



E-ISSN: 2664-1356  
P-ISSN: 2664-1348  
[www.psychiatricjournal.net](http://www.psychiatricjournal.net)  
IJAPN 2022; 4(2): 105-108  
Received: 10-09-2022  
Accepted: 13-10-2022

**Sanjiv K Haralayya**  
Assistant Professor,  
Department of Psychiatric  
Nursing, Government College  
of Nursing, GIMS, Gadag,  
Karnataka, India

## Corelational study to assess the resilience and quality of life of people living with HIV/AIDS attending art centre at district government hospital, Bagalkot

**Sanjiv K Haralayya**

### Abstract

**Background:** The quality of life was reflected accurately with mood disturbance, social support, physical symptoms, distress; self perceived mode of HIV transmission and measure source of financial support. The Resilience and Quality of Life of People are closely related. If one is affected definitely other will also be affected. As per the previous research Resilience plays an important role improving the Quality of Life of People with HIV/AIDS.

**Objectives:** To assess the Resilience of People living with HIV/AIDS, to assess the Quality of Life of People living with HIV/AIDS and to find the correlation between the Resilience and Quality of Life of People Living with HIV/AIDS.

**Methodology:** A quantitative approach with Descriptive co-relational design was adopted for the study. The samples from the district hospital Bagalkot were selected using purposive sampling technique. The sample consisted of 100 patients living with HIV/AIDS. The tools used for data collection was structured Resilience scale and structured quality of life scale.

**Results:** The study result reveal that, the most of People living With HIV/AIDS (66%) had moderately Resilience, 28 percent of them had High Resilience, 4 percent of them had Low Resilience, 2 percent they had very high Resilience and no patients had very low Resilience. Majority of People (53%) had very high Quality of life, 40% of them had High Quality of life, 7% of them had moderate Quality of life, and no patients had Low and very low Quality of life. The correlation between resilience score and quality life score found only significant at environmental domain.

**Conclusion:** There is a need for the individual, social and family support for the patients support for the patients living with HIV/AIDS to improve their resilience and quality of life.

**Keywords:** Resilience, quality of life, HIV/AIDS, co-relation, art center

### Introduction

With an alarming increase of Acquired Immune Deficiency Syndrome (AIDS) is a fatal illness which leaves the victim vulnerable to lot of life threatening opportunistic infections disorder, or unusual malignancies in developing countries. Living with HIV/AIDS not only hampers physical health but also mental and social well-being. It is not simply a virus that causes diseases, but also a social and historical event that impacts how others react towards people living with HIV/AIDS. Unless a cure is found or life prolonging therapy can be made widely available, majority of people living with HIV/AIDS will suffer with the diseases, with serious impact on quality of life <sup>[1]</sup>.

Living with HIV can impact upon many of the factors that affect quality of life and resilience, not only physical health, but also mental and social well being. After all, HIV is not simply a virus that causes diseases, but also a social and historical event that impacts how others react towards us. Issues including personal safety and human rights as well as other aspects of the political and social infrastructure can radically affect quality of life <sup>[2]</sup>.

Children are innocent victim of HIV/AIDS. It is fatal illness and pandemic diseases with large number of infected children throughout the world. Approximately 0.8 million children below 15 years of age are infected as estimated by WHO. It compresses 15 to 20% of all cases of HIV in world <sup>[3]</sup>.

- Number of children under 15 years living with HIV in 2006-2.3 million.
- AIDS death in 2006 among children 15 years about 3,80,000.
- 2011- is about 2.7 million cases are found in world among that 0.87 million cases are contributed to world by India only <sup>[4]</sup>.

**Corresponding Author:**  
**Sanjiv K Haralayya**  
Assistant Professor,  
Department of Psychiatric  
Nursing, Government College  
of Nursing, GIMS, Gadag,  
Karnataka, India

The quality of life was reflected accurately with mood disturbance, social support, physical symptoms, distress; self perceived mode of HIV transmission and measure source of financial support. With this idea, the study was taken up in this part of district. This study aims to find out the correlation between resilience and quality of life in patients living with HIV/AIDS pertaining to their socio-demographic variables [5].

