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A Study of Mental Health among Patients of HIV/AIDS **Jignesh Sonani Research Scholar**, Shamaldas Arts College, Maharaja Krushnakumarsinhji Bhavnagar University, Bhavnagar. (Gujarat)

ABSTRACT

This study was conducted to investigate the difference in Mental Health among Patients of HIV/AIDS. The main purpose of this research is to increase knowledge of the relationship between HIV/AIDS and mental health and highlight the need for psychosocial support for PLWHA. Total 60 samples of Male and Female HIV/AIDS patients were taken from New Civil Hospital From Surat City. Their Samples were also taken the data was collected with the help of 'Mental Health Inventory' Developed by Dr. A. K. Shreevastav and Dr. Jagdish (1982). The Original Hindi Inventory was translated in Gujarati and Standardized by Bhavna Thummar (2009). The Data was used to obtain the Mental Health measurement of the subjects. The collected data was statistically analyzed with the help of 't' test. The Results show that Mental Health for positive self Evaluation of the Male and Female Patients were significant (t = 2.80). The Mental Health for perception of Reality of the Male and Female Patients were not significant (t = 0.71). The Mental Health for Integration of Personality of the Male and Female Patients were significant (t = 2.90). The Mental Health for Autonomy of the Male and Female Patients were not significant (t = 0.81). The Metal Health for Group – oriented Attitude of the Male and Female Patients were not significant (t = 0.75). The Mental Health for Environmental Mastery of the Male and Female Patients were not significant (t = 1.23) The overall Mental Health of the Male and Female Patients were not significant (t = 1.50).

1 INTRODUCTION

Mental health is as important as physical health in modern times. There is a saying in English that "prevention is better than cure." As the concept of mental health developed later it did not have much importance earlier. But since then the questions of mental health have been given great importance in clinical psychology. When we discuss about any mental disorder, its symptoms, its types, its treatment, our main aim is to maintain mental health through a healthy society. That is why the study of mental health becomes more important. Due to scientific development, convenience and happiness have increased in life. On the other hand, complexity and confusion have also increased due to industrialization, mechanization, specialization, urbanization etc.

HIV stands for human immunodeficiency virus, which is the virus that causes HIV infection. The abbreviation "HIV" can refer to the virus or to HIV infection. AIDS stands for acquired immunodeficiency syndrome. AIDS is the most advanced stage of HIV infection.

HIV attacks and destroys the infection-fighting CD4 cells (CD4 T lymphocyte) of the immune system. The loss of CD4 cells makes it difficult for the body to fight off infections and certain cancers. Without treatment, HIV can gradually destroy the immune system and HIV infection advances to AIDS.

The spread of HIV from person to person is called HIV transmission. HIV is spread only through certain body fluids from a person who has HIV. These body fluids include:

(1) Blood

(2) Semen

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- (3) Pre-seminal fluid
- (4) Vaginal fluids
- (5) Rectal fluids
- (6) Breast milk

The stress associated with living with a serious illness or condition, such as HIV, can affect a person's mental health. People with HIV have a higher chance of developing mood, anxiety, and cognitive disorders. For example, depression is one of the most common mental health conditions faced by people with HIV.

Almost every person faces mental health challenges at some point. Major stresses-like the death of a loved one, divorce, loss of a job, or moving-can have a major impact on mental health. Having a serious illness, like HIV, can be another source of major stress. You may find that a diagnosis of HIV challenges your sense of well-being or complicates existing mental health conditions. Sometimes, there may be difficulty in disclosing your HIV status to your friends and loved ones. That can cause emotional stress and impact your mental health and well-being. HIV and some opportunistic infections can also affect your nervous system and can lead to changes in your behavior.

The issue of mental health is a burning issue of the modern era. If a person wants to be truly happy and successful, he must learn the art of staying healthy. Mentally healthy person can recognize and understand his health condition. Before doing any work, he can distinguish between right and wrong and can predict the future consequences. He constantly feels that he has some place in the world. Many people do not believe in taking care of their health. A sense of their weakness, inferiority, unnecessary worry or fear, indicates a lack of mental health.

According to Lehner and Cube "Mental health is an adjustment to the world and to other persons that maximizes the individual's satisfaction." William Osler has told that: "there is good or bad effect of mental health of individual on almost all illnesses" (Supra - Bhava Thummr- 2007). Successful treatment of disease like HIV/AIDS is based on what is in mind than on the characteristics in the body of patient. As per Freud: "Mental Health means to work with sense of positive ness and love" (Supra Patel-1989). This definition is specific and meaningful. Because, it is very tough to cultivate positive approach for happening of anything in life. Similarly, to work or get it done with love without creating any hesitation is an exclusive sign of healthy mind.

