

## Study on Spiritual Coping and Depression of the Institutionalized HIV/AIDS Infected Persons in Coimbatore

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### Abstract

The present study is focused upon the spiritual coping and its influence over the depression of the HIV/AIDS infected people. The data are collected from 186 HIV/AIDS infected people in Coimbatore district using convenience sampling technique. The data was collected through interview schedule which consists of spiritual scale and depression scale. The results show that high level of spiritual coping and low level of depression is found among the respondents. It also shows that socio-economic characteristics will influence the spiritual coping and depression of the respondents. It is concluded that higher the spiritual coping will have lower level of depression.

**Key Words:** HIV/AIDS, spiritual coping, depression.

## 1. Introduction

HIV stigma can negatively influence interactions with family, friends, sexual partners, co-workers, and health professionals and often results in loss of social support. Some HIV-infected persons do not have an adequate support network because they fear of rejection from family members or friends (Robbins et al., 2003). Risk for suicide may be increased when HIV disclosure to loved ones is met with rejection rather than support (Kalichman et al., 2000). A study has identified that being in a current intimate relationship is associated with lower risk for depression in persons with HIV infection (Komiti et al., 2003). It is likely informed that strong and stable social supporting networks are important in ameliorating the effects of HIV-related stigma (Chenard, 2007). Because neglecting leads to loneliness and results in depression. In the context of HIV/AIDS, depression is often overlooked but potentially dangerous condition that can influence not only the quality of life, relationships, employment, and adherence to medical care, but also perhaps survival. Depression is associated with isolated lives, the absence of pleasure, and social and vocational impairment.

Religious practice and involvement are found to be common today. There are various surveys which shows that a good percentage of the population in the worlds are having various religious practices and beliefs in their day today life. Various research studies shows that religious practise or spiritual practices are used as a coping mechanism to manage their stressful situations in their life's. Although there are various factors helps to deal with depression, still there is a lack of coping stress which is found to be a major issue. This, if the role of spirituality significantly have an positive impact on the depression of the individual it may help them to prevent the development of depression in them or have a control on the impact of the depression. Keeping this view in mind, the present study is focused on the level of spiritual coping of the HIV/AIDS and its effects on level of depression of the HIV/AIDS patients.

## 2. Review of Literature

Raphael Bonelli, et.al. (2012). In their research article stated that depression symptoms and religious practices around the world are widespread. But at the same time the relationship between these tow constructs are not much been focused by the academicians or professional related to mental health. Thus this article examines the relationship between the religious involvement and symptoms of depression for the past 50 years. This was examined by 444 research studies which focused the relationship between these two constructs. Of which nearly 60 percent of the studies showed a result that there this negative relationship between depression and religious practices or involvement. But only 6 percent of the studies were contradictory to the findings of the other research studies. Pinho, et.al. (2017). their research study examined the religious coping of the people who are living with HIV/AIDS.

The study is descriptive in nature and cross sectional with quantitative approach. The study was carried out in University Hospital of Recife-PE, Brazil. The study was done during June to November 2015. Totally fifty two HIV/AIDS people have participated in the present research study. Questionnaire was used for the collection of data which includes Duke University Religion Scale (DUREL) and Religious coping scale (RCOPE). The results of the study shows that religious coping was found to be high among the respondents who are infected by HIV/AIDS. Faiza Amjad and Iram Zehra Bokharey. (2014). Their study focused on the spiritual wellbeing and coping strategies of the participants with anxiety disorder. A total of 40 respondents who were having anxiety disorder were included in the study. Questionnaire was to collect data which consists of the measurement tools namely spiritual wellness scale and coping strategies scale. The data were analysed using descriptive statistics, regression, z-test and mediation analysis. The results of the stepwise regression shows that of the total dimensions of spiritual wellbeing scale, only three had a significant influence on the anxiety disorder symptoms in negative way. The mediation analysis also shows that practice and coping of religious strategies do not mediate the relationship between the spiritual wellness and anxiety disorder symptoms. Deepika Singh, Jahnavi Kedare (2014). Their research findings shows that depression was found among majority 72 percent of the elderly patients who are ill. Of the total depressed respondents majority of them had a mild level of depression and one third of the respondents had a severe depression. When comparing the difference between the depressed patients and non depressed patients it was found that non-depressed patients were more spiritual than depressed patients. Depressed patients used emotional adjustment as their coping strategy. It was also found that higher level of depression was found among the patients who were adopting more emotional oriented coping mechanisms. It is also negatively related with task and avoidance coping mechanisms. Jiss K Jose, Jaya Padma. A and Ranjit.L (2014). Their study revealed that majority of the respondents (76.6%) belong to joint family and majority of the respondents (72.3%) were unmarried. the calculated value is less than the table value it is inferred that the mean mental health scores differ significantly among the marital status in the mental health score. The mean value shows that respondents who were single (mean = 57.85) had better mental health compared to married.

Henry, Sarah M.,(2013). Their findings show that an inverse spiritual coping strategy resulted in higher level of use of substance and also leads to unsafe sexual behaviours which mean that sex with more number of partners. The findings revealed that there was no statistically significant evidence of relationship between spiritual coping and depression among the respondents in the present study. The study concludes that negative behaviours related to health were seen among the respondents who were having negative spiritual coping. The study suggested that negative spiritual coping mechanisms are to be reduced to reduce the habit of substance abuse and risky or unsafe sexual behaviour among the people with HIV/AIDS.

