A STUDY OF LIFE SATISFACTION AND LOCUS OF CONTROL AMONG PERSONS WITH CHRONIC PAIN

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ABSTRACT

Throughout the human civilizations life satisfaction is considered one of the highest goals of human life whereas locus of control plays a major role in goal attainment. Present study was undertaken with the objective of to assess the level of life satisfaction and locus of control among persons with chronic pain. Study was also planned to investigate the relationship between life satisfaction and locus of control among persons with chronic pain. Study was conducted at various hospitals & physiotherapy centers located in Uttar Pradesh and Uttarakhand where persons with chronic pain are getting treatment. In order to achieve the objectives, 60 persons with chronic pain were selected using stratified random sampling. Standardized tools by Diener et.al.(1985) and Rotter (1966) were used to assess the life satisfaction and locus of control respectively. Data were analyzed using appropriate statistical methods. Cross tabulations were done among relevant variables. Findings of the study reveal that persons with chronic pain have a low level of life satisfaction. Locus of control

has been found mostly external.

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Keywords: Chronic Pain, Locus of Control

INTRODUCTION

Life satisfaction is a key indicator in determining happiness and quality of life among individuals. In

the discipline of Psychology, life satisfaction is considered as cognitive as well as affective

evaluations of each and every sphere of life. It refers to a positive state of mind which encompasses

contentment and joy or excitement. It may be transitory or stable in nature. Zullig et al. (2005)

highlighted that life satisfaction is a general evaluation of life quality in terms of selected measures

or specific fields such as satisfaction from family, friends and academic experience. It is regarded as

the most comprehensive evaluations of an individual from his/her own life situations. Life

satisfaction has been defined as a global evaluation by the person of his or her life (Pavot, Diener,

Colvin, & Sandvik, 1991, p. 150).

Locus of Control: Desirable Aspect

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Rotter (1966) argued that human behaviors are controlled by rewards and punishments and these

determine beliefs of human beings about the underlying causes for behaviours or actions. Our

beliefs about what causes our actions further influence our behaviors and cognitions. People with

internal locus of control have a strong sense of self efficacy. They are more self confident and do

better at their workplace. People higher up in organizational structures tend to be more internal

(Mamlin, Harris, & Case, 2001). Those who have an external locus of control often don't have a belief

that they can transform their situations and can create a better ambience for their survival. But in

some situations an external locus of control can be appropriate particularly if a person's level of

competence in a particular area is not very strong.

Various scholars have suggested that men tend to have a higher internal locus of control than

women . In a study, Crowson et.al (1986) found that women residents perceived a more external

locus of control than men residents. Sometimes, LOC is seen as a personality trait but this may be

disingenuous, where as theoretical approaches and researches indicate that that LOC is largely

learned. There are evidences that to some extent, LOC is a response to circumstances. Some

psychological and educational interventions have been found to produce shifts towards internal

locus of control (e.g., outdoor education programs; Hans, 2000; Hattie, Marsh, Neill & Richards,

1997).

Chronic Pain: An Unbearable Complex Condition

In the discipline of medical science, chronic pain is defined as pain that lasts longer than 3 months or

pain that extends beyond expected healing time (Merskey & Bogduk, 1994). Many scholars define it

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as lasting longer than six months. It may persist for months or even years. The North American Nursing Diagnosis Association defines it as a state in which an individual experiences and reports severe discomfort or an uncomfortable sensation; the reporting of pain may be either by direct verbal communication or by encoded descriptors. Chronic pain is concerned with huge health care costs, productivity costs and negative welfare consequences for the individual, their family and society as a whole (Philips, 2009; Christensen et al., 2011; and Philips and Harper, 2011). Researches reveal that chronic pain may affect people to the larger extent that they cannot work efficiently, eat properly, participate in physical activity, or enjoy life their life. Persons with chronic pain are more than twice as likely to have difficulty working or to lose hours of productive time at work (Schofield et al., 2012 and Stewart et al., 2003). Causes of chronic pain are not easy to find. It may occur by various causes such as tissue damage, traumatic injury, diseases, surgery, a congenital condition such as curvature of the spine etc. Many people suffer from chronic pain in the absence of any past injury or evidence of illness. Sometimes, diagnosis can reveal that no injuries are there in the body but the patient experiences very unbearable pain. Researchers have found that repeated pain from an acute injury changes the way the brain lets you know you have pain. Even after the injury has healed, pain messages repeat again and again.

