# Coping Strategies and Suicidal risk among individuals with Renal Failure: Moderating role of Religiosity

## Mobeen Mehmood

Department of Professional Psychology, Bahria University Islamabad

MS Clinical Psychology

Dr Noshi Iram Zaman

and

Ma'am Shazia Yusuf

Oct 16,2020

# COPING STRATEGIES AND SUICIDE RISK AMONG INDIVIDUALS WITH RENAL FAILURES: MODERATING ROLE OF RELLIGIOSITY

Zorizz, mozziurin (o nozz (	
$\mathbf{B}\mathbf{y}$	
Mobeen Mehmood	
Approved	
Ву	
(Dr.Noshi Iram Zaman)	
HOD,DPP	
Supervisor	
(Miss Shazia Yusuf)	
Co-supervisor	

**External Examiner** 

#### THIS THESIS SUBMITTED

#### BY

#### **MOBEEN MEHMOOD**

# IS ACCEPTED BY THE BAHRIA UNIVERSITY ISAMABAD IN PARTIAL FULFILMENT OF THE REQUIREMENT FOR THE DEGREE OF MASTERS OF SCIENCE IN POFESSIONAL CLINICAL PSYCHOLOGY

2020

APPROVED BY
DR. NOSHI IRAM ZAMAN
HOD, PP

MS. SHAZIA YUSUF LECTURER

DEPARTMENT OF PROFESSIONA PSYCHOLOGY BAHRIA UNIVERSITY, ISLAMABAD CAMPUS **Dated:** Oct 16,2020

ALL THE PROCEDURES FOLLOWED AND MATERIAL USED WERE
REVIEWED AND APPROVED BY THE HIGHER EDUCATION
RESEARCH COMMITTEE (HEC), BAHRIA UNIVERSITY, ISLAMABAD

# THIS THESIS SUBMITTED

 $\mathbf{BY}$ 

### **MOBEEN MEHMOOD**

IS ACCEPTED BY THE BAHRIA UNIVERSITY ISLAMABAD
IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR THE
DEGREE OF MASTER OF SCIENCE IN CLINICAL PSYCHOLOGY
2020

	EXAMINER
)ated·	

6

**CERTIFICATE OF ORIGINALITY** 

This is certified that the intellectual contents of the thesis:

Coping Strategies and Suicidal risk among individuals with Renal Failure: Moderating role

of Religiosity

Are the product of my research work except, as cited property and accurately in the

acknowledgments and references, the material taken from such sources as research journals,

books, internet, etc. solely to support, elaborate, compare, and extend the earlier work. Further,

this work has not been submitted by me previously for any degree, nor it shall be submitted by

me in the future for obtaining any degree from this University, or any other university or

institution. The incorrectness of this information, if proved at any stage, shall authorities the

University to cancel my degree.

**Signature:** 

**Date:** Oct 16, 2020

Name of the Research Student: Mobeen Mehmood



#### **BBb BBahria University**

 $\begin{array}{c} {\rm Discovering\ Knowledge} \\ {MS\text{-}18} \end{array}$ 

#### **Thesis Completion Certificate**

Scholar's Name: Mobeen Mehmood Registration No. <u>59642</u>

Programme of Study: MS Clinical Psychology

Thesis Title: "Coping Strategies and Suicidal risk among individuals with Renal Failure:

#### **Moderating role of Religiosity**"

It is to certify that the above scholar's thesis has been completed to my satisfaction and, to my belief, its standard is appropriate for submission for examination. I have also conducted plagiarism test of this thesis using HEC prescribed software and found similarity index at 12% that is within the permissible limit set by the HEC for the MS/Mphil degree thesis. I have also found the thesis in a format recognized by the BU for the MS/Mphil thesis.

Supervisor's Signature:

Name: Dr. Noshi Iram Zaman

**Date:** <u>16 Oct, 2020</u>



#### **Bahria University**

 $\begin{array}{c} {\rm Discovering\ Knowledge} \\ {MS-18} \end{array}$ 

#### **Author's Declaration**

I MOBEEN MEHMOOD hereby state that my MS thesis titled

# "Coping Strategies and Suicidal risk among individuals with Renal Failure: Moderating role of Religiosity"

is my own work and has not been submitted previously by me for taking any degree from this university **Bahria University**, **Islamabad** or anywhere else in the country / world.

At any time if my statement is found to be incorrect even after my Graduation, the university has the right to withdraw / cancel my MS Degree.

Name of Scholar: Mobeen Mehmood

Date: 16 Oct 2020



**Bahria University** 

Discovering Knowledge MS-18

## **Plagiarism Undertaking**

I, <u>MOBEEN MEHMOOD</u> solemnly declare that my research work presented in the thesis titled "Coping Strategies and Suicidal risk among individuals with Renal Failure: Moderating role of Religiosity"

is solely my research work with no significant contribution from any other person. Small contribution/help wherever taken has been duly acknowledged and that complete thesis has been written by me.

