

Research Paper

Health locus of control and resilience among middle aged people

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ABSTRACT

Studies exploring self and health belief systems are one of the keys to understanding the challenges related to the development, welfare and proper functioning of people. There exists a need for creating interventions to enhance mental, physical and emotional health status of middle-aged people, as they are more prone to have health related problems. Accordingly, this study compared resilience and health locus of control variables among 100 middle aged people, who were having some kind of health issues. The study consisted of participants in which 50 were male and 50 were female. The sample was taken from Palakkad district, Kerala. The study variables were assessed using the Multidimensional Health Locus of Control scale (Wallston et al., 1978) and Resilience scale (Wagnild & Young, 1993). Correlation of health locus of control subscales and resilience were conducted. The effect of gender among resilience and health locus of control variables were analyzed. From the results, relationship between resilience and internal health locus of control were statistically significant. Effect of gender was found to be making no influence on the resilience and internal health locus of control scores.

Keywords: *Internal Health Locus of Control, Chance Health Locus of Control, Resilience.*

People often forget to make their health and well-being a priority in life. Due to aging, people are more prone to health problems. Practicing health behaviors can have profound effects in one's life. The degree to which people feel capable of enduring and thriving under stressful conditions, can contribute to a greater understanding of life-enhancing competencies. Positive emotions have a connection with a better immune function efficiency and physical health. Amid large scale changes, people should be able to sustain their physical, mental and social health. We have seen people coming back to life even after doctors claimed that the scope of them living is shallow. This is one of the examples which show the importance of self-confidence, willpower etc. The medicines or medical treatments itself are not enough for a person to get well and to live a healthy satisfactory life. Belief system of a person always plays an important role in their life. The placebo effect is another example showing the importance of a person's belief. Placebo effect shows that some people benefit after the administration of an inactive substance or treatment. It represents the psychological aspect of every treatment.

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World Health Organization (1948) defined health as “a complete state of physical, mental and social well being and not merely the absence of disease or infirmity”. Health behaviors are behaviors undertaken by people to enhance or maintain their health. Health locus of control refers to locus of control specifically related to health behaviors (Wallston & Wallston, 1982). Health locus of control is the degree to which people believe that they themselves, powerful others or chance influence their health and sickness (Wallston et al., 1978; Taylor, 1999). People with internal health locus of control believe that they have a control over their own health. People with chance health locus of control believe that their health outcomes are the result of other’s actions, other people, chance, luck and fate. Literature indicates that internals are more likely to engage in wide range of health enhancing behaviors than those that believe in chance or social influence on health (Pitts & Phillips, 1998; Blaxter, 1990). Internals are more likely to have more coping efficacy and a healthy lifestyle. Rotter describes the external locus of control as ‘the degree to which persons expect that the reinforcement or outcome is a function of chance, luck or fate, is under the control of powerful others, or is simply unpredictable’. People with internal health locus of control take the responsibility of any event happening in their life. They are most likely to be more success oriented and self-motivated. People with chance health locus of control believe that events in their life are controlled by some others. They are most likely to be passive and accepting.

Resilience incorporates a vision of healthy individuals and flourishing communities for an enduring period of time even in the face of adversities. Resilience has been viewed as the process of and capacity for adapting successfully to challenging or threatening circumstances (Masten et al., 1990). It is an ability to recover, bounce back or adjust after a potentially traumatic event. A meaningful life is expressed in people’s goals and ambitions that, in turn, direct their energy into their future. Some traumatic experiences can make a person’s goals and ambitions shatter, after that they may even perceive their life as meaningless. Under such conditions people should be able to motivate themselves to restore a sense of meaning, direction and purpose to their lives. Sometimes such distressing conditions may present opportunities for their personal growth, as people develop and commit themselves to new goals and purposes that recreate their sense of meaning and direction. These goals involve big questions concerning what makes life meaningful and what are their life purposes. So the same negative conditions that shatter people’s basic assumptions may also provide them with opportunities for positive growth as they find life-renewing purposes. Resilience is enabled by emotional control, strong relationships, self-efficacy, self-acceptance, goal setting, persistence, perspective, humor, curiosity and flexibility. Lack of internal resilience factors has been consistently identified as a precursor to maladaptive behaviors that compromise adolescents’ health and overall well-being (Rew & Horner, 2003; Everall et al., 2006).