Literature Review: In a study done by Boonstra et.al (2008) compared to the general population, patients with chronic musculoskeletal pain reported lower satisfaction with 'life as a whole' and most life domains. The most consistent predictors of life satisfaction were marital status, mental health, vitality and pain. Chronic pain is associated with negative mood states and life satisfaction. Many persons with chronic pain accept pain as part of their life and do not seek help until it becomes severe and unbearable (Closs 2007). Other research findings suggest that chronic pain has a substantial adverse impact on the health-related quality of life of children and adolescents, resulting in significantly worse physical functioning, psychological functioning, social functioning, lower satisfaction with life, and poorer self-perceived health status (Merlijn et al. 2006; Palermo 2000; Palermo et al. 2008)

Individuals who believe that the prognosis for their pain is influenced particularly due to luck or fate are prone to engage in maladaptive coping strategies e.g. wishful thinking or catastrophizing (Crisson & Keefe, 1988). Along with that, an external LOC is associated with greater levels of pain and psychological distress, and less ability to utilize self-management coping skills (Melding, 1995; Toomey et al.,1991; Toomey, Seville, & Mann, 1995).

Persons having an internal LOC are thought to possess more effective coping skills (Melding, 1995; Seville & Robinson, 2000). They may be less stressed by pain (Melzack, 1999) and exhibit less functional impairment along with less pain intensity and less depression (Gibson & Helme, 2000) incomparison to persons having an external LOC.

In brief we may conclude that chronic pain is a composite condition that affects millions of people across the globe. Despite numerous researches, chronic pain remains poorly understood and notoriously hard to control. Even comprehensive treatment with painkilling prescription drugs helps; people with chronic pain are suffering psychologically and socially as well. Present study will try to understand & explore the factors of life satisfaction and locus of control among the persons with chronic pain.

Objectives: Following objectives have been planned to achieve:

- To assess the level of life satisfaction among persons with chronic pain
- To understand the nature of Locus of Control among persons with chronic pain
- To examine the relationship between life satisfaction and locus of control
- To investigate the difference of life satisfaction and locus of control between male and female participants

Hypotheses: Based on literature following hypothesis have been formulated for achieving the purpose and direction of this study.

- 1. Life satisfaction will be low among persons with chronic pain.
- 2. Locus of control will be external among persons with chronic pain.
- **3.** There will be a significant difference between male and female participant on life satisfaction and locus of control.
- **4.** There will be a positive relationship between life satisfaction and internal locus of control.
- 5. There will be negative correlation between life satisfaction and external locus of control.
- **6.** There will be significant difference on life satisfaction between participants with low and high income.

METHOD

Sample: Study was conducted on 60 participants aged 25-60 years including 25 females and 35 males' participants from different socioeconomic categories using stratified random sampling technique. Study was carried out at different hospital and physiotherapy centers located in the cities of Uttar Pradesh Uttarakhand states.

Inclusion and Exclusion Criteria for the Sample:

(A)Inclusion Criteria

- (i) Persons with suffering from pain at least six months duration and three to four times pain within a day are the another parameters for the participants.
- (ii) Pain caused by any physiological injuries, tissue damage or some other physical causes.
- (iii) Pain types such as back pain, knee related pain, musculoskeletal pain etc.
- (iv) Persons with mild psychosomatic and psychoneurosis disorders have been included in the sample.

(B) Exclusion Criteria

- (i) Psychotic Patients
- (ii) Severe Psychosomatic and Psychoneurotic Patients
- (iii) Persons with suffering from non curable diseases as Cancer and AIDS have not been included in the sample.