### 3. Objectives

- To study the socio-economic background of the respondents
- To assess the level of spiritual coping and depression among the respondents.
- To study the association between socio-economic variables on the spiritual coping and depression.
- To study the relationship between spiritual coping and depression of the respondents.

### 4. Methodology

This study is descriptive in nature. Descriptive research design is used for the study. The Institutionalized HIV/AIDS infected people in Coimbatore District serve as the universe of the study. The size of the sample is confined to 186 HIV/AIDS people. Convenience sampling technique is adopted to select the sample for the present study. Data are collected through an interview schedule which includes socio-economic characteristics; Spiritual coping scale and depression scale. The researcher has administrated the pilot study and Pre-test before going to data collection. The data are then analyzed using various statistical tools like percentage analysis, chi-square and correlation.

### 5. Analysis and Interpretation

Table 1: Level of Spiritual Coping

S.No	Level of Spiritual Coping	Frequency	Percent
1	Very High (88-100)	4	2.2
2	High (79-87)	128	68.8
3	Moderate (68-78)	30	16.1
4	Low (45-67)	22	11.8
5	Very Low (20-44)	2	1.1
	<b>Total</b>	<b>186</b>	<b>100.0</b>

The above table shows that 68.8 percent of them have a high level of spiritual coping, 16.1 percent of them have a moderate level of spiritual coping, 11.8 percent of them have a low level of spiritual coping, 2.1 percent of them have a very high level of spiritual coping and 1.1percent of them have a very low level of spiritual coping.

Table 2: Level of Depression

S.No	Level of Depression	Frequency	Percent
1	Very Low (30-63)	48	25.8
2	Low (64-69)	56	30.1
3	High (70-75)	42	22.6
4	Very High (76-120)	40	21.5
	<b>Total</b>	<b>186</b>	<b>100.0</b>

The above table reveals that 30.1 percent of them have a low level of depression, 25.8 percent of them have a very low level of depression, 22.6 percent of them have a high level of depression and 21.5 percent of them have a very high level of depression.

Table 3: Association between Demographic Variables and Spiritual Coping

Variables	Spiritual Coping		Depression	
	Chi-square value	Result	Chi-square value	Result
Age	31.978**	S	13.601	NS
Gender	10.549	NS	5.445	NS
Education	63.504**	S	34.076**	S
Marital status	38.130**	S	15.046	NS
Religion	13.174	NS	8.835	NS
Years of Stay	23.174*	S	18.442*	S

The table shows that age, educational qualification, marital status and years and years of stay have a significant relation with the spiritual coping of the respondents. The table shows that gender and religion do not have a significant relation with the spiritual coping of the respondents.

The above also table shows that there is a significant association is found between educational qualification and depression, years of stay and level of depression at 0.05 level of significance. The table shows that age, gender, marital status and religion do not influence the level of depression of the respondents.

Table 4: Correlation between Spiritual Coping and Level of Depression

Variables	Correlation value	Significance	Result
Spiritual-Coping and depression	-.307**	P<0.01	Significant

The correlation value (r = -0.307) shows that there is a statistically significant inverse relationship between spiritual coping and the depression at 0.01 level of significance. It is been inferred that higher level of spiritual coping, lower is the level of depression and vice versa.

## 6. Salient Findings

The findings show that,

- 28 percent of the them belong to the age between 36-45 years.
- 55.9 percent of them are female.
- 33.3 percent of them have completed their higher secondary.
- 43 percent of them are unmarried.
- 68.8 % of them have a high level of spiritual coping.
- 30.1 % of them have a low level of depression.

- Age, educational qualification, marital status and years and years of stay have an association with the spiritual coping of the respondents.
- There is a significant association is found between educational qualification and depression, years of stay and level of depression.
- There is a negative relationship among the spiritual coping and depression at 0.01 level of significance.

## 7. Suggestions

Religious practices and coping can help the people to manage their life related stressful situations. A community with supportive nature can enhance the HIV/AIDS people to cope with their depression. Thus, the institutions have to provide necessary facilities and support which will enhance spirituality among the HIV/AIDS patients. The institutions must take efforts to provide support to caregivers of the HIV/AIDS patients; they may also encourage spirituality in caregiver self-care, leading to improve care of the patient with Depression.

## 8. Conclusion

Depression is a common and found all over the world. A research study shows that in a year nearly 6.7 percent of the people in US were having depressive disorders and 2 percent of them had severe depression. Depression had a severe impact on the function, relationship and life of an individual. As per the World Health Organizations, by 2020, depression will be the second most threatening condition. Thus it is essential to identify suitable coping strategies to overcome depression at this stage. Thus the present study is done to identify spiritual coping as a coping strategy to reduce depression among the HIV/AIDS patients.

The present study concludes that there is a high level of spiritual coping and low level of depression is found among the respondents. Socio-economic characteristics do influence the level of spiritual coping and depression of the respondents. It is concluded that the higher the level of spiritual coping, will lower the level of depression.

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