People should be aware of the fact that they have a personal responsibility for maintaining their own health and disease prevention. Resilience factors have always contributed for the overall well being of a person. Because of aging, middle aged people become more prone to health problems. Understanding their health locus of control can be helpful for providing them with timely interventions. A person suffering from physiological difficulties having an internal locus of control is more likely to be optimistic and resilient. And they are more likely to participate in health promoting behaviors.

REVIEW OF LITERATURE

Shehu and Mokgwathi (2008) conducted a study on the topic “Health locus of control and internal resilience factors among adolescents in Botswana: A case control study with implications for physical education”. This case study compared internal resilience factors and health locus of control among 1700 physical education and non-physical education students in the central regions of Botswana. The study variables were assessed using the Multidimensional Health Locus of control scale (Wallston et al., 1978) and a modified version of the Resilience scale (Wagnild & Young, 1993) 78% of the resilience scores were well within the moderate range, females across the comparison groups had significantly higher resilience scores than males. On the Multidimension Health Locus of control subscales, physical education students were significantly more likely than the referents to believe that their health is controlled by powerful others. Relationships among resilience and health locus of control scores were statistically significant.

Macik et al., (2017) conducted a study on the topic “sense of security, personal resilience and Health Locus of control among elderly people (60-75)”. Entering old age is associated with many changes in all areas of human functioning. These changes are closely reflected in the area of health. To find out whether there is a significant correlation between the senses of health locus of control in their late adulthood, the study involved 120 people who included 60 men and 60 women, from age group 60-75. They used Multidimensional Health locus of control scale and Ego Resilience and Sense of Security Questionnaire. The study came to the conclusions that older people need to be strengthened in their belief that their health depends on them and personal resilience remains in positive relationships with inner health locus of control and with the belief that other people are decisive for health. They found that a sense of security and personal resilience are statistically significant in relation to health locus of control.

Shin and Kang (2015) conducted a study on the topic “the relationships among health locus of control and resilience, social support and health promoting behavior in patients with newly diagnosed coronary artery diseases”. This study used a descriptive correlational design using a survey method. The subjects were coronary artery disease patients at the cardiology out-patient clinic of the C university hospital. Data were collected through Health Locus of control scale, Resilience scale, ENRICHD social support instrument, Health Promoting Lifestyle Profile scale. And data were analyzed using descriptive statistics, t-test, ANOVA, Pearson’s correlation coefficient and hierarchical regression. There were significant positive bivariate correlations of health promoting behavior with internal health locus of control, doctors health locus of control, resilience and social support. Among predictors internal health locus of control, social support and resilience had statistically significant influences on health promoting behavior.

METHODOLOGY

Statement of the problem

To find out the relationship between health locus of control and resilience among middle aged people.

Objectives

- Explore the correlations among resilience and health locus of control variables.
- Examine whether the resilience and health locus of control scores vary by gender.

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Hypotheses

- There will be no significant correlations between resilience and internal health locus of control variables.
- There will be no significant correlation between resilience and chance health locus of control variables.
- There will be no significant effect of gender among the scores of internal health locus of control and resilience.
- There will be no significant relationship between chance health locus of control and internal health locus of control variables.

Research design

Research design is the blueprint for the collection, measurement and analysis of data. In the present study, an attempt is made to find out the relationship among resilience and health locus of control variables among the middle-aged people in Palakkad, Kerala. Thus, following a correlation research design.

Research sample

Since it is difficult to study the entire population, a sample is selected for the study. The sample selection process depends on the objectives and the nature of the sample. Those individuals who were between 45 and 65 years of age are taken. A total of 100 middle aged people who had been suffering or who are suffering from physical illness is taken for the present study. Out of this 50 are male and 50 are female.

Tools

For the current study, the following instruments were used:

- Socio-demographic sheet
- Multidimensional Health Locus of control scale (form A).
- Resilience scale.

Procedure

The questionnaire used in this study was distributed for processing data. A consent form and socio demographic sheet was also given with the questionnaire to collect their basic information. The questionnaires used in the study were directly given to the participants who were having some kind of health issues. Participants took around 10-15 minutes to complete the questionnaire and they were very cooperative.