Measures:

- 1. Locus of Control Scale: This scale was developed by Rotter (1966) which contains 29 items. Each item presenting two statements: one presenting internal, and one external locus of control. Respondents must choose the statement with which they agree the most. Only external locus of control statements in each item are scored, if endorsed by the respondent. Therefore, a low score indicates an internal control while a high score indicates external control.
- 2. Satisfaction with Life Scale: This scale was constructed by Diener, et.al. in 1985. It is a 5 item scale designed to measure global cognitive judgments of one's life satisfaction. This scale is not a measure of either positive or negative emotional aspects .Response scale ranges from 7 (strongly agree) to 2 (strongly disagree).The SWLS takes a global approach to assessment because no specific domains are named within the scale and items are not specific in nature. This scale is widely used for different age groups and contains favourable psychometric properties. The item total correlations for five SWLS items were found .81, .63, .61, .75 and .66. (Diener, et.al.1985). Pavot & Dienner (1993) found test retest reliability ranging 0.83 to 0.50 intervals ranged from 2 weeks to 4 years. In general higher reliabilities were related with shorter test intervals. Principal components factor analysis (PCA) revealed

a single factor accounting for 66% of the variance. Factor loadings ranged from 0.61(item 5) to 0.84 (Item 1) (Diener et al. 1985).

RESULTS

Figure 1: Mean Value of Life Satisfaction & Locus of Control, N=60

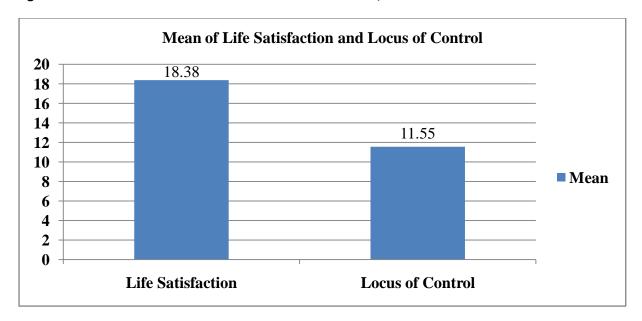


Figure 1 indicates that participants have a low level of life satisfaction and their general locus of control is external.

Table 1: Difference between Mean Values of Participants with High and Low Income on Life Satisfaction; Mean and t-value, N=60

Income Level	Mean Value of Life satisfaction	t-value
Low	14.22	6.99**
High	22.82	
Total	18.38	

Table 1 shows that there is a significant difference at both levels between the mean values of participants with high and low income on life satisfaction. As per the mean values it can be concluded that participants with high income group have a greater life satisfaction in comparison to the participants of low income group.

Figure 2: Mean Value of Locus of Control of Participants with High and low Income, N=60

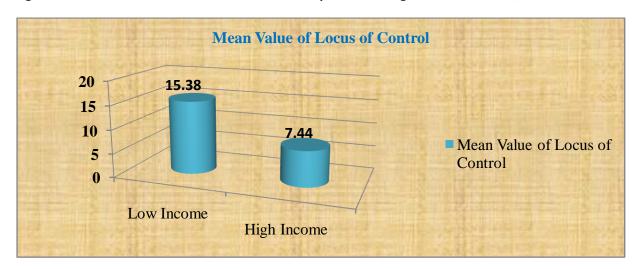


Figure 2 reveals that participants with low income have an external locus of control whereas participants with high income have an internal locus of control.

Table 2: Correlation between Life Satisfaction and External Locus of Control, N=60

Variables		Life Satisfaction	External Locus of
			Control
Life Satisfaction	Pearson Correlation	1	680**
	Sig. (2-tailed)		.000
	N	60	60
External Locus of Control	Pearson Correlation	680**	1
	Sig. (2-tailed)	.000	
	N	60	60
**. Correlation is sign	ificant at the 0.01 level		

Table 2 shows that there is a significant negative relationship between life satisfaction and external locus of control.

Table 3: Correlation between Life Satisfaction and Internal Locus of Control, N=60

Variables		Life Satisfaction	Internal Locus of Control
Life Satisfaction	Pearson Correlation	1	+.680**
	Sig. (2-tailed)		.000
	N	60	60
Internal Locus of Control	Pearson Correlation	+.680**	1
	Sig. (2-tailed)	.000	
	N	60	60
**. Correlation is sign	nificant at the 0.01 level		

Table 3 indicates that there is a significant positive relationship between life satisfaction and internal locus of control.

