Mental Hardiness and Social Support in Life Satisfaction of Breast Cancer Patients

Afsaneh Taheria, Hasan Ahadi, Farah Lotfi Kashani, Rohollah Ahmadzade Kermani

Abstract

The present study is a co-relational research that investigated the portion of hardiness and social support on anticipating life satisfaction in patients with breast cancer. The population of this study was all patients who were referred to Shohaday-e Tajrish in 1391. Sample consisted of 400 patients selected purposefully. Three questionnaires including hardiness, social support and life satisfaction were administered for assessment of variables. Findings showed a significant correlation between three variables (P<.05). According to research results, change in social support sources and having hardiness trait can anticipate life satisfaction in patients with breast cancer.

Keywords: life satisfaction, hardiness, social support, breast cancer

1. Introduction

Breast cancer is one of the prevalent diseases in the world that is created due to uncommon and uncontrollable reproduction of cells under effect of different factors such as genetic, glandular and environmental factors (Sarafino, 2011). The studies indicated that the patients suffering from breast cancer are exposed to the various mental pressures which may create mental and social disorders in their life. Life satisfaction as one of important variables, under effect of chronic diseases is referred to understanding the individual satisfaction with situation of her life in
relation to culture and value systems they live therein and in relation to goals, expectations, criteria and optional entertainments (Herbet & Zdaniuk, 2009) Whereas the cancer is one of major resources of stress, inability and loss of life satisfaction, the affected persons must adapt themselves to the disease requirements and its treatments, because it may affect the mobility and independence of patient and changes her lifestyle so that salient reduction in social, mental and physical welfare is observed. To reduce the effects of this disease, the researchers sought for variables related thereto. Mental hardiness is a psychological structure that within the recent years has been applied in the prospective researches and is raised as an appropriate predictor for health and life satisfaction, even while facing very stressful events. Stubborn individuals are who that feel commitment to the actions and behaviors and believe that the life events are controllable and predictable and ultimately assume the change in life and need to conformity thereto as a combat-seeking for more growth, instead of counting as a threat for their life. Hardiness changes two elements of evaluation; reduces evaluation of threat and increases the expectation for successful confronting thereto. Commitment, control and combat-seeking have essential influence on evaluation styles of stubborn peoples about stressful events. Stubborn individuals would like to evaluate the life’s stressful events to lower stressful style (Sarafino, 2011). The studies indicated that hardiness has positive relationship with mental welfare (Lambert, 1990), psychological health and satisfaction in life (Patrice, Nicholas and Leuner, 1999). Flexibility (Maddi, 1999) is associated with using the problem-oriented comparative strategies (Wiebe, 1992, 1993), positive evaluation of stressful situations (Pagna, 1990) and attention to positive events of life. Social support is another factor that is very effective on perception of symptoms severity as well as the quality of life of patient, because the individual’s quality of confronting the stress is highly under effect of social support receiving manner. Although there are considerable individual differences between patients’ confronting the disease symptoms and adaption to its consequences, but emotional distress at the primary stages is associated with levels of pain and fatigue, performance status, disease effect on the life, life events and perceived protection (Smedstad, 1996). Seeking for social support of others is one of important methods for confronting the psycho-social stressful factors. The studies showed that social support is a valuable factor for confronting the diseases (Sarason, 1997; Kubzansky, 1992). In consideration of the foregoing, this research seeks for the answer of this question that if life satisfaction in breast cancer patients may be predicted based on other studied variables, i.e. hardiness and social support?

2. Method

In this non-experimental research with the nature of correlation, population consists of all outpatients infected by breast cancer referring to Shohadaye Tajrish Hospital of Tehran during 1391. The studied sample included 400 patients that were selected by convenience sampling and tested by three questionnaires.

3. Instrument

Mental hardiness questionnaire is formulated and validated by Kiamarsi, Najarian and Mehrabizadeh Honarmand. This questionnaire includes 27 items and each item has four options comprised of never, rarely, sometimes and most times and its validity calculated by retest and Cronbach’s alpha equal to .84 and .76, respectively. Second questionnaire is life satisfaction that was made by Diener et al and its validity has been reported in the research applied by Taherpoor (2005) equal to .84. Social support questionnaire is the third one that presented by Zimet, Dahlem and Farley (1988) and includes 12 questions and Perid & Ardal (2003) calculated internal consistency coefficient of this scale according to Cronbach’s alpha within .90 to .95.