I understand the zero-tolerance policy of the HEC and Bahria University towards plagiarism. Therefore, I as an author of the above-titled thesis declare that no portion of my thesis has been plagiarized and any material used as the reference is properly referred/cited.

I undertake that if I am found guilty of any formal plagiarism in the above-titled thesis even after awarding of MS degree, the university reserves the right to withdraw/revoke my MS degree and that HEC and the University have the right to publish my name on the HEC / University website on which names of students are placed who submitted plagiarized thesis.

Student/Author's Sign: \_

Name of Student: Mobeen Mehmood

#### **DEDICATED**

#### TO

This thesis is dedicated to my beloved parents, my siblings who always been there for me, motivated me at each and every step, encouraged and supported me in a journey to complete my degree and encounter hardships of life with a courage

#### **ACKNOWLEDGEMENT**

*In the Name of Allah, the* 

Most Beneficent and the Most Merciful.

My humble gratitude to ALLAH ALMIGHTY who has always blessed me with the best and countless blessings. And helped me to face hardships and always guide me the right direction. All the praises and thanks are to ALLAH who gave me persistence to complete my thesis.

I would like to thanks my Supervisor **Dr. Noshi Iram Zaman (HOD of PP)** for being so supportive. Despite of having tough and busy schedule she was always available for me and my work. And I would like to express my sincere gratitude to my co-supervisor **Ma'am Shazia Yusuf** for her supervision support and guidance. Who encouraged me and had faith in my abilities. She taught me every skill which was needed to complete my thesis.

Achieving whatever I have right now wouldn't have been possible without the immerse support of my family. A simple thank you won't justify the hardships they encountered for my bright future. My deepest gratitude goes to my parents, Siblings, friends and relatives.

I would like to thank a few people who helped me in my thesis. Ms. Ambreen Fatima, Ms Sadaf zeb, my favorite Muniba Mumtaz and Iqra Arif for helping me in the scale translation phase. My special thanks to Ms. Noor-ul- Ain Haider, Ms. Faiza Nisar and Ms. Sidra zaki for their time and participation in committee approach.

I'm thankful to few amazing people whose prays and sincerity helped me a lot in whole tenure of Master's degree my friends for all the emotional support and care you people provided.

MOBEEN MEHMOOD

# TABLE OF CONTENTS

i15	List of tables
	List of figures
v19	List of graphs
i20	List of annxtures
21	Abstract
Error! Bookmark not defined.	CHAPTER-I
Error! Bookmark not defined.	Introduction
4	Coping Stretagies
5	Models and theories of Coping
9	Suicide risk
Error! Bookmark not defined.0	Theoretical framework of suicide risk
Error! Bookmark not defined.1	Religiosity
Error! Bookmark not defined.2	Theoretical Background of Religiosity
Error! Bookmark not defined.4	CHAPTER-II
Error! Bookmark not defined.4	Literature review
Error! Bookmark not defined.4	Coping strategies
Error! Bookmark not defined.5	Suicidal risk
Error! Bookmark not defined.6	Religiosity
Error! Bookmark not defined.7	Coping strategies and suicidal risk

Suicidal risk and religiosity	Error! Bookmark not defined.
Rationale	
Conceptual Model	20
CHAPTER-III	Error! Bookmark not defined.
Method	Error! Bookmark not defined.1
Objectives	Error! Bookmark not defined.1
Hypotheses	Error! Bookmark not defined.1
Sample	Error! Bookmark not defined.1
Operational definitions	Error! Bookmark not defined.2
Instruments	Error! Bookmark not defined.2
Research Design	Error! Bookmark not defined.4
Procedure	Error! Bookmark not defined.4
Ethical consideration	Error! Bookmark not defined.
CHAPTER-IV	Error! Bookmark not defined.
Phase-I Translation and Tryout of instrument	Error! Bookmark not defined.
Objectives	Error! Bookmark not defined.
Instrument	Error! Bookmark not defined.
Process of translation	Error! Bookmark not defined.
Discussion	Error! Bookmark not defined.9
CHAPTER-V	30

Phase-II pliot study	30
Objectives	Error! Bookmark not defined.
Hypothesis	Error! Bookmark not defined.
Sample	Error! Bookmark not defined.
Instruments	Error! Bookmark not defined.
Procedure	Error! Bookmark not defined.
Results	Error! Bookmark not defined.2
Discussion	Error! Bookmark not defined.8
CHAPTER-VI	Error! Bookmark not defined.0
Main study	Error! Bookmark not defined.0
Objectives	Error! Bookmark not defined.
Hypotheses	Error! Bookmark not defined.
Sample	Error! Bookmark not defined.
Instruments	Error! Bookmark not defined.
Procedure	Error! Bookmark not defined.
CHAPTER-VII	Error! Bookmark not defined.
Results	Error! Bookmark not defined.
CHAPTER-VIII	Error! Bookmark not defined.
Discussion	Error! Bookmark not defined.
Conclusion	Error! Bookmark not defined.

