



**A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING
PROGRAMME ON STRESS & COPING STRATEGIES TO REDUCE
PSYCHOSOCIAL STRESS AMONG SEXUAL MINORITIES FROM SANJAY
SEXUAL MINORITIES RIGHTS ORGANISATION IN RATLAM, M.P.**

Arpitha

Research Scholar

Abstract

Sexual minorities do have a higher perceived stress level and altered coping behavior but incidence can be lowered by proper assessment, education and good referral system. A study was undertaken to assess the effectiveness of structure teaching program on stress and coping strategies to reduce psychosocial stress among sexual minorities at Sanjay Sexual minorities rights organization Ratlam, M.P. Objectives of the study were to assess pre and post Interventional stress level and coping strategies among study participants and to identify the difference and association between pre & post interventional program with selected socio demographic variables. Methods: One group pre-test-post test design with quantitative approach was used. 60 sexual minorities were selected using simple random sampling method. Data was collected through Perceived stress scale & Brief cope scale. Results of study revealed that in pre test (91%) of samples had moderate level of stress, (8.3%) had high level of stress and (100%) low level coping whereas in post test (76.7%) had low level of stress and (23.3%) had moderate stress level and (86.7%) had moderate level of coping, (13.3%) had low level of coping. Effectiveness of structured Teaching Program was assessed using paired t - test which revealed that there was significant decrease in level of stress and improvement in their coping strategies at 0.05 level of significance. The association between post test stress levels with selected demographic variables was not significant, except age and marital status. The study findings depicts that structured teaching program on stress and coping strategies is an effective mode to reduce stress and in improving coping strategies among sexual minorities.

INTRODUCTION

“Health is not mainly an issue of doctors, nurses, hospitals and social services; it is an issue of social justice” Sexuality is a complex human characteristic that refers not just to genital sex but to all the aspects of being male or female including feelings, attitudes, beliefs and behaviors’. Like all human behavior, sexual orientation is a dynamic life long process of growth. Human needs related to sexuality are tenderness, intimacy, sensuality, attachment, caring, procreating & attainment of good mental and physical health. Individuals get confounded from society as divergent from the normal variant change in the society. Some of them take leadership whereas; others need support from their fellow beings. These variants reflect the problem of society. Disharmony in society produces people who are emotionally devastated and socially abandoned.

Scientific research has played a crucial role in the history of the Psychology of sexual orientation. The social changes over the past 30 years have brought in new scientific understanding of same sex sexual orientation, which have increased opportunities of same sex behavior and the stigma surrounding sexual minorities made it difficult to study such population.

Research approach adopted was an evaluative approach. Research design used for the study was one pretest post design. Study was conducted at Sanjay sexual minority’s rights organization Bangalore. Variables under study were structured teaching program on stress & coping strategies as the independent variable and dependent variable (DV) was psychosocial stress among sexual minorities.

RESULT

Frequency and percentage were computed for describing the sample characteristic. The data represented that (40%) of samples belonged to the age group 24-28 years while 30% from age groups were between 18-23 years and 29-36 years. 51.7% of samples belong to female group while 48.3% from male group. Majority (61.7%) were single, 20% were married, 15% of the samples were separated and only 3.3 percent were divorced. Higher proportion of sexual minorities, 46.7 % were studied up to high school, 21.7 % were illiterate, 16.7% were in PUC, 15% were having secondary qualification. Majority of the samples 56.7% were self-employed, 25% were in private occupation,

18.3% choose Business as their occupation. It is observed that 65% of the samples Birth order one, and 35 percent were in the birth order 2. It is observed that 51.7% were having two siblings, 33.3% were having one sibling, 8.3% were not having siblings and 6.7% were having 3 siblings. Majority of the subjects 70% were with the same sex sexual preference and 30% with the both sex sexual preference. It is observed that 71.7% were not seeking support from paramedical professionals and only 28.3% were seeking support from paramedical professionals. It was found that 100% of the subjects were not having any composition in the family.

CONCLUSION

To summarize, since sexual minorities are alienated from society, as a health care professional we need to focus on the weaker community without any discrimination as health is universal. From the current study it was been noticed that the perceived stress level of sexual minorities was high during the pre-test stage, whereas the stress level decreased during post-test stage. Coping level of sexual minorities were low in pretest stage, whereas the stress level decreased during post-test stage. This showed that structured teaching program was an effective mode in improving the coping level and also to reduce psychosocial stress among sexual minorities.

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