2 METHODOLOGY

(1) Hypothesis

The following things of hypothesis have been formulated for the investigation, here, researcher builds a null hypothesis.

- 1) There is no significant difference in Positive Self Evaluation between Male and Female Patients of HIV/AIDS.
- 2) There is no significant difference in Perception of Reality between Male and Female Patients of HIV/AIDS.
- 3) There is no significant difference in Integration of Personality between Male and Female Patients of HIV/AIDS.
- 4) There is no significant difference in Autonomy between Male and Female Patients of HIV/AIDS.
- 5) There is no significant difference in Group-Oriented Attitude between Male and Female Patients of HIV/AIDS.
- 6) There is no significant difference in Environmental Mastery between Male and Female Patients of HIV/AIDS.





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7) There is no significant difference in Overall Mental Health between Male and Female Patients of HIV/AIDS.

(2) Sample

Total Samples of 60 Male and Female Patients of HIV/AIDS were randomly selected from New Civil Hospital From Surat City. The care was taken that the socio-economic levels of all subjects remain almost the same.

(3) Tools

For collecting the pertinent data, the following tools were used.

(a) Personal Information Schedule

The main purpose of this schedule is to collect certain pertinent data regarding the variables of the study, the various Information such as, type of Gender, Age, Residency Area, Marital Status, and level of education are collected through this schedule.

(b) Mental Health Inventory

The inventory was developed by Dr. A. K. Shreevastav and Dr. Jagdish (1982). to measure the Mental Health. Here is the information about the inventory. The original Hindi inventory was translated in Gujarati and standardized by Bhavna Thummar (2009). This inventory divided in six important areas of Mental Health in this inventory 56 questions. Each question has four options. It is sequence in this Always, Often, Some times and never to get target group has to choose any one option after data collection. It is analyzed and finds the solution.

Reliability

To decide reliability of this inventory by Dr. A. K. Shreevastav and Dr. Jagdish (1982). The reliability of Mental Health Inventory by Split-half method is r = 0.73 (N = 600).

The original Hindi inventory was translated into Gujarati by Bhavna Thummar (2009). They take 100 samples and decide the reliability of this inventory by Split-half method. To know the reliability of Dimensional Mental Health Inventory is r = 0.74.

Validity

To decide validity of this inventory by Dr. A. K. Shreevastav and Dr. Jagdish (1982). The validity of Mental Health Inventory by Construct validity is r = 0.57 (N = 600).

The original Hindi Inventory was translated into Gujarati by Bhavna Thmmar (2009). While translating this inventory help of language exports and interdisplinary subject was taken according to there content in the final Mental Health Inventory prepared not only this but we applied this test on 100 samples. The validity of Mental Health inventory by Construct validity is r = 0.68. We found Correlation Significant.

(4) Procedure

The Mental Health Inventory has six areas (1) Positive Self Evaluation (2) Perception of Reality (3) Integration of Personality (4) Autonomy (5) Group-Oriented Attitude (6) Environmental Mastery. To ask him to tick mark (\checkmark) before the question if they agree with this Mental Health Inventory is to measure the four options, 'Always', 'Often' 'Sometimes' and 'Never'. 56 questions and Positive and Negative is Questions included in the Inventory. Positive is to be Scored 1, 2, 3 and 4. Negative is to be Scored as 4, 3, 2 and 1. The maximum is arrived at 224 and minimum score of 56 in this Inventory. It is interpreted that higher the area of





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value attained, the quantum of Mental Health is less and the lower the area of value attained, the quantum of Mental Health is more.

3 RESULT

Research Review

International Journal ISSN: 2321-4708

't' value of Mental Health among Patients of HIV/AIDS follows as shown below.

