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Compare styles for encounter to stress, life expectancy and scale of hardness in patients stricken to AIDS and MS

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ABSTRACT

The aim of this research is to compare styles encounter to stress, Life Expectancy and scale of hardness in patients Stricken to AIDS and MS. The method is practical- comparative type. The society consists of all patients Stricken to aids and MS who refereed in order to receive specialty treatment to Imam Khomeini Hospital and Sina Hospital in Tehran. From said society, a sample with volume 100 people (50 patients Stricken to AIDS and 50 patients Stricken to MS) were selected by sampling and have been evaluated by Cobasa and Maddi Personal Insight questionnaire and Schneider scale of hope 1991, style encounter with stress of Endler and Parker 1990. Then, data collected have been analyzed by descriptive methods and SPSS software. The results of research showed that there is significant difference between two groups of patients Stricken to AIDS and MS from style of encounter point of view with stress, as if patients Stricken to AIDS use more avoidance styles and patients Stricken to MS use more encounter styles. Also, there was significant difference between two groups from Life Expectancy as if patients Stricken to AIDS use more avoidance style and patients Stricken to MS use more emotional style. Also, there was significant difference from Life Expectancy. In other word, scale of Life Expectancy was more in MS group to AIDS. In addition to, there was difference from hardness point of view. In other word, scale of hardness is more than MS to AIDS.

Keywords: Encounter Styles to Stress, Life Expectancy, Scale of Hardness, AIDS, MS.

INTRODUCTION

AIDS is mortal disease which its virus cause weakens and losing immune system of body against other diseases and the patient is endangered. (Manahan and et al, 2007) according to report of Center of America Diseases Control at 2005, 33 states reported AIDS and virus for violation of immunity system and around world, 8000 people that means each 10s, 1 person is died because of it daily. (Atashzadeh Shorideh et al, 2007). The second factor of mortality in persons who are between 25-44 is infection with virus and AIDS (Black and Hawks, 2005). In Iran, the persons who Stricken to AIDS virus were 12556 people till 2005 that share of exposing from injection was 62/3% and 279% is not recognized. (Gholamzadeh and Pasyar, 2006) optional destruction in central nervous system is symbol of Multiple Sclerosis. New environmental nervous system is remained as fresh and some of patients don't show witness from systematic disease, epidemiology of Multiple Sclerosis (MS) is 2 than women at men. Age of commencing is between 20 and 40 years (Fauci and et al, 2008). Mental pressure not only makes vulnerable body against disease but also damage immune system (Castillo, 2012). The patients lose their social and economical support after expose to MS gradually and these factors cause stress. (Kurt and et al, 2002). Stress is public experience in life of all humans (Varcariolis, 2002), thus, current years, source of stress and style for encounter was so considered and it was recognized that to apply encounter styles play vital role in reduction of stress. (Frouzandeh

and Delaram, 2003), encounter styles are continued effort in order to compare of persons with imbalance situation. In the case of using encounter styles, the emotions are mediated and stress is removed (Zupiria and et al, 2007), effective encounter styles reduce negative effects of stress and increase ability for environmental stressors management. Whereas, ineffective encounter styles increase negative effects due to stress. Effective encounter is important resource for having good feeling and mental compatibility in stress situation and influence on mental and physical health (Dyrbye and et al, 2005). There are different classifications for encounter styles like encounter styles based on problem, emotion and avoidance. (Lin and Chen, 2010) effective encounter styles consist of methods for solving problems and confront with it. Encounter styles based on emotion and avoidance are more active to base on problem and are efforts which are done by person in order to keep him against defeating and surge in tension. Thus, these styles are ineffective (Tavamoli and et al, 2004). Kobayasa (1988) defined hardness as combination of beliefs about self and his world which consist of defiance, commitment and control. Person who has high commitment, believes on importance of problem and mean of self and his activity and he is able to find mean for everything and surge in his interest and regards this situation as the best method for reaching to educational aims. This insight causes the student evaluates graduation period as the most important period and devotes much time to it. Maddi and Kobasa in research on hard people found that these persons are so resistance against mental pressure and don't damage under stress pressures but ascertain it and regard these situations as necessary. (Kobasa and Medi, 1999). Cobasa, Maddi and Khansuggested personality pattern for determination of problem and maintain their health (Cobasa, Maddi, Khan, 1982). Coping with life events caused person feels efficiency and act on tension situations. The person's lack these specifications are involved in stress and results of some of researchers certified that hardness plays role in reduction of expose to disease (Shepperd and Kashani, 1991) Schneider 2001 as founder of Life Expectancy and treatment based on it believed that hope consists of two concepts like ability for design roads into suitable aims regardless barriers or motivation for using it. Crisis due to diseases causes imbalance and incardination of thought, body and mental. But the more manners are for despaired and hopeless. (Soekenand Carson, 1987). From other probable reactions is depression. It is possible to happen immediately after disease or after that. Depression is so dangerous for patients because needs submission in disease. Depressed men don't try for to be living and lose remaining opportunities of life (Dimateo and Robin, 2008), as for above contents, the researcher is responding to relation between patients Stricken to AIDS and Ms from encounter style to stress, Life Expectancy and hardness?