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DISSCUSSION

The findings confirm the most hypothesis of the present study. If we look at the first hypothesis then

we find that results indicate that it has been proved. Life satisfaction is low among the persons with

chronic pain. Then, we may say that chronic pain is a major constraint in the life of people. It seems

that pain is preventing them in enjoyment, happiness and activities pertaining to daily routine of

persons with chronic pain. Due to chronic pain they are unable to relate themselves with

mainstreaming of the society as well. They are also helpless in performing livelihood activities as well

as social sphere activities. Previous researches also suggest that chronic pain affects not just people's

personal lives and relationships but their contribution to society and the economy (Skjutar &

Müllersdorf 2010).

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As per the results persons with chronic pain have an external locus of control which means they

think that fate, chance and other external factors are responsible for their life. Researches argue

that people with external control think that they can'nt change their situation because their life is

controlled by outside forces (Zimbardo 1985). Person having such kind of mindset feel hopelessness

in facing critical and difficult situations and susceptible to learned helplessness.

Results clearly highlight that third hypothesis has not proved. Hence, we may say that there is no

difference with respect to gender on life satisfaction and locus of control.

Further, findings of the study state that fourth and fifth hypothesis has been proved. There is a

positive relationship between life satisfaction and internal locus of control along with that life

satisfaction is negatively correlated with external locus of control. Wigert (2001) conducted a study

on relationships among personality traits, locus of control, religious orientation, and life satisfaction

and he found that locus of control-external correlated with low levels of life satisfaction, and locus of

control-internal correlated with higher levels of life satisfaction. . Similar findings have been also

found in various research (Nejati et. al. 2002, Bränholm 1998)

Findings also reveal that there is a significant difference on life satisfaction between participants

with low and high income. This may be because money is a facilitating factor for fulfillment in getting

medical checkup, availing medicines or physiotherapy for healing of chronic pain. It also supports in

getting all kinds of physiological and materialistic needs which play a vital role to some extent in life

satisfaction.

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CONCLUSIONS

In conclusion, this study found few significant results. Chronic pain and less income are major constraints in life satisfaction and locus of control. There is a positive relationship between life satisfaction and internal locus of control and external locus of control is negatively associated with life satisfaction. A more internal locus of control is generally seen as desirable. Researches also suggest that persons with having an internal locus of control can also be labeled to as "self-agency", less functional impairment and self-determination", etc. Therefore, persons with chronic pain must be encouraged to shift their external locus of control towards internal locus of control.

REFERENCES

Boonstra, A.M., Reneman, M.F., Posthumus, J.B., Stewart, R.E., et al. (2008). Reliability of the life satisfaction questionnaire to assess patients with chronic musculoskeletal pain. *International Journal of Rehabilitation Research*, *31*(2), 181-183.

Bränholm, B. I., Fugl-Meyer, R.A., and Frölunde, A. (1998). Life Satisfaction, Sense of Coherence and Locus of Control in Occupational Therapy Students. 15(1), 39-44.

Christensen, J., Bilde, L. & Gustavsson, A. (2011). Socio-economic Consequences of Pain Intensive Diseases in Denmark. Danish Institute for Health Service Research,

Closs, S. J. (2007). Assessment of pain, mood and quality of life, in Pain in Older People, P. Crome, C. J. Main, and F. Lally, (Eds.), 11–19, Oxford University Press, New York, NY, USA,

Crisson, J. E., & Keefe, F. J. (1988). The relationship of locus of control to pain coping strategies and psychological distress in chronic pain patients. *Pain*, *35*(2), 147-154.

Crowson, T.W., Rich, E.C., Harris, I.B. (1986) A comparison of locus of control between men and women in an internal medicine residency. *Journal of Medical Education*, 10 (61).

Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The satisfaction with life scale. *Journal of Personality Assessment*, 49, 71-75.

Gibson, S. J., & Helme, R. D. (2000). Cognitive factors and the experience of pain and suffering in older persons. *Pain 85*(3), 375-383.

Hattie, J. A., Marsh, H. W., Neill, J. T. & Richards, G. E. (1997). Adventure education and outward bound: out-of-class experiences that have a lasting effect. *Review of Educational Research*, 67, 43-87.

