

Deprivation on Personality among HIV Positive Patients: A Study

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Abstract

Socio-cultural life in any social setting can be conceptualized as a continuum at one end of which lie those who have all the physical, social, economic and other facilities fulfillment of their biogenic as well as socio-genic needs leading to varied experiences in life, while on the other end lie those who are materialistically socio-culturally and needs and acquisition of diverse experience. The concept of prolonged deprivation stands for a variety of organism and environmental variables constituting the basic sources of experiences to the living organisms.

Key Words: Culture, Deprivation, Environment, Life, Personality

Introduction:

According to Tripathi and Mishra, (1975), deprivation is to be considered as a prolonged process relative to a defined social setting. Socio-cultural life in any social setting can be conceptualized as a continuum at one end of which lie those who have all the physical, social, economic and other facilities fulfillment of their biogenic as well as socio-genic needs leading to varied experiences in life, while on the other end lie those who are materialistically socio-culturally and needs and acquisition of diverse experience. It is a fact that accumulation of experiential variety and extent is an outcome in relatively longer periods in a natural setting, it has been considered advisable to add an epithet to the term deprivation and call prolonged deprivation. The concept of prolonged deprivation stands for a variety of organism and environmental variables constituting the basic sources of experiences to the living

organisms. It is a multidimensional phenomenon manifest over short or long durations (Mishra and Tripathi- 1976). The deprivation may occur in all walks of life, either in isolation or together with all areas.

The term “personality” stems from the Latin word person, which was the name given to the mask actors wore the characters they portrayed. In addition, some personality theorists emphasize the need to recognize the person-situation interaction that is social learning aspects of personality.

Thus personality represents the sum total of several attributes which manifest themselves in an individual, the ability of the individual to organize and integrate all the qualities so as to give meaning to life and the uniqueness of the situation which influences behavior of an individual personality is therefore, a very diverse psychological concept.

The interpretation, social skill in individual is equally to the personality. Therefore training for personality development or

therapeutic intervention for bringing about changes in the personality on as individual is highly justified.

In this context, it is necessary to concretization the term personality as viewed by Hillgard as the "Configuration of individual characteristics and ways of behaving or by Morton Prince". The sum total of all, the biological innate dispositions", or 'the thinking, feeling and acting individual refers to a totality of behavior that should involve the total life process of an individual. Thus personality development refers to a broader and comprehensive approach.

HIV/AIDS:

HIV/AIDS is the worst plague the world is fighting today; No one is immune to HIV. But this is not to say that the peril is equal, for some people are greater risk of getting infected by the AIDS virus than others. According to NACO, every minute one Indian gets infected by the killer HIV. In India the infection is gradually spreading from urban to rural areas and from high risk groups to women who are mostly in monogamous marriages.

HIV means (Human Immunodeficiency Virus) is a virus that causes AIDS (Acquired Immunodeficiency Syndrome) a health condition in which a person is affected by a series of diseases because of poor immunity. HIV by itself is not illness and does not instantly lead to AIDS. An HIV infected person can lead a healthy life for several years before she/he develops AIDS. What is AIDS? As the name Acquired Immunodeficiency Syndrome indicates, AIDS is healthy condition that results from the deficiency in the body's immunity

following HIV infection. HIV attack the human body breaking down it immune system weakness and fight he body loses its natural ability to fight diseases. At this stage the various diseases affect the infected person.

Methodology:

Statement of the problem: Impact of Deprivation on personality among HIV positive patients.

The objectives of the study are as follows:

1. Impact of Deprivation on personality of deprived and non-deprived HIV Positive patients
2. Impact of Deprivation on personality Male and Female HIV Positive patients
3. Impact of Deprivation on personality rural and Urban HIV Positive patients

Hypotheses

The following hypotheses have been formulated in the present study:

1. There is a significant impact of Deprivation on personality, high deprived and low deprived HIV Positive patients.
2. There is a significant deference between personality, male and female HIV Positive patients.
3. There is a significant deference between personality, rural and urban HIV Positive patients.

