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Coping among Patients with Physical Chronic Illnesses in Pakistani Sample: A Systematic Review

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ABSTRACT

Chronic conditions can cause ongoing physical and psychological difficulties with which individuals must deal by employing various coping processes to cope with stress and manage their own well-being. This review systematically examined the literature on coping strategies among individuals living with chronic physical conditions in Pakistan. This systematic review includes commonly used coping strategies and their relationship with social support, psychological wellbeing, and mental health. The relevant research articles for this review were searched for in databases such as PubMed, PJSCP, EMBASE, Science Direct, Google Scholar, Willey online library, and PsycINFO. A total of eight studies met the inclusion criteria. The majority of the studies utilized standardized measures including the Brief COPE Inventory to evaluate coping style. This finding showed that coping strategies has significant relationship in dealing with stressors related to the chronic physical and psychological health issues. The most frequently used coping strategies are religious coping, active, and positive reframing. Contrary to that person who inject drugs (PWIDs) on daily basis and diagnosed with HIV + does not use adaptive as well as maladaptive coping. The active and problem focused coping is also frequently used among the patients of chronic liver diseases. This review showed that the adequate mechanisms of coping may enhance the functioning of a person who is facing chronic illness. The better understanding of coping mechanisms in health care system of Pakistan may provide the insight to the health professionals to aware the patients about useful problem focused coping strategies.

Introduction

The present study is related to the systematic review of research articles about the use of coping strategies among the patients of physical chronic illnesses published in Pakistan. The way individual perceive the chronic illness or disability covers many other areas which are influenced by numerous factors including personal factors such as; gender, age, race, past experiences and

coping styles and social and familial support and relationships, culture environment, goals and activities of individuals (Falvo, & Holland, 2017; Holland, 2017; Lee & Choi, 2023). The coping response can be dependent on the characteristics of the illness and/or condition. Acute conditions frequently happen abruptly and temporarily affect function capacity, or chronic illnesses are those which can present with prolonged or indefinite symptoms, are often uncertain in, the etiology of the condition and may impact the person's psychological, psychosocial or emotional well-being (Falvo & Holland, 2017; Park et al., 2022). An individual's coping with a chronic condition could have profound impacts on an individual's daily participation behaviour, psychological well-being, and quality of life (Huang et al., 2021; Rahman et al., 2022). Exploring coping through the lens of the sociocultural context of Pakistan may provide interesting insights into how individual can cope with the health-environment-emotional adjustment.

Chronic illness and disability produce significant change and resulted in stress which is associated with both physical as well as psychological disorder. People across the world experience various stressors, which negatively effects everyday life experiences and well-being (Thoits, 2010). But individuals in the same situation do not necessarily experience the same degree of stress. However, stress and coping considered as interpersonal processes in late 1990's (Bodenmann, 1995; Coyne & Smith, 1991; Pistrang & Barker, 1995).

The degree of stress related to the chronic illness is often associated with the degree of threats represents to individuals. Prospective threats are including the threats to life and physical well being, body integrity and comfort, threat to privacy, autonomy, independence, threats to self-concept, goals and future plans, coercions to relationship with others and also threats to economical well being. These threats highly depend on the individual's perception of meaning and also the purpose of life. Individuals, who are more capable to cope and to manage stress, achieve more stable outcomes. Coping is a combination of multiple acts rather than a single act. Coping mechanism are developed and learned with the passage of time and these are highly individualized. Individuals use different coping mechanism to reduce stress and maintain psychological equilibrium (Falvo, & Holland, 2017; Lazarus & Folkman, 1984; Taylor, 1988; Thoits, 2010).

Consequently, the primary aim of the present study is to examine which forms of coping strategies are linked with better management of chronic illnesses. In order to deliver a complete view, the researcher also describes different types of physical chronic illnesses and the use of various coping mechanism among diverse Pakistani sample. There is ample of literature is available in this subject within western countries as well as in Pakistan. However, limited evidences which suggest systematic evaluation of the researches conducted on coping among patients of chronic illnesses. The purpose of the present paper is to critically review the existing literature and identify the gaps regarding the use of coping strategies among chronically ill individuals in the Pakistani context. This systematic review will also suggest areas of future research.

Methods

Data Searches and Sources

A systematic computerized search was carried out in PubMed, PJSCP, EMBASE, Science Direct, Google Scholar, Willey online database, JRN, JUMDC and PsycINFO. All the searches were performed by using the combination of keywords such as coping styles, coping strategies among patients of chronic illnesses, and coping skills used by patients of illnesses in Pakistan was performed. The search was extended to websites, reference lists of significant articles, and Higher

Education Commission of Pakistan's Electronic Library. The search limit was concentrated on Pakistani studies and limited researches were found in this area. The search was also restricted to the researches published in last 10 years in Pakistan related to the copings skills used by chronically ill individuals, because coping is widely studied not only internationally, but in Pakistan as well.

