

## Gender Differences on Resilience among CVD Patients

Sabiha Yasmeen<sup>1\*</sup>, Mohd. Ilyas Khan<sup>2</sup>

### ABSTRACT

Problems like CAD and Cancer increasing worldwide. The role of psychological factors in the occurrence of CAD has been, widely expected. Coronary artery Disease is the condition that affects the heart and sometimes the blood vessels. CAD is considered not only a medical problem but also a social and psychological problem because “the illness changes society’s attitude towards the patient” (Tkhostov, 2002). A significant proportion of CAD patients suffer social, emotional and psychological distress, therefore, psychological interventions have proven to be effective for helping patients suffering from heart ailments. Resilience is defined as an individual’s ability to properly adapt to stress and adversity. Emmey Warner (1970) was one of the early scientists to use the term resilience. Resilient people are free from negative emotions and thoughts, remaining optimistic in most of all situations. Therefore the present study was undertaken to study resilience among CAD patients. The participants for the present study comprised of 100 CAD patients (50 males and 50 females). The sample was drawn from Department of Cardiology, Jawahar Lal Nehru Medical College and Hospital (JNMCH), of Aligarh Muslim University, Aligarh (U.P.). Resilience Scale developed by Wangnild and Young’s resilience (1993) was used for the present study. It consists of 25 items measuring 5 sub dimensions VIZ, Equanimity, Perseverance, self-reliance, meaningfulness, and Existential aloneness. Data were analysed using SPSS 16 version.

*Keywords: CAD patients, Resilience*

In today’s fast-paced modern life, our health is under attack from innumerable sources of stress, Environmental pollution, unhealthy work conditions, industrial smoke, unsafe water, and noise and so on. There are countless risks to human health. Health risk constitutes a broad category that can include both health risk factors (substance abuse, violence, sedentary life style or habits, unprotected sexual intercourse and poor eating habits). **WHO** has recently published a report stating ten leading global health risk factors: under weight, unsafe sex, high blood pressure, tobacco consumption, indoor smoke from solid fuels, high cholesterols and obesity. Together,

<sup>1</sup> Research scholar, Department of psychology, Aligarh Muslim University, Aligarh, India

<sup>2</sup> Professor, Department of psychology, Aligarh Muslim University, Aligarh, India

\*[Responding Author](#)

Received: March 30, 2017; Revision Received: May 1, 2017; Accepted: May 15, 2017

## Gender Differences on Resilience among CVD Patients

these factors cause to more than one third of all death worldwide (Yadav & Sharma, 2007). Cardiovascular disease (CVD) is the leading cause of death in the United States (Roger et al., 2011). The disease may be caused by high blood pressure, smoking, diabetes, lack of exercise, obesity, high blood cholesterol, poor diet, and excessive alcohol consumption, among others. Cardiovascular disease is a term that refers to more than one disease of the circulatory system including the heart and blood vessels, whether the blood vessels are affecting the lungs, the brain, kidneys or other parts of the body.

### ***Resilience:***

Resilience is the process of, capacity for or outcome of successful adaptation despite serious challenging or threatening circumstance. Resilience is the ability to become proactive rather than reactive, and to react flexibly to complex situations. According to Masten and Reed (2002) resilience refers to “bouncing back”. Bouncing back is inexorably linked to emotional and intrapsychic adaptation. Resilience is what gives people the psychological strength to cope with stress and calamity. Psychologist believe that resilient individuals are better able to handle such adversity and after a catastrophe. Resilient people are able to utilize their skills and strength to cope and recover from problems and challenge.

Resilience is an important role in how individuals adapt to stressful life events. Theoretical descriptions of psychological resilience indicate that resilient people are able to “bounce back” from stressful experiences quickly and efficiently (Carver, 1998).

## **LITERATURE REVIEW**

Nouri-saeed, Salari, Nouri-saeed, Balasi, Moaddab (2015) resilience and positive emotions in patients could raise coping strategies and reduce disease complications, this study aimed to determine the level of resilience and the associated factors in patients with coronary artery disease (CAD). Descriptive cross-sectional study was conducted on 186 CAD patients by using Connor-Davison Resilience Scale (CD-RISC) in 2013 and data analysis was by using descriptive and inferential statistics in SPSS. Significant association were observed between the resilience level and age, gender, educational status, employment status, and history of hypertension ( $p < 0.05$ ). According to the logistic regression employment status is the single predictor of resilience. Result of this study indicated that the majority of the subjects had lower scores than the mean of resilience, it is recommended that these patients for mental and psychological health. Patients should be trained on coping skills depending on their socio-demographic characteristics.

Malik and Afzal (2015) examined the predictors of quality of life and resilience among out patients with heart disease. They investigated the role of resilience and gender differences in patients with heart disease, the participant were 461 out patients with heart disease. They were requested to complete questionnaire of quality of life –brief (WHOQOL-BRIEF) scale. To assess resilience with the help of Connor-Davison resilience scale 10 (CD-RISC-10) was used. Results

## Gender Differences on Resilience among CVD Patients

indicated that the significant predictors for quality of life patients with heart disease were resilience, education, income and age. Furthermore analysis proved that male heart patients to be more resilient than female heart patients. It was concluded that Quality of life patients with heart disease can be enhance by increasing education and resilience. Better education facilities improving resilience and a supportive income structure will ensure improved health outcome.

### *Objectives:*

1. To explore the gender difference on the dimensions (personal competence and acceptance of self and life) among CVD patients.
2. To find out difference on male and female CVD patients on overall score of resilience.