Mamlin, N., Harris, K. R., Case, L. P. (2001). A methodological analysis of research on locus of control and learning disabilities: rethinking a common assumption. *Journal of Special Education*, Winter.

Melding, P. S. (1995). How do older people respond to chronic pain? A review of coping with pain and illness in elders. *Pain Reviews*, 2(1), 65-75.

Melzack, R. (1999). Pain and stress: A new perspective. In R. J. Gatchel & D. C. Turk (Eds.), Psychosocial factors in pain, 89-106. New York: Guilford Press.

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Merlijn, V. P. B. M., Hunfeld, J. A. M., van der Wouden, J. C., Hazebroek-Kampschreur, A. A. J. M., Passchier, J., & Koes, B. W. (2006). Factors related to the quality of life in adolescents with chronic pain. Clinical Journal of Pain, 22 (3), 306-315.

Nejati, M., Abedi, A., Aghaei, A., & Mohammadi, A. (2012). The relationship between locus of control with the academic performance of the M. A. students by considering the role of life quality and satisfaction with life. Interdisciplinary Journal of Contemporary Research in Business, 4 (5).

Palermo, T. M. (2000). Impact of recurrent and chronic pain on child and family daily functioning: A critical review of the literature. Developmental and Behavioral Pediatrics, 21(1), 58-69.

Palermo, T. M., Eccleston, C., Lewandowski, A. S., Williams, A. C., & Morley, S. (2010). Randomized controlled trials of psychological therapies for management of chronic pain in children and adolescents: An updated meta-analytic review. Pain, 148(3), 387–397.

Pavot, W., Diener, E., Colvin, C.R., & Sandvik, E. (1991). Further validation of the satisfaction with life scale: evidence for the cross-method convergence of well-being measures. Journal of Personality Assessment, 1 (50), Routledge, 149-161.

Pavot, W., & Diener, E. (1993). Review of the satisfaction with life scale. Psychological Assessment, 5, 164-172.

Philips, C. & Harper, C. (2011). The economics associated with persistent pain. Current Opinion in Supportive and Palliative Care, 5, 127-130.

Philips, C. (2009). The cost and burden of chronic pain. Reviews in Pain, 3, 2-5.

Rotter, J. B. (1966). Generalized expectancies for internal versus external control of reinforcement. Psychological Monographs, 80(1), 1-28.

Schofield, D.J., Callander, E.J., Shrestha, R.N., Passey, M.E., Percival, R. & Kelly S.J. (2012). Association between co-morbidities and labour force participation amongst persons with back problems. *Pain*, 153, 2068-2072.

Seville, J. L., & Robinson, A. B. (2000). Locus of control in the patient with chronic pain. In R. J. Gatchel & J. N. Weisberg (Eds.), Personality Characteristics of Patients with Pain, 165-179. Washington, DC: American Psychological Association.

Skjutar, A., Müllersdorf., M. (2010). Adapt, discover and engage: a qualitative interview study with patients living with chronic pain. Journal of Nursing and Healthcare of Chronic Illness, 2 (4), 254.

Stewart, W.F., Ricci, J.A., Chee, E. et al. (2003). Lost productive time and cost due to common pain conditions in the US workforce. Journal of the American Medical Association, 18, 2443-2454.

Toomey, T. C., Mann, J. D., Abashian, S., Thompson-Pope, S. (1991). Relationship between perceived self-control of pain, pain description and functioning. *Pain*, 45(2), 129-133.

Toomey, T. C., Seville, J. L., & Mann, J. D. (1995). Pain Locus of Control scale: Relationship to pain description, self-control skills and psychological symptoms. *Pain Clinic*, 8(4), 315-322.

Wigert, R.L. (2001). An investigation of the relationships among personality traits, locus of control, religious orientation, and life satisfaction: A path analytical study. *ETD Collection for University of Nebraska – Lincoln,* Paper AAI3028663.

Zimbardo, P. G. (1985). Psychology and Life. Glenview, IL: Scott Foresman

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Zullig, K.J., Valois, R.F., Huebner, E. S. & Drane, J.W. (2005). Adolescent health-related quality of life and perceived satisfaction with life. *Journal of Quality of Life Research*, 14, 1573-1584.