Selection Criteria

Initially 26 articles were carefully chosen, after reading the titles and abstract of those studies eighteen studies were discarded and only eight studies were the part of present systematic review. The inclusion criteria for the final assortment were: (i) the studies conducted in the Pakistani context (ii) the studies included patients of chronic illness as samples (iii) the copings strategies used by the patients diagnosed with any chronic illness (iv) the articles from peer-reviewed journals and (v) the article published either using quantitative or a qualitative design. The final selection of these studies was carried out after detailed reading of the full article considering the identification of major themes and findings.

Data Extraction

The data were extracted from separate databases were combined and then remove the duplicate researches. The abstract was screened out for the exclusion of the studies. Moreover, the titles of the documents were assessed according to the appropriateness of the present study. When the inclusion criterion was final the articles were arranged according to the publication years in the folder. During each of these steps, if researcher was doubtful for the suitability of manuscript, the research was discarded. The final selected articles (n=8) the results concerning the relationship of coping among chronically ill patients were included in the study.

Synthesis of Data

The studies were included on the bases of different research designs which inspect the connection between various aspects of coping with variety of chronic illnesses. The included studies are heterogeneous in operationalization of coping in terms of chronic illness. The results selected studies will only be used to confirm the findings of the studies. These descriptions will be briefly presented. An overview of the coping strategies was analyzed and the association of these strategies among participants living with chronic illness is presented in Table 1.

Table 1: Overview of Studies of Coping Styles and Chronic Illnesses

Authors	Coping with	No. of Participants	Design	Measurement	variables	Main Conclusion
Arshad, and Kazmi (2013)	Rheumatoid Arthritis (RA)	90 (males, n = 11and females, n = 79)	Cross-sectional study	Interpersonal Support Evaluation List (ISEL), Brief Cope Inventory (BCI)	Coping strategies and Social Support	Significant relationships exist between measures of social support and coping strategies among individuals with RA. RA engaged with their religion, active coping, acceptance, and positive reframing were the most

						commonly evaluated; whereas, denial, substance abuse, and humor coping strategies were the least evaluated.
Akram and Ilyas (2017)	HIV	200 participants, (male injecting-drug users' aged18-60 years).	Cross sectional study	Brief cope inventory, mental health status scale, suicidal behavior questionnaire (revised)	Coping strategies, mental health and suicidal behavior	Suicidal behavior was positively associated with psychological distress and human immunodeficiency virus status, whereas it was negatively associated with mental health, psychological well-being and coping strategies.
Vadsaria, Jabbar, Azam, Rizvi, Haider, and Naqvi (2017)	Solid organ cancer	488 patients	Cross sectional study	Brief COPE and Self Reporting Questionnaire (SRQ) 20	Coping strategies and depression	The frequently used coping styles were active coping, acceptance, religion and self-distraction. The significantly positive correlation of depression was found with active coping, planning, self-blame, venting, use of emotional support and substance use. While depression correlated negatively with acceptance, religion, self-distraction and humor.
Sohail, Yaseen and Ahmad (2017)	Chronic liver disease	21 terminal patients with chronic liver disease	Phenomenological study	In-depth interviews	Social Support, coping effects	Social support exerts multiple beneficial effects that help in coping with chronic diseases of terminal patients. Social support was a source of emotional gratification, a buffer in psychological distress, coping skills and a peaceful death for patients with chronic diseases.
Tariq Ismail, & Ashraf (2013)	cardiac patients	48 participants (24 males, 24 females)	A cross-sectional survey	The coping humor scale, perceived stress scale	Humor as coping mechanisms,	The results of the study didn't revealed the significant relationship for study variables and also didn't revealed the gender differences in using humor

						as a coping strategy for management of stress.
Asim, Saeed, Sohail, Safdar, & Sher (2017)	Cancer Patients	15 patients	A qualitative study based on hermeneutics phenomenology	Interview Guide	Coping with pain, dejection and social isolation	Researchers have indicated there are positive connections between religiosity and how well ill patients cope with pain and depression. The study specifically noted how important it was for doctors to pay attention to spiritual or religious needs of patients with cancer. Merely mentioned, patients want doctors to be aware of their religion. They want visits to include references to God and God objects.
Yasmeen, Khan, Jamshaid, & Salman. (2015).	Cardiac and renal problem	275 patients (131-cardiac and 144-renal failure) including 184 males and 91 females between age of 20 to 110 years	Quantitative cross sectional	A thirty six item scales was constructed to ask about patients' coping strategies (i.e., physical, psychological, and behavioral)	Coping with cardiac and renal problems	The results of the study indicated significant variations in coping styles used by patients with cardiac versus renal failure; renal failure patients mainly utilized physical coping strategies, while cardiac patients used more psychological and behavioral coping strategies.
Younas, Zeb, Arif, Khan, Ali, Ali, & Aziz. (2024).	inpatient or outpatient being diagnosed with a chronic illness by a health care professional	384 individuals	A cross-sectional design	Urdu-translated version of the Hospital Anxiety and Depression Scale, and the Brief COPE	Sociocultural determinants of psychological distress and coping strategies	The study found that increase in psychological distress among those with chronic illnesses underscores the necessity of community support and interventions. Factors influencing the choice and success of coping strategies include the type of chronic illness, living situation, educational background, illness duration, family situation, and the social support systems.