Table No - 1

't' value of Mental Health for Positive Self Evaluation between Male and Female Patients of **HIV/AIDS**

Group	Ν	М	SD	df	't' value	Level of Significant
Male	30	27.70	5.90	50	2 80	0.01
Female	30	23.10	2.80	58	2.80	0.01

Table No – 2 't' value of Mental Health for Perception of Reality between Male and Female Patients of HIV/AIDS

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Group	N	М	SD	df	't' value	Level of
Oloup	IN	11/1	3D	ui	t value	Significant
Male	30	19.80	2.31	50	0.71	NC
Female	30	18.79	2.69	58	0.71	N.S.
<u><u> </u></u>						

N.S. = Not Significant

Table No - 3

't' value of Mental Health for Integration of Personality between Male and Female Patients of HIV/AIDS

				•		
Group	Ν	М	SD	df	't' value	Level of Significant
Male	30	21.13	3.38	58	2.00	0.01
Female	30	18.67	3.23	30	2.90	0.01

N.S. = Not Significant

Table No - 4

't' value of Mental Health for Autonomy between Male and Female Patients of HIV/AIDS

Ν	М	SD	df	't' value	Level of Significant
30	15.32	1.59	50	0.91	NC
30	15.82	3.07	38	0.81	N.S.
		30 15.32	30 15.32 1.59	30 15.32 1.59 58	<u>30</u> <u>15.32</u> <u>1.59</u> <u>58</u> <u>0.81</u>

N.S. = Not Significant

Table No - 5

't' value of Mental Health for Group-Oriented Attitude between Male and Female Patients of **HIV/AIDS**

Group	Ν	М	SD	df	't' value	Level of Significant
Male	30	25.35	2.86	58	0.75	NS
Female	30	24.91	3.01	38	0.75	IN. D .



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N.S. = Not Significant

Table No - 6 't' value of Mental Health for Environmental Mastery between Male and Female Patients of HIV/AIDS

				5		
Group	Ν	М	SD	df	't' value	Level of Significant
Male	30	25.94	3.99	58	1.22	N.S.
Female	30	24.62	4.21	38	1.23	IN. S .

N.S. = Not Significant

(4) and a set O and all Mandal Handlik batan an Mala and Famala			Table N	No - 7		
't' value of Overall Mental Health between Male and Female	't' valı	ue of Overall M	ental Health	between Ma	ale and Fema	ale

Group	Ν	М	SD	df	't' value	Level of Significant
Male	30	137.67	15.53	50	1.50	NC
Female	30	144.60	20.07	58	1.50	N.S.

N.S. = Not Significant

4 DISCUSSIONS

The chief aim of the present research was to examine Mental Health among Patients of HIV/AIDS. The derived result shows that out of seven hypotheses, while five hypotheses have been accepted. and two hypotheses not accepted.

The difference of Positive Self-Evaluation of Mental Health between Male and Female Patients is found to be significant. There- fore, the hypothesis is not accepted. Positive self-evaluation is part of daily life, which may differ between male and female patients. Constructive self-evaluation is one's own achievement. This is a personal matter. Each person should do a self-assessment for himself/herself. This self-evaluation construct is different for men and women. So there is a difference.

The difference of Perception of Reality of Mental Health between Male and Female Patients is found to be not significant. Therefore, the hypothesis is accepted. There is no difference in perception of reality between male and female patients. Perhaps, because an individual becomes realistic for resolution of his issues. An individual think about true-false and loss or benefit in each situation. Simultaneously, he tries to find solution of hiss issues by making realistic evaluation of his capability to work by making his aim efforts clear and fixed.

The difference of Integration of Personality of Mental Health between Male and Female Patients is found to be significant. There- fore, the hypothesis is not accepted. There is difference in Integration of Personality between Male and Female Patients. The reason is that personality is dynamic. The Personality is revolutionary. When an individual meet fatal illness, physical and behavioral changes take place in him. That too, when there is illness like HIV/AIDS, the effect of such change take place on his personality.

The difference of Autonomy of Mental Health between Male and Female Patients is found to be not significant, which hypothesis is accepted, there is no difference in Autonomy between Male and Female Patients. Perhaps, the patient being an adult morally, he can become proper guide to himself. Further, there is no difference in autonomy of male and female patient. The reason may also be that the patient possesses strength to behave with proper special reaction in view of external elements working in his position.



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The difference of Group-Oriented Attitude of Mental Health between Male and Female Patients is found to be not significant, which hypothesis is accepted. There is no difference in Group-Oriented Attitude between Male and Female Patients. The constructive attitude group is the best characteristic of mental health. Here, there is no difference in attitude of both patients. Perhaps, there may be a reason behind it that the body, which was working with sufficient quantum earlier, is not working during the illness. Many times, support of others is required to be taken, for which positive attitude towards others also requires to be maintained.

