

A Study to Assess the Stress and Coping Strategies among Women with Chronic Disease at Selected Hospital in Kelambakkam

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BACKGROUND

Background: A sound mind is in a sound body'. A sound body means a healthy body with absence of diseases. A sound mind means a mind capable of doing good, positive and should have a free thinking capacity. Chronic illness poses a significant challenge to successful coping because chronic illness induces stress on an already vulnerable individual. The prevalence of stress among women is 89%. 41.9% of women suffer from depressive disorders and 33% from general mental health problems and dementia because of chronic diseases.

Aim: The aim of the study is to assess the level of stress and coping strategies among women with chronic diseases.

Materials and methods: A pre-test of descriptive design will be used for the study. 30 women with chronic disease will be selected by using Non-Probability convenient sampling. Health Education will be administered after the pre-test.

Results: The stress, coping strategies and quality of life are interconnected. So it is necessary to know and understand the stress level, coping strategies and quality of life of the women. If we understand the stress levels among women with chronic diseases we can plan some preventive, promotive measures for them. We can help them to understand current situation and how she can cope with all future problems by using some coping strategies which in turn will lead to quality life.

Conclusion: The stress, coping strategies and quality of life are interconnected. So it is necessary to know and understand the stress level, coping strategies and quality of life of the women. If we understand the stress levels among women with chronic diseases we can plan some preventive, promotive measures for them. We can help them to understand current situation and how she can cope with all future problems by using some coping strategies which in turn will lead to quality life.

Keywords: stress, coping strategies, chronic diseases

INTRODUCTION

A sound mind is in a sound body'. A sound body means a healthy body with absence of diseases. A sound mind means a mind

capable of doing good, positive and should have a free thinking capacity. The prevalence of stress among women is 89%. 41.9% of women suffer from depressive disorders and

33% from general mental health problems and dementia because of chronic diseases.

In today's scenario women are multi tasking. They play various roles at home and also at work, thus facing many challenges. In this race of striking a the balance, many women often tend to ignore their own physical and emotional health, personal well-being and fail to give themselves enough attention. Women's health is affected not just by their biology, but also by their social conditions, such as poverty, employment and family responsibilities. (Kotwal & Pal. 2011)^[1]

Woman's role in family and society is an important one. She gives them strength. It is important that she is healthy and free from Stress which eventually leads to Stress free family environment and harmony in the society. The basic requirements of a woman must be met with. Neglecting the woman's health problems will deteriorate her health status.

World Health Organization (2015) reported that the common diseases among women are Anemia, Diabetes, Hypertension, Cancer, Thyroid Disorders, Maternal Problems, and Arthritis, Chronic Kidney Disease and Nutritional deficiencies. Chronic diseases among woman leads to deterioration of her health and she may face further health complications. The widely accepted concept of health according to World Health Organization, it is a complete state of physical, mental and social, spiritual, sexual health and it is not just that there is no disease of infirmity. The mental and social health is very important along with physical health. Mental health is influenced by biological, emotional and social factors and these lead to physical symptoms. Any alteration in all these aspects leads to physical and psychological symptoms.^[2]

World Health Organization and National Health compiled survey (2011-14) shows prevalence of chronic diseases which includes 2% cancer, diabetes mellitus 4%, asthma 10%, chronic mental conditions 11%, arthritis 15% and disorders of the circulatory system 16%.

It was also reported that 80% of the cases were heart disease, paralysis, diabetes and 40% cancer which can be prevented.^[3]

Cancer fact sheets (2011) reported that new cases of breast cancer were 124.5, and death because of breast cancer was 22.6 per 100,000 women per year. Renal, urinary tract disorders leads to approximately 8, 50,000 deaths per year. Chronic renal disease is the 12th leading cause of death and 17th leading cause of disability in the world. As per the reports of United States health agencies from two year 2010-2012, it has been reported that 52.5% million adult males and females suffering diseases like arthritis, rheumatoid arthritis, gout or lupus. This report also shows approximately one out of five suffer from arthritis.^[4]

Ardiel & Pale (2005)^[5] and **Sorensen & Lackmann (1994)**^[6] conducted a study on 13 immigrant women, living with chronic diseases to assess quality of life, coping strategies showed that complications of diseases had an adverse effect on the quality of life.