MATERIALS AND METHODS

The method of present research is practical- comparative one. This method is named after occurrence often because it points to cases in which the reason has happened previously and its study is done as for effect on another variable. The society consists of all patients Stricken to AIDS and MS who refereed to Imam Khomeini and Sina Hospital in order to receive specialty treatment in Tehran. From said society, a sample with 100 people (50 patients Stricken to AIDS and 50 people Stricken to MS) has been selected as randomly and evaluated Schneider Life Expectancy questionnaire 1991, Cobasa and Maddi Personal insight questionnaire 1986 and encounter with stress questionnaire of Endler and Parker 1990. Then, data have been analyzed by descriptive method and SPSS software. It is necessary to say after obtaining necessary permissions and recognize members and coordinate with authorized, based on previous programming, the researcher offered necessary explanations after attendance in suitable place and reduce sensitivity of testable about questionnaire and they completed the questionnaire. The clients have been explaining more descriptions in the case of completing questionnaire and at last, their cooperation has been appreciated.

Measurements

Schneider Hop to life: it is scale with 12 questions which designed by Schneider (1991, narrated by Schneider and Peterson 2000) for persons who older than 15 years and consist of two micro scales like road and stimulation and its duration is 2 to 5 minutes. In order to respond each question, answers from 1 (false) to 4(true) is considered. Questions 3, 5, 7, 11 are not marked and pertain to dizziness. Questions 1, 4, 6 and 8 are pertaining to road and questions 2, 9, 10, and 12 are pertaining to stimulation. Point of Life Expectancy is summation of two micro scales. Thus, sum of points can be between 8 and 32. In research has been performed by Golzari 2007 on 660 girls students in Tehran, validity of Schneider hop to life scale has been discussed by internal method and Alpha Kronbach coefficient was 0/89. Life Expectancy scale has high correlative to similar psychological process. For example, points of this scale has negative correlation with depression questionnaire of Beck (-0/42 to -0/51), in addition to, based on clinical psychologists, its validity is certified by credit of the contents.

Personal insight Questionnaire: for estimate hardness, personal insight questionnaire is used. This scale was made by Kobasa 1986 narrated by Ghorbani 1994 and consists of 50 articles with three micro scales like commitment, control and defiance and devoted 16, 17 and 17 articles. Ghorbani 1994 on introductory study upon 110 Iranian women estimated its validity as 0/74 for scales and 0/70 for commitment upon 50 articles. The validity estimation was 0/65 and 0/68 for defiance and control. Besharat 1998 obtained Alpha coefficient from 0/88 to 0/93 for

commitment and from 0/85 to 0/94 for control, from 0/89 to 0/95 for defiance and from 0/78 to 0/94 for hardness which has good conformity to scale. Correlative coefficient is 0/82 to 0/90 between two or four weeks for commitment, from 0/80 to 0/88 for control, from 0/79 to 0/87 for defiance and from 0/80 to 0/88 for hardness which show good conformity. (Besharat, 1998)

Endler and Parker encounter styles to stress questionnaire: this questionnaire was offered by Endler and Parker at 1990 which have two forms for adults and youth and consisted of 48 articles. These articles have three behavioral fields like confront based on problem, emotion and avoidance. The respondents recognized each question with 5 options as multiple (1 at all, 5 forever). These tests are performed as group and personal. In this research, the test is performed as group. Averagely, necessary time for responding to test is 10 minutes and natural point's domain is between 16-80 (Endler and Parker, 1990). In study by Bahrami, 1996, Kronbach Alpha Coefficient is 0/82 for problem, 0/76 for emotion and 0/82 for avoidance. Also, correlation coefficient for problem is 0/58 and for emotion 0/55 and avoidance 0/83. (Bahrami, 1996).