In Karnataka, the prevalence rates around 34,000 new cases of HIV were registered at various ART centres across Karnataka in 2012-13. And going by the Karnataka State Aids Prevention Society (KSAPS), there are about 2.2 lakh people living with HIV (PLHIV) in the state. Most HIV cases are being reported from Bijapur, Belgaum, Bagalkot, Gulbarga and Bangalore. In Bagalkot there are 34,206 people living with HIV (PLHIV), This record shows that Bagalkot stands in first place for high prevalence of HIV/AIDS [3].

The quality of life was reflected accurately with mood disturbance, social support, physical symptoms, distress; self perceived mode of HIV transmission and measure source of financial support. With this idea, the study was taken up in this part of district. This study aims to find out the resilience and quality of life in people living with HIV/AIDS pertaining to their socio-demographic variables [6].

The Resilience and Quality of Life of People are closely related. If one is affected definitely other will also be affected. As per the previous research Resilience plays an important role improving the Quality of Life of People with HIV/AIDS. Thus investigator has planned to undertake this study to find out the Correlation between Resilience and Quality of Life of People Living with HIV/AIDS attending ART centre at District Government Hospital, Bagalkot,

### Objectives

1. To assess the Resilience of People living with HIV/AIDS.
2. To assess the Quality of Life of People living with HIV/AIDS.
3. To find the correlation between the Resilience and Quality of Life of People Living with HIV/AIDS.
4. To find out the association between the Resilience scores of People Living with HIV/AIDS and their selected Socio- Demographic variables
5. To find out the association between the Quality of Life scores of People Living with HIV/AIDS and their selected Socio Demographic variables.

### Hypothesis

- H<sub>1</sub>:** There will be a Positive Correlation between Resilience and Quality of Life of People with HIV/AIDS.
- H<sub>2</sub>:** There will be significant association between Resilience of People Living with HIV/AIDS and their selected Socio-Demographical characteristics
- H<sub>3</sub>:** There will be significant association between Quality of Life of People Living with HIV/AIDS and their selected Socio-Demographical characteristics

### Methodology

Research Approach: Quantitative Research Approach  
Research Design: Descriptive Correlation Survey design

Sampling technique: Non-Probability; Purposive Sampling Technique

Sample size: 100

Setting of study: District hospital, Bagalkot

Method of data collection: Interview Technique

### Tools used

**Part I:** Socio-demographic variables of Participants

**Part-II:** It consists of 30 items dispositional Resilience scale to assess the Resilience among people living with HIV/AIDS.

**Part-III:** It consists of 26 items of WHO Brief scale to assess the Quality of life among people living with HIV/AIDS.

### Procedure of data collection

Data collection is gathering information needed to address the research problem. Prior to actual data collection, the investigator obtained permission from District surgeon of ART centre at District Government Hospital, Bagalkot. The main study was conducted among 100 people who are selected by purposive sampling technique.

### Results

#### The findings related to socio-demographic variables of participants

- Age groups reveals that majority of subjects (19%) of them were belong to the age group of 35-40 years and least (14%) are belongs to 40-45 years.
- Participants gender reveals that majority subject 51 (51%) were female.
- Percentage wise distribution of people living with HIV/AIDS according to Religion reveals that majority of subjects, 54 (54%) of the subjects were Hindu.
- Distribution of people living with HIV/AIDS according education status that reveals majority of subjects were belonging to, 61% (61) of were have Non formal education.
- Percentage wise distribution of people living with HIV/AIDS according to occupation reveals that majority of subjects, 33(33%) of the subject were occupation was Labour workers.
- Percentage wise distribution of people living with HIV/AIDS according to marital status reveals that majority of subjects 27 (27%) of the subject were Divorced.
- Distribution of people living with HIV/AIDS according to income reveals that majority of subjects, 67 (67%) of the subject were income between 5000 and below.
- Percentage wise distribution of people living with HIV/AIDS according to type of Family reveals that majority of subjects, 48 (48%) of the subjects were Nuclear family.
- Distribution of people living with HIV/AIDS according area of residence that majority of subjects, 54 (54%) of the subject were registered to ART from rural areas.
- Distribution of people living with HIV/AIDS according to Number of years with HIV / AIDS in family, that majority of subjects, 35(35%) of were above 5 years and 29 (29%) of them were 3-5 years.
- Percentage wise distribution of people living with HIV/AIDS according to Number of years on ART, that majority of subjects, 35(35%) of were above 5 years.

