrophe. It is also used to indicate a characteristic of resistance to future negative events. Resilience is defined as a dynamic process that individuals exhibits positive behavioral adaptation when they encounter significant adversity or trauma (Luther, Cicchetti & Becker, 2000). Adversity refers to any risks associated with negative life conditions that are statically related to adjustment difficulties. Positive adaptation, on the other hand, is considered in a demonstration of manifested behavior on social competence or success at meeting any particular tasks at a specific life stage. According to Diener, Suh & Oishi (1997) subjective well-being (SWB) is a field of psychology that attempts to understand people’s evaluation of their lives. These evaluations may be primarily cognitive (e.g. satisfaction or marital satisfaction) or may consist of the frequency with which people experience pleasant emotions (e.g. joy as measured by the experience sampling technique) and pleasant emotion (e.g. depression). Psychological well-being is a somewhat unavailable concept which is to do with people’s feeling about everyday
life activities. Such feelings may range from negative mental states or psychological strains such as anxiety, depression, frustration, emotional exhaustion, unhappiness, dissatisfaction, to a state which has been identified as positive mental health (Jahoda, 1958; Warr, 1978).

Chapter II has been devoted to review of literature in relation to the variables of the proposed research study. Reviewed studies on hope among HIV patients showed that patients who were having high hope dealt with the disease more positively. Some studies also showed that patients having hope helped them to deal with the HIV diagnosis more positively; they were more likely to cope with the adversity. But some studies found opposite, that hope is independent of the HIV status.

Existing literature revealed that HIV diagnosis tends to provide the process of coping and positive attitude towards one’s illness that resulted in resilience in HIV patients. Some studies showed that social support and positive emotions played a crucial role in developing resilience among HIV positive patients. Some studies found significant positive and negative relationships between resilience and various risk-taking behaviors. From the above literature it can be said that resilience plays an important role in dealing with the HIV disease.

From the readily available literature on psychological well-being the researcher found that in certain studies social support and various coping styles were associated with psychological well-being. In some studies positive meaning was associated with higher level of psychological well-being among HIV patients. But some showed people with HIV had poorer psychological well-being. In all from the above literature, it can be said that positive well-being had a favorable effect on both diseased and healthy population.
Chapter III deals with the method and procedure opted for the investigation. The study was conducted on 160 people. Of these 80 people were HIV positive patients and the remaining 80 people were HIV negative people. The sample of HIV patients consisted of 50 males and 30 females and sample of HIV negative people consisted of 37 males and 43 females. In the present study Hope scale developed by Snyder (Snyder et al. 1991) was used to measure hope. Resilience was measured by Resilience scale developed by Wagnild and Young (1993) and for measuring psychological well-being, Psychological Well-Being Scale developed by Bhogle and Prakash (1995) was used. For data analysis, researcher had used SPSS package for undertaking Regression analysis, t-test and Correlation of coefficient.

Chapter IV and V are devoted to result and discussion. The correlation analysis was carried out to examine relationship among hope, resilience and psychological well-being. The intercorrelation among variables showed that there was a strong and positive relationship between hope, resilience and psychological well-being among HIV patients. Hope of HIV patients was positively and significantly correlated with resilience and psychological well-being. Similarly, resilience was also significantly correlated with psychological well-being among HIV patients.

Regression analysis also showed the significance of hope in predicting psychological well-being of HIV patients. Results indicate that hope emerged as significant predictor in explaining psychological well-being of HIV patients. It means that people who are having high hope are more likely to cope with adversity. They experience less depression, anxiety and involve less in reckless behavior. In another words, they deal with disease positively that enhanced their psychological well-being.

In the present investigation, resilience did not emerge as a significant predictor of psychological well-being among HIV positive. Although, according to correlation
analysis resilience was significantly correlated with psychological well-being but regression analysis depicts that resilience was not a significant predictor. The reason behind this may be resilience has not that much effect on psychological well-being as compared to the effect of hope.

The reason behind the finding that resilience did not emerge as a significant predictor of psychological well-being among HIV positive, this is may be because of the fact individuals with a positive diagnosis are at high risk for mental health issues. Many experience distress from symptoms such as pain, fatigue, insomnia, anxiety and depression. These may be the factors that lead to low level of resilience in HIV patients.

In case of HIV negative people, the intercorrelation among variables showed that significant correlation was not found between hope, resilience and psychological well-being. Similarly, regression analysis also explains that both, hope and resilience did not have any significant contribution in defining psychological well-being among HIV negative people. The explanation behind the results that hope did not emerged as a significant predictor of psychological well-being, may be is that HIV negative people are healthier than their counterparts. They experience less distress, depression and anxiety and less likely to perceive their health as personally threatening. May be because of these reasons hope does not play much role in fostering psychological well-being among HIV negative people.

In the present investigation resilience emerged as a non significant predictor of psychological well-being among HIV negative people. This is may be because these people are healthier than diseased patients and good health is a way to reduce stress and depression. Because they have not faced any obstacle in relation to their health,
they have not developed much resilience. This may be a reason for the resilience not to emerge as a significant predictor of psychological well-being among these people.

The results also showed that there was a significant difference between the mean scores of HIV patients and HIV negative people on hope, resilience and psychological well-being. HIV negative people scored significantly high mean scores than HIV positive patients on hope, resilience and psychological well-being. The major cause of this result may be is HIV negative people are more healthier than HIV positive patients, they experience less distress, depression and anxiety than HIV patients. It is an acceptable general fact that HIV negative people are better in health, and have better psychological well-being. HIV negative people are less likely to perceive their health as personally threatening as compared to their counterparts. Consequently, HIV negative people are more resilient, have more hope, have better psychological well-being in comparison to HIV positive patients.

It was also found that there was no significant difference between HIV positive male and HIV positive female on hope and resilience. It seems because as both male and female are going through same symptoms, pains, distress, and anxiety because of the disease. So there is no difference between them in terms of hope and resilience as they all are in the same situation and facing same adversity.

However, HIV positive male and HIV positive female differ significantly on psychological well-being. It seems that male and female passes through developmental stages in different ways and meet dissimilar social, cultural and psychological demands. Therefore they have different kinds of mental set to cope with their demands. Both deal with life in their own ways. In case of HIV positive diagnosis, both deal with disease with different ways. Therefore, it can be said that both male and female differ significantly on psychological well-being.
Results also highlight that HIV negative male and HIV negative female did not differ significantly on hope, resilience and psychological well-being. Earlier men would work from the wee hours of the morning to the fading of the day to see that their families get the best that they could afford. Everything owned and everything purchased was so by the sweat of the men’s brow. Toady however that is no longer the case women are becoming highly successful as providers for their families like their counterparts. In today’s society females are as much educated as males are. Nowadays males and females are considered same in every aspect. So this may be the reason why HIV negative male and female did not differ significantly on hope, resilience and psychological well-being in the present investigation.

In the light of the research experience it is suggested that further research is required for assessing other factors which influence psychological well-being among HIV positive patients. Personality of HIV patients and HIV negative people can be studied in more detail by taking a large sample to draw more fruitful generalization.