



Role Of Perceived Social Support On Psychological Well-Being Among Thalassemia Patient

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Abstract

The Thalassemia is a chronic disease which is life long. The thalassemia patients is neglected by not only society but also by the family sometime. This is a disorder that is present from birth and patients has to learn to live with it all his life. While trying to live with chronic illness patients not able to live with balanced state of mind eventually patients leads toward negative thoughts. This study attempts to understand role of perceived social support on psychological well-being among Thalassemia patients. A total 33 participant were sampled using snowball sampling technique. Data was collected using multidimensional scale of perceived social support it consist 12 questions and psychological well-being scale it consist 6 dimension with 7 items in each dimension total 42 items in the scale. Mann-Whitney U test were conducted The result shows perceived social support have positive effect on the psychological well-being and it's subscale include positive relation with others and self acceptance in life among Thalassemia patients ($Z < 1.96$), yet it is not effect on autonomy, environmental mastery, personal growth and purpose in life ($Z > 1.96$).

Keywords

Perceived Social Support, Psychological Well-being, Thalassemia patients, Chronic Disorder.

Introduction

Currently, large population is living with chronic disorder like hematological disorder, Cardiovascular disorder, diabetes, etc. living with chronic disorder is not limited it comes with the adaptive process of long term treatment, lots of side effect as well as self care. Furthermore disorder and treatment impact on patients ability to meet their requirement it makes a drastic change in there life style and even their mental state.

When people think of friends, family, and other people as a recourse for material, psychological and all around help during difficult times, they are referring to their perception of social support, feeling supported by other is linked to having positive views about oneself, which explains the direct and indirect effect of self acceptance on mental state (Loannou, et al.).

Health is made with a physical and psychological well-being, both are equally important and necessary for healthy long life, physical health help work accomplish goals of life and psychological well-being help to build emotional flexibility which allows to enjoy life, it work through balance in one's aspiration and achievements in society, family, work place, academics and life also (Alamdarloo, et al., 2019).

Thalassemia syndromes are family of inherited genetic blood disorders characterized by an imbalance in the synthesis of globin chains resulting in the absence or reduction of the production of adult hemoglobin. Thalassemia is thus a chronic hereditary anemia. Thalassemia are the most common hereditary diseases worldwide. Thalassemia is found across the world. Affected population estimated rates are: Europe 0.9%; Asia 4.1%; Africa 13.3%; Oceania (including Australia, New Zealand, Papua New Guinea and Fiji) 1.3%; and the Americas 2% (Anie & Massaglia, 2014).

Now day's where even normal persons are suffering from lots of psychological problems. Present study trying to understand the issue of thalassemia patients. This study is conducted to gain knowledge about the social support and psychological state of mind among Thalassemia patients.

Objective Of The Study

To study role of perceived social support on psychological well-being in Thalassemia patients.

Research Methodology

study conducted on 33 thalassemic patients (N = 33) between ages of 18-25 was collected with 17 males and 16 females from various city in India have been selected. The Thalassemic patient who are conformed with thalassemia major diagnosis were treated as a population of present study. The sample was selected on the basis of snowball sampling a non-probability sampling method for this study. Ryff's Psychological well-being scale were used as an instrument in this study. There are several versions of this scale, including 84 item, 42 item and 18 item version. This study will use a 42- item version, it measures six identified components of well-being: (1) autonomy, (2) environmental mastery, (3) personal growth, (4) positive relations with others, (5) purpose in life and (6), self acceptance each component consists of 7 items. Respondent are asked to rate their level of agreement based on a 6-point agreement ranges from 1 (strongly disagree) to 6 (strongly agree) for positive items and 6 (strongly disagree) to 1 (strongly agree). This scale score 1 to 6 for positive and revers scoring for negative.

Negative items : 3,5,8,10,13,14,15,16,17,18,19,23,26,27,30,31,32,34,36,39,41

Reliability of The questionnaire is internal consistency (coefficient alpha) ranged vary from 0.83 to 0.91 for all six dimensions. The correlation with 20 item parent scale are between 0.97 and 0.99 for all six dimensions.

The Multidimensional Scale of Perceived Social Support (MSPSS) is derived from social support multi scale of Zimet, G.D, Dalhem, N.W, Zimer S.W and Farley, G.K (1988). It consist 12 questions which was used to measure of the patient's perceived social support from three areas family, friends, and significant others. It has three sub scales, each of which includes four statements that are scored on a 7-point Likert scale (from '1—very strongly disagree' to '7—very strongly agree'). The questionnaire has favorable internal consistency. The whole test alpha coefficient is 0.899 and the alpha coefficients of its sub-scales are between 0.883 and 0.902. Also good concurrent and factor validity. Moreover, the validity of test structure is also favorable. The validity of questionnaire in the current research is also calculated as 0.9 using Cronbach's method.

Statistical Analysis

Data were first entered in an Excel sheet. Different statistics were used to study various hypotheses. The descriptive statistics for all the variables were computed. These included The Mann-Whitney U test is a non-parametric test that can be used in place of an unpaired t-test.