Results

Study Selection Process

The total 42 articles selected at first related to overall coping mechanisms used by various populations in Pakistan. After removing irrelevant to the topic of the present study, twenty-six were selected further related to use of coping strategies among participants with illnesses. There are nine research papers meet the inclusion criteria related to the copings strategies among patients with chronic illness. These researches then selected for systematic review. One is discarded later as it was related to the prevalence of chronic diseases among women.

Study Characteristics

The studies selected for the systematic review, mostly are the cross-sectional studies, two were qualitative studies used the phenomenological approach. In total, 66.6 % studies are quantitative and 33.3 % are qualitative studies. Sample sizes varied greatly in the different studies and ranged from 15 to 488 participants. The studies used psychometrically comprehensive forms or used suitable qualitative techniques and good fit in statistical techniques to analyze the data. Overall, adequate techniques were used to analyze the data. Brief Cope Inventory was most frequently used to assess coping strategies

The Association between Coping Strategies and Chronic Illnesses: Quantitative and Qualitative Research Design

The individual's coping with chronic illnesses i.e. Rheumatoid Arthritis (RA), HIV, solid organ cancer, chronic liver disease, cardiac patients, renal failure and cancer. The research articles selected for the systematic review in current study showed the mixed results for the use of coping strategies. The social support leads towards positive coping skills and majority of the sample preferred religious coping and positive reframing. The results of another study revealed that religious coping, self-distraction and acceptance are most commonly used coping styles among patients with solid organ cancer. In contrast with this the person who inject drugs (PWIDs) showed positive correlation with suicidal behavior and HIV+ and not preferred adaptive and maladaptive coping skills. The humor as a coping strategy also explored among patients with cardiovascular diseases and exhibited no correlation. The phenomenological account also showed that higher level of social support leads towards better coping among patients with chronic liver disease and religiosity is more used as coping mechanisms among cancer patients to deal with pain dejection and social isolation.

Discussion

This review shows the importance of coping for the maintenance of stress related to the chronic illnesses. More specifically, social support, psychological wellbeing, quality of life is studied along with coping skills. First, the review highlighted the useful influence of social support and coping strategies among various populations living with the chronic illnesses i.e. rheumatoid arthritis and chronic liver disease (Logan & Spitze, 1994; Ward & Leigh, 1993; Gleeson-Kreig, 2008; Pehlivan et al., 2012). The buffering hypothesis revealed that social support act as buffer in between of daily life stressors including the stressors of chronically ill patients and coping mechanisms (Cohen, 1991). Some other consistent findings also elaborated that Individuals use different coping mechanism to reduce stress and maintain psychological equilibrium (Falvo, & Holland, 2017).

More recent research has stated that perceived social support improves psychological resilience, lowers depressive symptoms, and improves general quality of life in patients with chronic illness (Baqutayan, 2022; Huang et al., 2021; Lee & Choi, 2023; Rahman et al., 2022). These results reinforce the ongoing importance of social support as a fundamental moderator of the stress, coping and health relationship.

Second, the results revealed the importance of religious coping skills and religiosity as coping mechanism among patients with cancer for pain dejection and social isolation. Moreover, the patients with rheumatoid arthritis and with solid organ cancer also preferred religious strategies and coping mechanisms. The above mentioned results also showed that depression is common among cancer and patients of other chronic illnesses and the participants involved in active as well as religious coping strategies. The empirical evidences also suggested that people in general preferred religious practices and religiosity in coping with pain and dejection. Recent evidence now exists that religious and spiritual based coping may be essential in resilience, hope, and emotional regulation within chronic illness situations (Koenig, 2004; Abu-Raiya & Pargament, 2022; Park et al., 2021; Thomas et al., 2023).

Third, the review highlighted the role of psychological wellbeing and coping strategies among HIV+ by studying the person who inject drug (PWIDs). The findings highlighted the use of negative coping which increase the level psychological distress further lead towards HIV+. The findings are consistent with the previous literature that coping strategies are the behavioral and psychological efforts which helps to minimize the effect of stress full life events (Taylor, 1988). Some other evidences found that coping mechanisms are important for acute stress or emergencies as well as for the patients of chronic illnesses such as cancer, HIV/IADS and depression (Kasi, et al., 2012)

Conclusion and Suggestions

The present study is about the systematic review of the eight articles selected on the inclusion criteria of coping among patients with physical chronic illnesses. The study reviewed that coping among various physical chronic problems are religious, active, positive reframing and emotional coping to manage the stress related to that particular disease. The participants facing cancer and solid organ cancer mostly rely on religious practices as a coping mechanism. Pakistan is a developing country, there is dearth of mental health practitioners and less acceptance of issues related to person's mental health. Depression is also common among cancer patients and chronic liver disease patients. Although the studies reveled that patients with chronic illness used problem focused as well as emotion focused coping, such as substance abuse, self-blaming and denial. But most of the researchers highlighted the importance of religious coping among Pakistani sample. The knowledge of appropriate coping mechanisms is very much important in the health care system to improve the health conditions in Pakistan.

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