The difference of Environmental Mastery of Mental Health between Male and Female Patients is found to be not significant, which hypothesis is accepted. There is no difference in Environmental Mastery between Male and Female Patients. Perhaps, the patient may have idea that when an illness like HIV/AIDS has caught, the atmosphere will also have to be understood and will also have to be organized, let the said atmosphere may be family, professional, social or friend group. The social philosophy of life; i.e. social feeling, feeling of love is also very important matter.

The difference between overall Mental Health of Male and Female patients is found to be not significant, which hypothesis is accepted. Meaning there by that there is no difference in overall Mental Health between Male and Female Patients. The mental health is not a state of an individual. It is an aim to be attained by individual. The said aim is not attained easily and successfully. Once the said aim is attained, it is also not that the said state will maintain permanently. In dynamic world, an individual should make continuous active efforts to attain organization in his Environment.

5 CONCLUSIONS

- 1) The difference in Positive Self Evaluation between Male and Female Patients of HIV/AIDS was Significant.
- 2) The difference in Perception of Reality between Male and Female Patients of HIV/AIDS was Not Significant.
- 3) The difference in Integration of Personality between Male and Female Patients of HIV/AIDS was Significant.
- 4) The difference in Autonomy between Male and Female Patients of HIV/AIDS was Not Significant.
- 5) The difference in Group-Oriented Attitude between Male and Female Patients of HIV/AIDS was Not Significant.
- 6) The difference in Environmental Mastery between Male and Female Patients of HIV/AIDS was Not Significant.
- 7) The difference in Overall Mental Health between Male and Female Patients of HIV/AIDS was Not Significant.

6 REFERENCES

- **Contractar, B.M. (1998).** 1st Ed, '*Experimental Psychology theory & Statistics*', Viral Publishing, Ahemdabad, p.21.
- **Das, S. and Leibowitz, G. S. (2010)**, 'Mental health needs of people living with HIV/AIDS in India: a literature review', AIDS Care: Psychological and Socio-medical Aspects of AIDS/HIV, Volume 23, Issue 4, pp 417-425.
- Garrett, H.E. (1968). 2nd Ed, 'General Psychology', Eurasia Pabli- shing House, New Delhi, p.505.



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https://www.researchreviewonline.com

Publishing URL: https://www.researchreviewonline.com/issues/volume-10-issue-125-july-2023/RRJ825777

- Kothari, S.S. (2000). 'A Study of Mental Health among Patients of T. B.', 17th Annual Conference Gujarat Psychology Association, Junagadh, p.33.
- Klinkenberg, W. D. (2010), '*Mental disorders and drug abuse in persons living with HIV/AIDS*', AIDS Care: Psychological and Socio-medical Aspects of AIDS/HIV, Volume 16, Issue 1, pp 22-42.
- Lam, P. K. and Wright, K. (2007), 'Social Support and Disclosure as Predictors of Mental Health in HIV-Positive Youth', AIDS Patient Care and STDs, Volume 21, Issue 1.
- Mathur, S.S. (2005). 2nd Ed, '*Health Psychology*', Vinod Pustak Mandir, Agra, pp.46-61.
- Mathur, S.S. (1985). 1st Ed, 'Clinical Psychology', Vinod Pustak Mandir, Agra-2, p.256,497.
- Olley, B. O. (2006). 'Persistence of psychiatric disorders in a cohort of HIV/AIDS patients in South Africa: A 6-month follow-up study', Journal of Psychosomatic Research, Volume 61, Issue 4, pp 479-484
- Parekh, S.C. and Dixit, H. K. (1995). 1st Ed, 'A Statistical Testing In Psychological Researches', Chanmpa Publishing, Junagadh, p.505.
- Patel, M. (1989). 3rd Ed 'Abnormal Psychology', University Book Production, Ahemdabad, pp.324,558.

Patel, S. (2004). 3rd Ed 'Aarogy ni Aaspas', Indian Medical Association Morbi, pp,1-7.

Schreiberm, J. (1951). 'Mental Health Flowers in Democratic Social', Mental Health Bulletin, Jillions Society for Mental Hygiene, pp.1-3.

Shreevastav, A.K. and Jagdish, (1982). 'Mental Health Inventory', Agra, pp.1-9.

- Vicki, S. and Sheldon, C. (1996). 'Social Support and Adjustment To HIV/AIDS: Reconciling Descriptive, Co relational And Intervention Research', Health Psychology, Vol.-15 No-2, pp.135-148.
- Vohra, A. (1999). 1st Ed, 'Manisik Saasthy aur Manahchikitsa', Arya Publishing, Delhi, p.19.