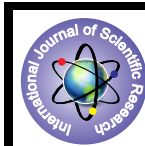


Influence of Gender on Sources of Stress In HIV/AIDS Patients



Psychology

KEYWORDS :

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ABSTRACT

The study examined how gender influences the stress faced by HIV / AIDS patients. The sample of the study consisted of 374 male and 346 female HIV/AIDS patients – attending Anti Retroviral Therapy (ART) centre at District Head quarters hospital, Chittoor and ART centre, SVRR government general hospital, Tirupati. Results revealed that Gender is significantly influencing the stress faced by HIV/AIDS patients due to emotional problems, occupational problems and financial problems. Whereas the influence of Gender on stress faced by HIV/AIDS patients due to family problems, health problems and social problems is not significant.

Introduction :

Stress refers to a response of the organism to a noxious or threatening condition (Pearlin et al., 1981). The manifestations of stress are found at every level of organismic functioning, from the microbiological to the emotional.

Stress in HIV/AIDS:

HIV/AIDS an incurable and often fatal disease requires enormous psychosocial adjustments. They commonly go through an initial stage of denial, in which they do not acknowledge having the disease or deny its likely consequences. HIV threatens a person's life, goals, expectations, and significant relationships (Ana-Maria Schweitzer, 2005).

Gender, stress and HIV /AIDS:

Gender inequalities and HIV and AIDS are inextricably linked. Women account for around 50 per cent of all people living with HIV. They are disproportionately affected by HIV-related stigma and discrimination, violence, economic inequalities and the burden of caring for people living with HIV (International Labour Office Geneva 2011). In the HIV/AIDS epidemic, gender plays an integral role in determining an individual's vulnerability to infection, his or her ability to access care, support or treatment, and the ability to cope when infected or affected. (World Health Organization 2003).

Gender is an important biological determinant of vulnerability to psychosocial stress. Recently, individual differences in stress reactivity have been proposed as a potentially important risk factor for gender-specific health problems in men and women, in addition to genetic, socio-cultural, hormonal and developmental factors (Hamann and Canli, 2004; Young and Altemus, 2004; Goldstein et al., 2005; Kajantie and Phillips, 2006). According to American psychological association, historically women report higher levels of stress than men ((Mind/Body Health 2012). Men tend to utilize work-based support networks, whereas women often rely on support networks composed of family members and/or friends (Piltch et al., 1994), which may in turn increase felt stress by underscoring conflicts between work and family responsibilities, a leading cause of stress for working women (Piltch et al., 1994; Pielberger & Reheiser, 1995). Economic constraints such as the lack of money to pay for services or transportation or the high opportunity costs of time, create significant barriers for women's use of health services. (Ana-Maria Schweitzer 2005). Women with HIV infection are often faced with socioeconomic stressors that exacerbate the negative consequences of HIV for physical and mental well-being (Cochran, 1989; Osmond et al., 1993)

It is on this background that the study was developed to examine the role of gender on the stress faced by HIV / AIDS patients.

Objectives:

The foresaid observation on stress and coping in HIV/AIDS patients has indicated that gender, has significant influence on stress and coping strategies adopted by them. In the light of this

fact, the study has been taken up with the following objectives.

1. To investigate whether gender of the individuals influences the stress faced by HIV/AIDS patients

Hypotheses:

Accordingly, it is believed that there would be a significant influence of gender, on the stress faced by HIV/AIDS patients. To test this belief the following hypotheses have been framed.

- I. Gender would significantly influence the stress faced by HIV/AIDS patients due to family problems
- II. Gender would significantly influence the stress faced by HIV/AIDS patients due to emotional problems
- III. Gender would significantly influence the stress faced by HIV/AIDS patients due to Health problems
- IV. Gender would significantly influence the stress faced by HIV/AIDS patients due to Social problems
- V. Gender would significantly influence the stress faced by HIV/AIDS patients due to Occupational problems
- VI. Gender would significantly influence the stress faced by HIV/AIDS patients due to financial problems

MATERIALS AND METHODS

To test the hypothesis, Stress inventory developed by Dr. Srikanth Reddy and Jayanthi (2006) is used to assess the several types of stress faced by HIV/AIDS patients.