As per above prevalence of chronic diseases showed that women suffer from many health problems because of chronic diseases. It is very difficult and Stressful for woman living with chronic diseases; many times she neglects her health by not going for a regular checkup and by discontinuing her treatment. The important factors which add to it are that, those no support from the society, family members, and inadequate finances. She may use positive or negative Coping Strategies while trying to cope with chronic diseases. Surviving with these chronic diseases leads to disturbed Quality of Life. These condition takes a toll on her life and she may overcome them or then deteriorate under its burden which is a result of the Coping Strategies used.

MATERIALS AND METHODS

A quantitative approach was used for this study. The research design adopted for this

study was descriptive survey method. Women with chronic diseases from a selected hospital in Kelambakkam. The sample were women with chronic diseases from a selected hospital in Kelambakkam. The sample size was 30 women with chronic diseases. Non-Probability convenient sampling technique will be used. The data was collected in Chettinad hospital, Kelambakkam for a period of two weeks. Formal written consent was obtained and the objectives of the study was explained to the Medical Officer to get his cooperation during the study. Oral consent was obtained from 30 samples that was selected on the basis of convenient sampling technique. First day 30 samples from inclusion criteria was selected from Female Medical Ward and Female Ortho Ward. Demographic profile of each subject was obtained by using a structured interview schedule. After obtaining written consent, investigators have checked the stress and coping strategies. After the assessment, investigator gave health education regarding stress management and how to improve coping strategies to the samples.

FINDINGS

Based on age 33.3% (n=10) of women were between 30 to 40 years of age, Based on the educational status 43.3% (n=13) of women had done their Primary education and 10% (n=3) of women had done their Secondary education. Based on the occupational status 63.3% (n=19) of women were housewives and 26.7% (n=8) of women were employees in various Private companies. Considering the nature of their work, 23.3% (n=7) of women were Sedentary workers, the remaining 63.3% (n=19) women were Housewives. Based on the marital status 80% (n=24) of women were married, 13.3% (n=4) of women were unmarried. Considering their monthly income, 13.3% (n=4) of women earn less than Rs10,000 per month and 63.3% of women did not have any source of income since they are housewives. Considering their residence 50% (n=15) of women reside in rural area and 50% (n=15) of women reside in urban area. Based on the family type 73.3% (n=22) of women are living in a Nuclear

family and 26.7% (n=8) of women are living in a Joint family. Considering the type of illness 43.3% (n=13) of women are suffering from Renal diseases and 33.3% (n=10) women are suffering from Metabolic diseases. Based on the duration of illness, 16.7% (n=5) of women are suffering from chronic illness less than 1 year, and 23.3% (n=7) of women are suffering from chronic illness for more than 5 years. Considering the monthly expenses, 50% (n=15) of women are spending more than Rs6000 per month for their treatment (Figure. 1 to 5).