Implicat	tions of studyError! Bo	okmark not defined.
Limitati	ons of the study	79
Recomn	nendations	79
Reference	es	81
	LIST OF TABLES	
Table-1	Frequencies and percentages of Demographic characteristics	32
	of sample(N=75)	
Table-2	Psychometric properties of study variables coping	35
	Strategies, suicide risk and religiosity (N=75)	
Table-3	Inter scale correlation of coping strategies, suicide risk	36
	and religiosity among individuals with renal failures(N=75)	
Table-4	Multiple regression analysis to predict suicide risk by	37
	coping strategies and Religiosity(N=75)	
Table-5	Frequencies and percentages of Demographic characteristics	43
	of sample(N=250)	
Table-6	Psychometric properties of study variables coping	46
	Strategies, suicide risk and religiosity (N=250)	
Table-7	Inter scale correlation of coping strategies, suicide risk	47

	and religiosity among individuals with renal failures(N=250)	
Table-8	Multiple regression analysis to predict suicide risk by	48
	coping strategies and Religiosity(N=250)	
Table-9	Moderation analysis of Extrinsic religiosity on problem	49
	focused coping and suicide risk among individuals with renal failures	
	(N=250)	
Table-10	Moderation analysis of Intrinsic religiosity on problem	50
	focused coping and suicide risk among individuals with renal	
	failures(N=250)	
Table-11	Moderation analysis of extrinsic religiosity on emotional	52
	focused coping and suicide risk among individual with renal	
	failures (N=250)	
Table-12	Moderation analysis of Intrinsic religiosity on emotional	53
	focused coping and suicide risk among individual with renal failures	
	(N=250)	
Table-13	t-test analysis on difference between gender among	55
	coping strategies, suicide risk and religiosity(N=250)	
Table-14	one-way Anova on coping strategies, suicide risk and	57

	religiosity among age groups of individual with renal	
	failures(N=250)	
Table-15	one-way Anova on coping strategies, suicide risk and	59
	religiosity among education levels of individual with renal	
	failures(N=250)	
Table-16	Post-hoc analysis of problem focused coping and education	61
	levels among individuals with renal failures(N=250)	
Table-17	Post-hoc analysis of emotional focused coping and education	64
	levels among individuals with renal failures(N=250)	
Table-18	Post-hoc analysis of Suicide risk and education levels among	67
	individuals with renal failures(N=250)	
Table-19	Post-hoc analysis of Extrinsic religiosity and education	69
	levels among individuals with renal failures(N=250)	
Table-20	Post-hoc analysis of Intrinsic religiosity and education	71
	levels among individuals with renal failures(N=250)	

# LIST OF FIGURE

Figure 1	Model of suicide risk	11
Figure2	Conceptual Framework	20

# LIST OF GRAPHS

Graph 1	Moderating role of intrinsic religiosity on the relationship	51
	between problem focused coping and suicide risk.	
Graph 2	Moderating role of intrinsic religiosity on the relationship	54
	between emotional focused coping and suicide risk.	

# LIST OF ANNEXURES

Annexure-A	Permission for Scale of Coping styles scale(CSS)	90
Annexure-B	Permission for use and translation of Suicide	91
	Risk Scale(SRSMI)	
Annexure-C	Permission for Scale of Muslim religiosity	92
Annexure-D	Inform Consent	93
Annexure-E	Demographic sheet	94
Annexure-F	Coping styles scale (CSS)	95
Annexure-G	Suicide risk scale for medical inpatients(SRSMI)	96
Annexure-H	Muslim Religiosity Scale	97
Annexure-I	Plagiarism Report	100

#### **Abstract**

The purpose of the current study was to explored the relationship between coping strategies, suicide risk and religiosity among individuals with renal failures. For this purpose, 250 individuals with renal failures were taken from different hospitals of Rawalpindi, Islamabad and Lahore. Correlational research design was followed and study was conducted into three phases, translation and try out, pilot study, main study. Purposive sampling technique was used to collect data. Three assessment tools were used i.e. Coping strategies were assessed by coping styles scales(CSS) (Zaman & Ali,2015), suicide risk was assessed by suicide risk scale for medical inpatient (Park et al., 2018) and religiosity was assessed by Muslim religiosity scale (Khan, 2014). Firstly, it was hypothesized that there is a relationship between coping strategies, suicide risk and religiosity. Secondly it was hypothesized that, coping strategies significantly predicts the suicide risk. Thirdly it was hypothesized that religiosity moderates the relationship between coping strategies and suicide risk. The findings of the study revealed that there is significant relationship between coping strategies, suicide risk and religiosity among individuals with renal failures. The result of regression analysis showed that emotional focused coping predicts the suicide risk. Moreover, moderation analysis indicated that intrinsic religiosity moderates the relationship between problem focused coping and suicide risk. Finding indicates the importance of religiosity and problem focused coping to overcome the possible risk of suicide and to promote better mental wellbeing. This study provides guideline to the mental professionals to identify the possible suicide risk and to use religious therapeutic interventions in order to reduce suicide risk and improve coping styles among individuals with renal failures.

**Keywords**: coping strategies, suicide risk, religiosity, renal failure.