- Distribution of people living with HIV/AIDS according family support system that reveals majority of subjects, 38 (38%) of the subject were have parents support.

## Part-II: Assessment of Resilience of People living With HIV/AIDS.

### Section-A: Assessment the levels Resilience among people living With HIV/AIDS Table-1

**Table 1:** Levels of Resilience among people living with HIV/AIDS n=100

Levels of parental expectation	Range of Score	No of score	Percentage
Very high Resilience	73 to 90	2	2%
high Resilience	55 to 72	28	28%
Moderate Resilience	37 to 54	66	66%
low Resilience	19 to 36	4	4%
Very low Resilience	0 to 18	00	00%

Assessment of levels of Resilience among People living With HIV/AIDS expand reveals that, the most of People living With HIV/AIDS (66%) had moderately Resilience, 28 percent of them had High Resilience, 4 percent of them had Low Resilience, 2 percent them had very high Resilience and no patients had very low Resilience.

### Section-B: Mean, SD and mean percentage of Resilience scores among People living With HIV/AIDS.

**Table 2:** Mean, SD and mean percentage of Resilience score n = 100

Area	Maximum score	Mean	SD	Mean %
Resilience scores among People living With HIV/AIDS	90	50.71	8.45	56.34%

The mean, SD and mean percentage of Resilience illustrate that, the total mean percentage of Resilience scores among people living with HIV/AIDS was 56.34% with mean and SD 50.71±8.45.(Table-5.2)

## Part-III: Assessment of Quality of life People living With HIV/AIDS

### Section A: Assessment of levels of Quality of life people living With HIV/AIDS

Categorization of the people living With HIV/AIDS on the basis of the level of Quality of life was done as follows: scores 1- 26 very low Quality of life, scores 27-52 low Quality of life, scores 53-78 moderate Quality of life, and scores 79-104 High Quality of life, scores 105-130 Very High Quality of life.

**Table 3:** Levels of Quality of life people living With HIV/AIDS n=100

Level of stress	Range of score	No of Score	Percentage
Very high QOL	105 to 130	53	53%
High QOL	79 to 104	40	40%
Moderate QOL	53 to 78	7	7%
Low QOL	27 to 52	00	00%
Very low QOL	1 to 26	00	00%

Assessment of levels of Quality of life among HIV/AIDS reveals that, majority of People (53%) had very high Quality of life, 40% of Them had High Quality of life, 7% of them had moderate Quality of life, and no patients had Low and very low Quality of life.

### Section B: Mean, SD and mean percentage of Quality of life scores among people living With HIV/AIDS.

**Table 4:** Mean, SD and mean percentage of total Quality of life scores n = 100

Area	Maximum score	Mean	SD	Mean %
Quality of life scores among people living With HIV/AIDS	130	50.71	14.14	78.4%

The mean, SD and mean percentage of Total Quality of life scores illustrate that, the total mean percentage of Quality of life among people living with HIV/AIDS was 78.4% with mean and SD 50.71±14.14.(Table-5.4)

### Section C: Domain wise mean, SD and mean percentage of Quality of life scores of People living With HIV/AIDS

**Table 5:** Domain wise mean, SD and mean percentage of Quality of life score n= 100

Domains of Quality of life	Maximum Score	Mean	S. D	Mean percentage
Overall Quality of life	10	77.3	2.84	77.8%
Physical health	35	28.32	4.4	80.91%
psychological Domain	30	22.23	2.90	74.1%
Social Relationship	15	12.17	2.14	81.13%
Environmental	40	31.47	5.5	78.67%