Results And Discussion

A study conducted on 33 thalassemic patients (N = 33) between ages of 18-25 was collected with 17 males and 16 females from various city in India have been selected.

Table : 1 Autonomy and high PSS and low PSS

Variables	Autonomy Of PWB				
	N	Mean	Expected value of U	Standard error of U	Z
High Perceived Social Support	9	22.277	108	24.7386	-1.9200
Low Perceived Social Support	24	15.02			

Table – 1 shows the mean for high perceived social support is $M = 22.277$ and mean for low perceived social support is $M = 15.02$, expected value of $U = 108$, standard error value of $U = 24.7386$ and Z value is -1.9200 which is >-1.96 for autonomy.

Table : 2 Environmental Mastery and high PSS and low PSS

Variables	Environmental Mastery Of PWB				
	N	Mean	Expected value of U	Standard error of U	Z
High Perceived Social Support	9	20	108	24.7386	-1.0914
Low Perceived Social Support	24	13.25			

Table – 2 show the mean for high perceived social support is $M = 20$ and mean for low perceived social support is $M = 13.25$, expected value of $U = 108$, standard error value of $U = 24.7386$ and Z value is -1.0914 which is >-1.96 for environmental mastery.

Table : 3 Personal Growth and high PSS and low PSS

Variables	Personal Growth Of PWB				
	N	Mean	Expected value of U	Standard error of U	Z
High Perceived Social Support	9	19.33	108	24.7386	-0.8488
Low Perceived Social Support	24	16.125			

Table – 3 shows that mean for high perceived social support is $M = 19.33$ and mean for low perceived social support is $M = 16.125$, expected value of $U = 108$, standard error value of $U = 24.7386$ and Z value is -0.8488 which is >-1.96 for personal growth.

Table : 4 Positive Relation with Others and high PSS and low PSS

Variables	Positive Relation with Others Of PWB				
	N	Mean	Expected value of U	Standard error of U	Z
High Perceived Social Support	9	24.388	108	24.7386	-2.6881
Low Perceived Social Support	24	13.104			

Table – 4 for positive relation with others the mean for high perceived social support is $M = 24.388$ and mean for low perceived social support is $M = 13.104$, expected value of $U = 108$, standard error value of $U = 24.7386$ and Z value is -2.6881 which is < -1.96 . Hence, the hypothesis ‘There will be difference in positive relation with others of Psychological Well-being among Thalassemia patients with high Perceived Social Support and Thalassemia patients with low Perceived Social’ is Accepted.

Table : 5 Purpose in Life and high PSS and low PSS

Variables	Purpose in Life Of PWB				
	N	Mean	Expected value of U	Standard error of U	Z
High Perceived Social Support	9	21.944	108	24.7386	-1.7988
Low Perceived Social Support	24	15.145			

Table – 5 shows that mean for high perceived social support is $M = 21.944$ and mean for low perceived social support is $M = 15.145$, expected value of $U = 108$, standard error value of $U = 24.7386$ and Z value is -1.7988 which is > -1.96 for purpose in life.

Table : 6 Self Acceptance and high PSS and low PSS

Variables	Self Acceptance Of PWB				
	N	Mean	Expected value of U	Standard error of U	Z
High Perceived Social Support	9	23.166	108	24.7386	-2.2434
Low Perceived Social Support	24	14.687			

Table – 6 shows the mean for high perceived social support is $M = 23.166$ and mean for low perceived social support is $M = 14.687$, expected value of $U = 108$, standard error value of $U = 24.7386$ and Z value is -2.2434 which is < -1.96 for self acceptance.

Difference between Psychological well-being among Thalassemia patients with high Perceived Social Support and Thalassemia patients with low Perceived Social Support. Value for z obtained during application of “Mann-Whitney U test” showed difference on positive relation with others and self acceptance at ($z < -1.96$). Z value showed no difference, on the autonomy, environmental mastery, personal growth and purpose in life at ($z > -1.96$).

Findings of this study is in line with the results of Poudel, et al.(2020) as they indicated that difference between social support, self-esteem and psychological well-being among adolescents studying in secondary level government schools of Pokhara Metropolitan city. Which shows that higher social support are likely to have higher self-esteem and more better Psychological well-being.

According to conducted at Chilean University with 250 students of first academic year by Cobo-Rendon, et al. (2020). Reinforce in academic institutions the development of social intervention and programs will help to improve psychology-wellbeing of young university students. Also attachment between family and social support raise the psychological well-being in cancer caregivers Kuscü, et al. (2008).

Limitation of the Study

The present study was based on small sample ($N = 33$) which was not nationally representative either. Due to time and source limitation we are not able to do observation of patient's routine.

Conclusion

Perceived Social Support have positive effects on the Psychological Well-being and its subscale including positive relation with others and self acceptance in life among Thalassemia patients ($Z < 1.96$), yet it is not effect on autonomy, environmental mastery, personal growth and purpose in life ($Z > 1.96$).

Ethical Consideration

Informed Consent was collected and the Patients are aware about the study topic. Also throughout the research patients confidentiality maintained.

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