

THE RELATIONSHIP BETWEEN HEALTH SYMPTOMS AND COPING STRATEGIES OF HIV INFECTED PATIENTS AT TRANG HOSPITAL

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The purpose of the study was to investigate the health symptoms level and coping strategies of HIV infected patients at Trang Hospital. The relationship between total health symptoms and each subscales : somatic symptoms, anxiety and insomnia, social dysfunction, severe depression and three coping strategies : task, emotion, and avoidance were examined. The demographic variables of age, gender, marital status, education, occupation, and, income were selected for the study.

The purposive sampling technique was used for this study. The sample in this study was obtained from 200 HIV infected patients at Trang Hospital. Two instruments, the General Health Questionnaire 28 (GHQ28) and Coping Inventory for the Stressful Situation (CISS) were used. The major findings were as follows :

1. That social dysfunction is considered to be the highest which patients experienced among the four subscales of health symptoms.
2. That significant differences were found between total health symptoms and five demographic variables : age, gender, education, occupation, and income at the .05 level.

3. That significant differences were found between somatic symptoms and three demographic variables : age, occupation, and income at the .05 level.
4. That significant differences were found between anxiety and insomnia and six demographic variables : age, gender, education, occupation, and income at the .05 level.
5. That significant difference between severe depression and five demographic variables : age, gender, education, occupation, and income at .05 level.
6. Emotion-oriented was used by the HIV infected patients in the above average level, avoidance-oriented was used in the slightly above average level and task-oriented was used in the average level.
7. That significant differences were found between task-oriented coping strategy and two demographic variables : marital status, and education at .05 level.
8. That significant differences were found between emotion-oriented coping strategy and four demographic variables : age, gender, education, and occupation at .05 level.
9. That significant differences were found between avoidance-oriented coping strategy and one demographic variable : marital status at .05 level.
10. The relationship between total health symptoms level and emotion-oriented coping was found to be significant at the .05 level. Emotion-oriented coping strategy was found to have high positively significant relationship with total health symptoms ($r=.852$) and each subscales : anxiety and insomnia ($r = .852$), severe depression ($r = .807$), social dysfunction ($r = .783$), and somatic symptoms ($r = .745$) respectively.