Ethical issues

- Informed consent of each and every participant was acquired.
- Confidentiality of the responses was maintained.
- The data collected will be solely used for research purposes.

RESULTS

The statistical analyses conducted in the present study are done using Pearson's r and student's t-test.

Table 1: Relationship between resilience and internal health locus of control

Variables	N	Group	r	p
Resilience	100	Middle aged people	0.814**	0.000
Internal Health Locus of Control	100			

***correlation is significant at the 0.01 level (2 – tailed).*

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Table 1 indicates that internal health locus of control is significantly positively correlated to resilience. It can be inferred that if a person has internal health locus of control, he tends to be more resilient. Hence, the hypothesis that stated there will be no significant correlation between internal health locus of control and resilience is rejected.

Table 2: Relationship between resilience and chance health locus of control

Variables	N	Group	r	p
Resilience	100	Middle aged people	-0.130	0.198
Chance Health Locus of Control	100			

Table 2 indicates that there is no significant correlation between chance health locus of control and resilience. Hence, the hypothesis that there will be no significant relationship between resilience and chance health locus of control is accepted.

Table 3: Relationship between internal health locus of control and chance health locus of control

Variables	N	Group	r	p
Internal Health Locus of Control	100	Middle aged people	-0.125	0.217
Chance Health Locus of Control	100			

Table 3 indicates that there is no significant correlation between internal health locus of control and chance health locus of control. Hence, the hypothesis that there will be no significant relationship between internal health locus of control and chance health locus of control is accepted.

Table 4: Differences in internal health locus of control among middle aged people based on gender

Variable	Group	N	Mean	S.D	t	p
Internal Health Locus of Control	F	50	26.02	5.422	0.340	0.735
	M	50	25.59	5.868		

Table 4 indicates the differences in internal health locus of control among middle aged people based on gender, (female; mean=26.02, male, S.D = 5.422; mean=25.59, S. D=5.868) which is not significant at $t=0.340$, $p>0.05$. Thus, the hypothesis that there will be no significant effect on gender among the scores of health locus of control is accepted.

Table 5: Differences in resilience among middle aged people based on gender

Variable	Group	N	Mean	S.D	t	p
Resilience	F	50	143.82	16.711	1.745	0.084
	M	50	137.24	20.774		

Table 5 indicates the differences in resilience among middle aged people based on gender (female; mean=143.82, S. D= 16.711, male; mean= 137.24, S. D= 20.774) which is not significant at $t=1.745$, $p>0.05$. Thus, the hypothesis that there will be no significant effect on gender among the scores of resilience is accepted.

Major Findings

- There is significant correlation between internal health locus of control and resilience.

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- There is no significant relationship between chance health locus of control and resilience.
- There is no significant correlation between internal health locus of control and chance health locus of control.
- There is no significant effect of gender among the scores of internal health locus of control and resilience.

Implications

Due to aging, middle aged people are prone to health problems. They will have to visit health professionals and take treatments. So in order to see a positive result from all the treatments, people have to do some internal work on them too. They themselves have to take responsibility for their own health and wellbeing. They have to be more self-confident and try to improve their internal resilience factors. If people always blame others, chance, or luck for their own health, they themselves would not do anything to improve their health conditions. They have to understand their role in their better health status. For this, interventions on developing resilience and other internal resources can be framed and implemented at a larger scale. Physical educators could help people's perceptions of internal health locus of control and enhance protective resources among middle aged people.

Scope and Limitations

- Limited sample size is taken for the study. Large number of samples with wider location can be studied.
- Other psychological variables can be studied.

CONCLUSION

Health can be understood as a state of physical, social and spiritual wellbeing. Middle aged people are prone to health issues as they are aging. People deal differently towards different stressors. Belief system of a person always plays a greater role in their life. The aim of the present study was to find the relationship between health locus of control variables and resilience. The sample consisted of 100 middle aged people who were having some kind of health-related issues. From the results it is clear that there is a significant relationship between internal health locus of control and resilience. Results also showed that there is no significant relationship between chance health locus of control and resilience. There found no correlation between the subscales of health locus of control that is internal health locus of control and chance health locus of control. There found no significant difference in the scores of health locus of control variables and resilience based on gender. Limitations and implications of the study has been indicated.

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Conflict of Interest

The author declared no conflict of interest.

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