RESULTS

Table 1; compare averages and deviance for encounter styles in patients Stricken to AIDS and MS

Group	Stricken to AIDS, average and Deviance	Stricken to MS average and Deviance	Significant Level
Confront styles			
Confront based on problem	17/11+-9/55	16/89+-9/52	0/489
Confront based on emotion	33/03+-15/13	56/42+-19/72	0/001
Confront based on avoidance	51/16+-18/08	33/21+-15/11	0/001

The results of above table show that there is not significant difference between average of patients Stricken to AIDS and MS but there is significant difference between stress based on emotion and avoidance as if patients who Stricken to AIDS use avoidance style more (51/16) and patients Stricken MS use emotion more (56/42)

Table 2; compare average and deviance of Life Expectancy in patients Stricken to AIDS and MS

Group/ variable	Patients Stricken AIDS Average and deviance	Patients Stricken to MS Average and deviance	Significant level
Life Expectancy	14/89+-210	25/18+-5/13	0/001

Results derived from table 2 showed that there is significant difference between AIDS and MS group from Life Expectancy. In other word, scale of Life Expectancy is more than in MS (25/18) compared AIDS (14/89).

Table3, compare average and deviance of hardness in patients Stricken to AIDS, MS

Group/ hardness	Patients Stricken to AIDS	Patients Stricken to MS	Significant level
Hardness	55/1+-15/11	76/15+-17/03	0/001

Results obtained from table 2 show that there is significant difference between AIDS, MS groups from hardness, in other word, scale of hardness is 76/15 in MS and more than 55/01 in AIDS group.

CONCLUSION

As for results in table 1, there is significant difference between patients Stricken to AIDS and MS from encounter styles to stress, as if, patients Stricken to AIDS use avoidance styles more and patients Stricken to MS use emotional styles more. There is significant difference between ineffective styles which are based on emotion and avoidance and cognitive symbols like emotional, behavioral and bodily. So that more use of styles, severity of cognitive, emotional and bodily styles increase. The persons, who use ineffective coping strategies like based on emotion and avoidance, not only reduce it but increase it. Thus, there is significant negative difference between cognitive styles and stress behavior. That means, by using encounter styles based on problem, scale of cognitive styles and stress behavior is reduced. Then, use of effective encounter styles helps person in coping with stress motivator. Folkman and Lazarus 1984 cite that if persons control stressors, use more encounter based on problem so that this method can be signified and encounter based on problem can be used about stressors for work place and social performance and concentration on more emotion about health stressors and temperament (anxiety and depression). As for results in table 2, there is significant difference between patients Stricken AIDS, MS from Life Expectancy. In other side, scale of Life Expectancy is more than in MS compared AIDS. The patients who have hopeful spirit learn the methods rapidly and can act as support resource and informing for other patients. Of course, in some cases, the patients fear from their avoidance behaviors. Thus, they use encounterskills like solving problem and looking for

suitable strategies little. Jackson, Vise and Landcuist 2003 concluded that hope has direct relation with compatibility performance like cognitive, bodily health and solving problems.

As for results in table 3, there is significant difference between patients Stricken AIDS, MS from hardness point of view. In other word, scale of hardness is more than in MS to AIDS. A person with hardness specification decided to live and because of it, hope to live at home, workplace or enjoying. The wish for living is emerged from it and special reasons for its existence. He has aims to be peaceful in order to reach it but after decision to life and finding its reason, determine manner of his life. He wants cope with problems simplicity, live well and be peaceful and because of his optimism insight about life and personality, it is anticipated that the events are toward him. He anticipates success because he ensures about his success and regards himself as determination of his fate and he sees this power which can happen in his life and doesn't regard him as victim of loneliness and he is immune from depression and stress. In fact, hardness makes internal insight which influences on encounter styles with different problems. Defiance is able to consider unsuitable accidents in terms of possibility for learning not threat for immunity and all aspects can prevent from it and shorten negative stress events. Zhangresearch 2010 shows that personality specifications like opening, subjectivism, compatibility and to be with nature have positive relation with hardness and painful has negative relation with hardness.

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