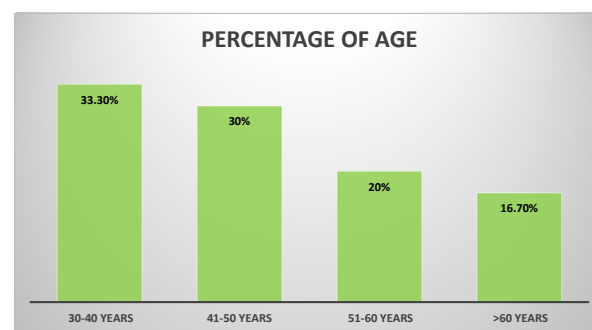


Fig.1: Percentage distribution of sample based on age

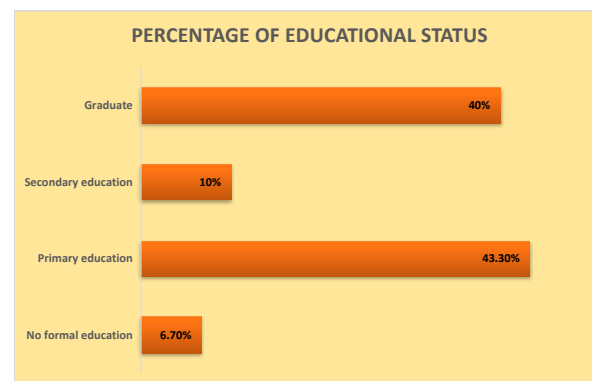


Fig. 2: Percentage distribution of sample based on educational status

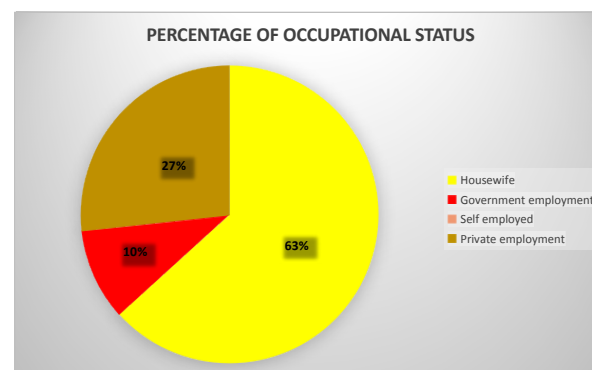


Fig. 3: Percentage distribution of sample based on occupational status

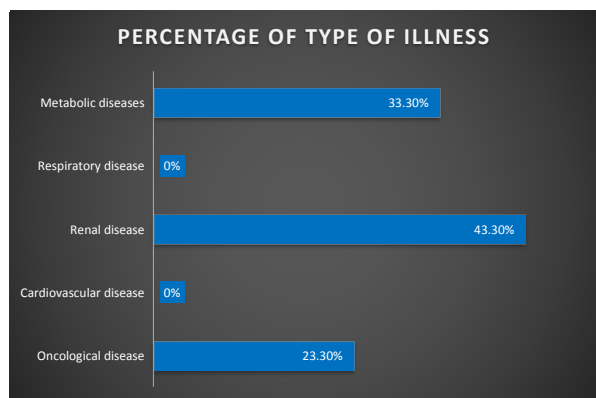


Fig. 4: Percentage distribution of samples based on type of illness

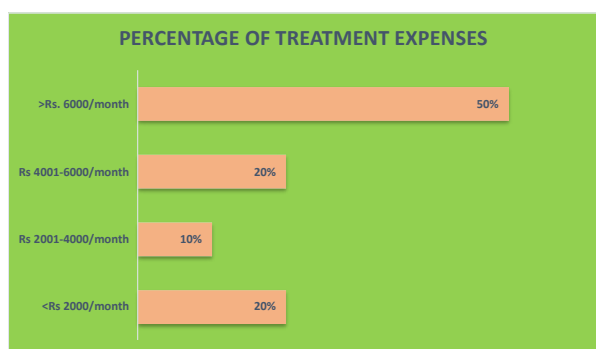


Fig. 5: Percentage distribution of sample based on educational status

ASSOCIATION OF LEVEL OF STRESS WITH DEMOGRAPHIC VARIABLES

The association of the level of stress among women suffering from chronic illness based on their selected socio demographic variables. A significant association was found between the level of stress and the demographic variables including occupational status, nature of work and residence at 5% level of significance ($p < 0.05$) and no significant association was found between the remaining demographic variables.

ASSOCIATION OF LEVEL OF COPING WITH DEMOGRAPHIC VARIABLES

The association of the level of coping from stress among women suffering from

chronic illness based on their selected socio demographic variables and no significant association was found between the level of coping and demographic variables.

CONCLUSION

The stress, coping strategies and quality of life are interconnected. So it is necessary to know and understand the stress level, coping strategies and quality of life of the women. If we understand the stress levels among women with chronic diseases we can plan some preventive, promotive measures for them. We can help them to understand current situation and how she can cope with all future problems by using some coping strategies which in turn will lead to quality life.

CONFLICT OF INTEREST- Nil

SOURCE OF FUNDING- Self

ETHICAL CLEARANCE- Chettinad Academy of Research and Education, Institutional Human Ethics Committee on 11.04.2022.

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