The Domain wise mean, SD and mean percentage of Quality of life scores of People living with HIV/AIDS reveals that. In the Domain of overall Quality of life, mean percentage was 77.8 percent with mean and SD 77.3 ±2.84. for physical health Domain mean percentage was 80.91 percent with mean and SD of 28.3±4.4. For physiological Domain the mean percentage was 74.1 percent with mean and SD of 22.23±2.90, For the social relationship Domain, mean percentage was 81.13 percent with mean and SD 12.7±12.14 of and Environmental Domain mean percentage was 78.67% and SD with 31.47±5.5 (Table-5.5)

### Part IV: Correlation between Resilience and Quality of life of People living with HIV/AIDS

Correlation between Resilience and quality of life scores of people living with HIV/AIDS was computed using Spearman Rank order correlation co-efficient (rs).

**Table 6:** Spearman Rank order correlation co-efficient to assess the correlation between the Resilience and Quality of life people living with HIV/AIDS. n=100

Domains of quality of life.	Spearman Rank order correlation co-efficient between the Resilience and Domain wise Quality of life scores	Level of significant
Overall quality of life Domain	0.0144	P=0.89 $p>0.05$ NS
Physical Health Domain	0.1947	P=0.53 $p>0.5$ NS
Psychological Domain	0.1753	P=0.08 $p>0.05$ NS
Social Relationship Domain	0.17	P=0.09 $p>0.05$ NS
Environmental Domain	0.1753	P=0.047 $p<0.05$ S
Total	0.229	P=0.022 $p>0.05$ NS

NS=Not significant

S=significant

**Part-VI: Association of the Resilience scores with their selected socio-demographic variables**

The findings regarding association of the Resilience of people living with HIV/AIDS and with their selected socio-demographic variables shows that, there is a significant association between the Resilience and Number of years on ART of people ( $\chi^2=10.56$ ;  $p<0.05$ ) and there was no significant association found between the Resilience scores with their other socio-demographic variables.

The association between Quality of life scores Of People living with HIV/AIDS, with their selected socio-demographic variables illustrates that, there is a significance association between the Quality of life and their socio-demographic variables like Number of years with HIV/AIDS ( $\chi^2=12.61$ ;  $p<0.05$ ), Number of years on ART ( $\chi^2=11.32$ ;  $p<0.05$ ).

**Conclusion**

There is a need for the individual, social and family support for the patients support for the patients living with HIV/AIDS to improve their resilience and quality of life.

**Conflict of Interest**

Not available

**Financial Support**

Not available

**References**

1. Unaid. Unaid report on the global AIDS epidemic; c2015.
2. Global HIV and AIDS statistics. Avert. Available from: <https://www.avert.org/global-hiv-and-aids-statistics>.
3. Bennett P. Abnormal and Clinical Psychology an Introductory Text Book. 3<sup>rd</sup> ed. Two Penn Plaza, New York USA: McGraw Open University Press; c2011.
4. Sheridan CL, Radmacher SA. Health Psychology Challenging the Biomedical Model. New York USA: John Wiley and Sons, Inc.; c1992.

5. Bumb SS, Dodamani A. Stress, Anxiety, and Depression among Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome Patients. Int. J Sci. Stud. 2019;6(12):79-84.
6. Stall R, Mills CT, Williams J, Hart T, Greenwood G, Paul J, *et al.* Association of Co-occurring psychosocial health problems and increased vulnerability to HIV/AIDS among urban men who have sex with men. Am J Public Health. 2003;93:939-42.

**How to Cite This Article**

Haralayya SK. Correlational study to assess the resilience and quality of life of people living with HIV/AIDS attending art centre at district government hospital, Bagalkot. International Journal of Advanced Psychiatric Nursing. 2022;4(2):105-108.

**Creative Commons (CC) License**

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0) License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.