The stress inventory consists of seventy-three (73) items. They describe the problems or stress faced by the individual suffering with HIV/AIDS. The respondent rates each item on four (4) point scale indicating how stressful the event was perceived to be i.e., Not occurred (1), Occurred but was not stressful (2), Caused a little burden (3), Caused very much stress (4). The stress inventory measures the stress of HIV/AIDS patients in six areas i.e., Family problems, emotional problems, Health problems, Social problems, Occupational and Financial.

Reliability

The questionnaire was standardized and initially a pilot study was conducted. It was conducted in two phases. In the first session, 15 subjects were given these two inventories and asked to mark their stressful situations. After a gap of one month these fifteen subjects were again given the inventories and were asked to complete them. The responses of 1st and 2nd sessions were compared and it was found that an average difference of 0.6 items per person only occurred between first and second measurements thus giving the instrument good reliability.

Sample:

The sample consisted of 374 male and 346 female HIV/AIDS. The individuals of 18 years of age or older, able to read and understand English or Telugu and receiving health care services at the ART centers were included in the study. Permission to conduct study was sought from the medical superintendents of the General hospitals and the Medical officers of the ART centers.

Procedure:

The present research titled "a study to assess the impact of gender, social support and personality on stress and coping strategies in HIV/AIDS patients" was conducted in Anti Retro Viral Therapy Centre (ART), District Head Quarters Hospital, Chittoor and ART Centre, Sri Venkateshwara Ramnarayan Ruia government general hospital, Tirupati. The study was conducted during 2010–2011, and data collection was undertaken by the researcher with the support of professional research assistants, councilors, staff nurses, and nursing students working at ART centers. One-to-one interviews were conducted with HIV/AIDS patients.

Research design

A two randomized group design is used.

Table: 1 Details of sample distribution:

S No	Gender	
	Male	Female
1.	374	346
Total	720	

RESULTS AND DISCUSSION

Based on the objectives and hypotheses framed, the results are statistically analyzed by using descriptive statistics. For descriptive purposes categorical variables were expressed as proportions (%) while continuous variables were described as Mean, Standard Deviation and 't' test. We have examined the various sources of stress reported by HIV/AIDS patients in the light of the independent variable i.e., gender. Firstly, the Means and SDs of stress faced by HIV/AIDS patients is computed. At the 2nd level, the data was further analyzed for 't' values in order to know whether differences in stress faced by HIV/AIDS patients in relation to gender is significant.

Table-2: Means, and SDs and 't' values of stress faced by HIV/AIDS patients in relation to Gender

Sl. No.	Sources of stress	Gender		't' values
		Male (N-371)	Female (N-346)	
1.	Family problems	28.20 5.86	27.57 6.03	1.43@
2.	Emotional problems	24.52 4.02	23.12 4.63	4.22**
3.	Health problems	26.39 3.89	26.04 4.87	1.10@
4.	Social Problems	30.31 5.80	30.08 6.52	0.76@
5.	Occupational problems	16.64 3.69	15.65 3.74	3.57**
6.	Financial problems	13.96 2.34	13.44 2.79	2.71*

** Significant at 0.01 level

* Significant at 0.05 level

@ Not Significant

According to gender when we look at the table 2 the mean score of stress faced by male HIV/AIDS patients due to family problems is 28.20 and female HIV/AIDS patients mean is 27.57. Results of the study done by Ana-Maria Schweitzer (2005) and Dana Michelle (2005) indicated that male HIV/AIDS patients have a higher intensity of stress compared to female HIV/AIDS patients. The researcher's preliminary study (2007) also revealed the same trend. This may be because men being the bread winners and head of the family and are also blamed often for infecting the spouse. Fear of disclosure to the family, suffering with HIV/AIDS, and inability to carryout household activities,

need to go for work to run the family are all the factors due to which male HIV/AIDS patients are prone to develop more stress to the family members. The present study mean stress score difference 't' value of 1.43 is not significant. This result implies that gender has no significant influence on stress faced by HIV/AIDS patients due to family problems. From this observation the hypothesis that gender would significantly influence the stress faced by HIV/AIDS patients due to family problems is rejected.