Variables:

1. Independent variables: Deprivation
2. Dependent variable: personality, domicile and gender.

Simple:

The sampling procedure used in this study was random sampling. Total sample consists of 80 and 40 patients matched for deprivation, gender and domicile.

Tools:

1. The Prolonged Deprivation Scale (PDS) developed and standardized by Mishra and Tripathi (1980) will be used in the present study.
2. Eysenck personality Questionnaire (EPQR) is used in the study.

This inventory is developed by Eysenck (1975) and consists of 57 items with yes or

Table -1: Shows the mean, SD and t-values of Personality dimensions in two groups of in Deprivation (N=480)

Deprivation	Extroversion	Neuroticism
High Mean SD	11.19	12.77
	3.29	3.30
Low Mean SD	10.52	14.31
	3.31	2.63
t-value	2.39**	6.41**

Table 1 shows the mean, SD, and t-value of personality dimensions of patients in two levels of deprivation. It is observed that high deprived groups mean is 11.19 and low deprived group mean score is 10.52 is Extroversion. The mean score of high deprived is higher than the low deprived. The t-value of 2.39 is significant at 0.05 levels. This suggests that there is a significant difference in Extroversion dimension between high and low deprived groups. The high deprived students are more Extrovert than the low deprived group. It appears that the high deprivation prompts

no response categories. The responses of the respondents were scored as per the scoring key. According the respondents can be grouped into extraversion and introversion dimensions. The reliability and the validity of the inventory were significant and quite adequate.

Result and Discussion:

The major objective of the present study has been to examine the differences in Impact of Deprived and low deprived on personality between the HIV positive male and female patients, Rural and Urban between the HIV positive samples.

more social mobility in terms of increased social interaction, attempts for making new and more friendship for the fulfillment of social needs leading to varied experiences in life. This is because of the fact that deprivation always is visualized relative to a deferent social setting. As a result the high deprived always struggles for higher development through inculcating those qualities which constitute Extroversion dimension of his personality.

2; Shows the mean, SD and t-values of personality, male and female HIV Positive patients

Gender	Extroversion	Neuroticism
Male Mean SD	11.65 3.66	12.17 3.21
Female Mean SD	10.12 3.02	13.24 3.12
t-value	5.27**	3.68**

Table-2 shows the mean, SD, and t-value of personality dimensions of patients. It is observed that Male's mean is 11.65 and Female mean score is 10.12 in extroversion dimension. The mean score of male group is higher than the female group. The t-value of 5.27 is significant at 0.01 levels. This suggests that there is a significant deference

in Extroversion between male and female groups. The male students are more Extroverts than the female group. It appears that the male patients have more social mobility in terms of increases social interaction and more friendship for the fulfillment of their social needs leading to varied experiences in life.

Table: 3 Shows the mean, SD and t-values of Personality in two groups of Domicile (N=480)

Domicile	Extroversion	Neuroticism
Rural Mean SD	11.17 3.10	12.96 3.62
Urban Mean SD	10.13 3.54	13.79 2.39
t-value	3.46**	3.19**

Table – 3 shows the mean, SD, and t-value of personality dimensions of rural and urban patients, It is observed that rural group's mean is 11.17 and of urban group, mean score is 10.13. The mean score of rural group is higher than the urban group. The t-value of 3.46 is significant at 0.01 levels. This shows that there is a significant deference in Extroversion between rural and urban groups. The rural patients are more Extrovert than the urban group.

Conclusion: The following are the major conclusions of the study:

1. Deprived is found as higher Extroversion while low deprived have higher Neuroticism score than the counterparts.
2. There is a significant gender difference in personality dimensions: Males are found to be extrovert then the females.
3. There is a significant difference in personality dimensions between rural and urban sample.

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