### *Hypotheses:*

1. There will be positive correlation between genders on the on the dimensions (personal competence and acceptance of self and life) among CVD patients.
2. There will be positive correlation between male and female CVD patients on overall score of resilience.

## **METHODOLOGY & MEASURE**

### *Sample:*

The sample was comprised of 100 CVD patients, of these 60 subjects was male CVD patients and 40 subjects was female CVD patients. The data was collected from Rajeev Gandhi Centre for Diabetes & Hypertension (RGC), JNMCH, AMU, Aligarh.

### *Tools:*

Wangnild and Young's resilience scale (1990) was used. It consists of 25 items that measures 2 factors (personal competence, consist item 1 to 17 and acceptance of self and life, consist item 18 to 25). All the items were scored on a 7-point Likert scale (1= strongly disagree to 7= strongly agree) with possible score 25 to 175. Total score above 146 indicates strong or high resilience while below 121 indicates weak or low resilience.

### *Statistical analyses:*

Student's t-test was computed for the comparison of resilience among CVD patients of both groups (viz. male and female).

### *Procedure:*

Prior to the data collection a report was maintained and consent was asked from the CVD patients. It was ensuring to them their given details will only be used for research purpose and their identity will be kept confidential. The resilience scale was administered to collect the data.

## Gender Differences on Resilience among CVD Patients

### RESULTS AND ANALYSIS

The proposed study was conducted to measure the gender differences on resilience among CVD patients and also the comparison of male and female CVD patients on dimensions of resilience (personal competence, acceptance of self and life)

*Table: Showing the gender difference between male and female patients on dimensions of resilience (personal competence, acceptance of self and life) and overall resilience.*

Variable	Male		Female		t-value	Sig
	Mean	SDs	Mean	SDs		
Personal competence	77.65	14.55	74.55	17.59	.95	.340
Acceptance of self and life	36.40	7.12	32.68	10.00	2.17	.032
Resilience total	114.05	20.54	107.22	26.24	1.45	.149

\*\*Significant at the 0.01 level (2-tailed)

\*Significant at the 0.05 level (2-tailed)

Here the result indicates that male and female CVD patients has insignificant difference on overall resilience score and on the dimension of resilience (personal competence), whereas, on the dimension of resilience (acceptance of self and life) male and female CVD patients both has significant difference.

### DISCUSSION & CONCLUSION

The present study is to find out the gender difference of resilience on CVD patients. It was revealed from the results that overall resilience (sig .149) along with its dimensions (personal competence sig .340, and acceptance of self and life sig .032). Present study findings supported by Morano (2010) who conducted the study on resilience and coping with trauma: does gender make a difference? He found that there are limited differences between male and female survivors in terms of perceived resilience, self-reported resolution of Erikson's life stages, and perceptions of other survivors' resolution of Erikson's life stages.

In another study investigated by Masood. A, Masud Y, Mazahir S (2016) found that Gender differences in resilience and psychological distress of patients with burns, the findings from the current research revealed that there were significant gender differences in resilience and psychological distress of patients with burns.

### LIMITATIONS

The study has been conducted only with one variable and the sampling technique used to collect data is purposive sampling which brings bias in the selection of sample and weakness the generalizations of results of the study, to see only the gender difference could not explain the role of the variable on the samples.

## Gender Differences on Resilience among CVD Patients

### *Acknowledgments*

The author appreciates all those who participated in the study and helped to facilitate the research process.

**Conflict of Interests:** The author declared no conflict of interests.

### **REFERENCES**

- Ali, M., Aslam, M. A., Awan, M. S., & Waqas, M. (2011). Status of health related quality of life between HBV and HCV patients of Pakistan. *International Journal of Business and Social Science*, 2, 213-220.
- Awan, M.S., Waqas, M., Aslam, M.A. & Abbas, F. (2011). Health related quality of life assessment in patients with hepatitis: A case of Pakistan. *Interdisciplinary Journal of Contemporary Research and Business*, 3, 1259-1268.
- Giltary, Erik J; Geleijnse, Johanna M; Zitman, Frans G; Hoekstra, Tiny; Schouten, Evert G. (2004): "Dispositional optimum and all-cause and cardiovascular mortality in a prospective cohort of Elderly Dutch Men and Women." *Archives of General Psychiatry* 61(11): 1126.
- M.carmen (2010).resilience coping with trauma: does gender makes a difference? *Journal of shuman behaviour in the social environment*. Volume 20.
- Malik and Afzal (2016). *Predictors Of Quality Of Life And Resilience Among Out Patients With Heart Disease*. july-september vol 12, number 3.
- Masten, A.S. (2002): "Ordinary magic: Resilience processes in development" *American Psychologist* 56(3): 227-238.
- Masten, A.S.; Best, K.M.; Garmezy, N. (1990): "Resilience and development: Contributions from the study of children who overcome adversity." *Development and Psychopathology*, 2(4): 425-444.
- Nouri-saeed, Salari, Nouri-saeed, Balasi, Moaddab (2015).Resilience and the associated factors in patients with coronary artery disease. *Journal of Nursing and Midwifery Sciences* 2(2): 23-28.

**How to cite this article:** Yasmeen S, Khan I (2017), Gender Differences on Resilience among CVD Patients, *International Journal of Indian Psychology*, Volume 4, Issue 3, ISSN:2348-5396 (e), ISSN:2349-3429 (p), DIP:18.01.048/20170403