When the mean stress scores of men and women due to emotional problems is compared, it is found that the mean stress score of male HIV/AIDS patients is 24.52 and female HIV/AIDS patient's mean score was 23.12. The mean score difference 't' value of 4.22 is highly significant at 0.01 level. This result implies that gender has significant influence on stress faced by HIV/AIDS patients due to emotional problems. Bartoli G et al (2009) indicated that emotional support is strongly associated with physical and psychological adjustment in persons living with HIV/AIDS and revealed that regardless of the source of support, men's well-being was more positively influenced by support than was women's well-being. This suggests that male HIV/AIDS patients faced higher stress compared to female HIV/AIDS patients, due to emotional problem. From this observation the hypothesis that gender would significantly influence the stress faced by HIV/AIDS patients due to emotional problems is accepted.

The mean stress of male HIV/AIDS patients due to health problems is 26.39 and that of female HIV/AIDS patients is 26.04. Whereas Carol Anderson Darling (2009) stated that female PWAs experienced greater stress from health problems than male PWAs. The mean stress score difference 't' value of 1.10 is not significant. This result implies that gender has no significant influence on stress faced by HIV/AIDS patients due to health problems. From this observation the hypothesis that gender would significantly influence the stress faced by HIV/AIDS patients due to health problems is rejected.

The mean score of stress faced by male HIV/AIDS patients due to social problems is 30.31 and the mean score of stress faced by female HIV/AIDS patients is 30.08. Whereas Cochran, 1989; Osmond et al., 1993, reported that Women with HIV infection are often faced with socioeconomic stressors that exacerbate the negative consequences of HIV for physical and mental well-being. In the present study the mean stress score difference 't' value of 0.76 is not significant. This result implies that gender has no significant influence on stress faced by HIV/AIDS patients due to social problems. From this observation the hypothesis that gender would significantly influence the stress faced by HIV/AIDS patients due to social problems is rejected.

The mean score of stress due to occupational problems reported by the male HIV/AIDS patients is 16.64. The mean score of stress due to occupational problems reported by the female HIV/AIDS patients is 15.61. The mean score difference 't' value of 3.57 is highly significant at 0.01 level. Piltch, Walsh, Mangione, & nnings, (1994) also reported that males, compared to females, perceive greater levels of workplace support. This result implies that gender has significant influence on stress faced by HIV/AIDS patients due to emotional problems. This suggests that male HIV/AIDS patients faced higher stress compared to female HIV/AIDS patients, due to emotional problem. From this observation the hypothesis that gender would significantly influence the stress faced by HIV/AIDS patients due to occupational problems is accepted.

The mean score of stress faced by male HIV/AIDS patients due to financial reasons is 13.96. Whereas the mean score of stress faced by female HIV/AIDS patients is 13.44. The mean score difference 't' value of 2.71 is significant at 0.01 level. This result implies that gender has significant influence on stress faced by HIV/AIDS patients due to emotional problems. This suggests that male HIV/AIDS patients faced higher stress compared to female HIV/AIDS patients, due to financial problems. This could be because Indian families are mainly lead by men as financial

supports. During the illness phase, one of the first responses for those working in the informal sector is to move from directly productive activities into service-oriented jobs, (farming to selling goods) which are usually lower paid. This change allows the infected person to work when they can, as service jobs are generally less physically demanding. As a result, income falls, and as the illness progresses the ability to work decreases, dragging income down further. From this observation the hypothesis that gender would significantly influence the stress faced by HIV/

AIDS patients due to financial problems is accepted.

Conclusions

From the above study results it is concluded that Gender is significantly influencing the stress faced by HIV/AIDS patients due to, emotional problems, occupational problems and financial problems. Whereas the influence of Gender on stress faced by HIV/AIDS patients due to family problems, health problems and social problems is not significant..

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