4. Results

In Table 1, the coefficient regression of predictive variables are presented in regression analysis of Life satisfaction. As it’ seen social protection plays a significant role in life satisfaction.
Table 1. The coefficient correlation between psychological hardness variable and life satisfaction

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>SE</th>
<th>Beta</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Fixed rate</td>
<td>4.223</td>
<td>1.538</td>
<td>2.818</td>
<td>.005</td>
</tr>
<tr>
<td></td>
<td>mental hardness</td>
<td>.226</td>
<td>.028</td>
<td>.415</td>
<td>8.391</td>
</tr>
<tr>
<td>2</td>
<td>Fixed rate</td>
<td>3.119</td>
<td>1.428</td>
<td>2.184</td>
<td>.03</td>
</tr>
<tr>
<td></td>
<td>mental hardness</td>
<td>.204</td>
<td>.026</td>
<td>.358</td>
<td>7.744</td>
</tr>
<tr>
<td></td>
<td>family support</td>
<td>.320</td>
<td>.041</td>
<td>.357</td>
<td>7.715</td>
</tr>
</tbody>
</table>

In table 2 the coefficient correlation of social protection and life satisfaction are presented.

Table 2. The coefficient correlation between social support variable and life satisfaction

<table>
<thead>
<tr>
<th>Model</th>
<th>life satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variable</td>
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</tr>
<tr>
<td>social support</td>
<td>.36</td>
</tr>
<tr>
<td>Family support</td>
<td>.41</td>
</tr>
<tr>
<td>Friends support</td>
<td>.14</td>
</tr>
<tr>
<td>Support from important persons</td>
<td>.1</td>
</tr>
</tbody>
</table>

Table 3: As it’s seen in table 3 the correlation is significant in level .05.

Table 3. The coefficient correlation between mental hardness variable and life satisfaction.

<table>
<thead>
<tr>
<th>Variable</th>
<th>life satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>r</td>
</tr>
<tr>
<td>mental hardness</td>
<td>.41</td>
</tr>
</tbody>
</table>

5. Discussion and conclusion

Analysis of the results of this study indicated a significant relationship between life satisfaction and total value of social support, family protection and friends protection (P<.05). Therefore, this finding is consistent to the other results (Naghashvar, 2007; Perry, 2008; Brannon, 2007). For expression of this result, to say that social support through playing the intervening role between life’s stressful factors and appearance of physical and mental problems as well as reinforcement of individuals’ recognition may lead to reduction of experienced stress, increase of survival and improvement of the quality of life (Suarez, L., Ramirez, 2000). Physical and cognitive vulnerability is increased parallel to reduction of social support. Lack of life satisfaction is associated with weaker health status, depression symptoms, personality problems, inappropriate hygienic behaviors and weak social status (Maltaby, 2004). In addition, there is a significant relationship between life satisfaction and psychological hardness (P<.01). Summary of this hypothesis is consistent to the results mentioned in (Lambert, 1990; Patrice, 1999; Diener, 1997; Maddi,1999; Smith, 2004). There are a lot of experimental evidences that make the hardness, beliefs and actively behaviors, e.g. the stubborn persons use the active comparative strategies such as problem-oriented comparative strategy (Wiebe, 1991; Pagna, 1990). Furthermore, most probably the stubborn persons evaluate the stressful situations positively (Pagna, 1990) and pay attention to the positive events of life (Asadi, 2006) Individuals’ evaluation of stresses and applying effective comparative methods like as shield increases the individual’s resistance to the life problems and protects him. On the other side, adjustment of stresses means positive compatibility and adaptability leads the individual towards success and feeling of life satisfaction (Asadi, 2006) Therefore, it is predicted the stubborn persons to evaluate the life positively and have more feeling of satisfaction with its different aspects. Whereas the individuals having higher life satisfaction use more effective and fitted comparative styles and
experience deeper positive emotions and sensations, it is expected the cancer patients that have higher life satisfaction to use more effective and fitted comparative styles for improvement of disease.

Reference


