



COMPARATIVE STUDY OF MENTAL HEALTH OF HOUSE WIVES AND WOMEN WORKING

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ABSTRACT :

Mental health is a level of psychological well-being or an absence of mental illness. According to the positive health or of holism, mental health may include an individual's ability to enjoy life, and to create a balance between life activities and efforts to achieve psychological resilience. In this paper attempts has been made to do the comparative study of mental health of working women and house wives. The main objective of this study was to find out the mental health of working women and house wives. The sample consisted of 30 women, out of which 15 were



working and 15 were house wives. All of them were selected randomly from the Nainital district of Uttarakhand. As a tool "Mental Health inventory" (MHI) constructed by Jagdish and Shrivastave (1983) was used. With the help of this scale six broad dimensions of mental health - Positive self evaluation, Perception of reality, Integration of personality, Autonomy, Group oriented attitudes and Environmental competence have been measured. The obtained data was analyzed with the help of t-test, to know the mean difference between working women and house wives. The result revealed that there was no significant difference in overall mental health of working women and house wives, although the scores of working woman were higher in comparison to house wives.

KEYWORDS : Mental health, working, house wives.

INTRODUCTION

Mental health is a level of psychological well-being or an absence of mental illness - the state of someone who is functioning at a satisfactory level of emotional and behavioural adjustment. According to the positive psychology or of holism, mental health may include an individual's ability to enjoy life, and to create a balance between life activities and efforts to achieve psychological resilience. **According to Karl Menninger (1945)** mental health is "the adjustment of human being to the world and to each other with a maximum effectiveness and happiness. It is the ability to maintaining an even temper, an alert intelligence, socially considerate behaviour and a happy disposition." According to the **U.K. surgeon general (1999)** mental health is the successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and providing the ability to adapt to change and cope with adversity.

Components of mental health: Basic cognitive and social skills are regarded as an important component of mental health in the light of their impact on all aspects of everyday life. **Cognitive skills**

include the ability to pay attention, remember and organize information, solve problems, and make decisions; **social skills** involve the ability to use one's own repertoire of verbal/non-verbal abilities to communicate and interact with others. **Emotional regulation**, i.e. the ability to recognize, express and modulate one's own emotions, is also regarded as an important component of mental health. **Empathy**, i.e., the ability to experience and understand what others feel without confusion between oneself and others, enables individuals to communicate and interact in effective ways and to predict actions, intentions, and feelings of others. **Flexibility and ability to cope** with adverse events are also deemed important to mental health maintenance. The basic **ability to function in social roles** and to participate in meaningful social interactions is an important aspect of mental health.

Mental health of working women: So far as the mental health of women is concerned there are some common mental health conditions that are found to be common in women from various parts of the world. These are Anxiety, depression, post traumatic stress disorder and eating disorder. In India, women are the pivot of the family. Working women have to bear more responsibilities than non-working women. Mental health of working women have been found to be affected by four major challenges:

Work-life balance- Working women tend to be like a pendulum clock oscillating between work demands and home chores. Between these oscillations, there are social expectations to match up to and the constant anxiety of keeping up with demands of both the worlds, knowing that the slightest error can cost her so much more than her male counterpart. Most women find themselves juggling responsibilities at home and outside, adding to the workload and emotional burden. At the same time, at home, a woman is expected to continue fulfilling her 'natural' duties as a mother and wife, and is put under extra scrutiny when she chooses to work outside the house.

Productivity- Today's world understands productivity, in both professional and personal lives, is integrating responsibilities throughout the various parts of lives. The ability to be able to work outside the household means that all domestic responsibilities, including household chores and rearing children, are not viewed as 'professional' at many workplaces. Workplaces are often unwilling or unable to provide the flexibility women need, which also plays a role in affecting their mental health.

Career over family- India has grown to be more welcoming to women at work. However, if working women opts to focus on her career over having children or having a family, she is Frowned upon. In India, society is still fighting the patriarchy, and men are still considered the sole "bread-winner of the family". Hence, working women often face the question, "Do you really need to?" This is also one of the reasons for higher attrition rates of women at work.

Finding the me-time- The guilt of working all the time – even after regular working hours has become a norm. For women to be able to find some time to focus on the self has been challenging. The complicated mix of managing family, work, and social life means that there is very little me-time left. Added to that, the norm of long working hours leads to outright unhealthy living conditions like severe lack of sleep and poor food habits. This leads to the negligence of wellbeing, with sacrifices made of the body and mind. Sleep disturbances interfere with dopamine levels, leading to an imbalance associated with bipolar and schizophrenic disorders.

REVIEW OF RELATED STUDIES

A number of studies have been done about the mental health of working and non-working women. Patil mona k.(2017) has found significant difference in stress management by female teachers in higher education and house wives. Shukla shruti, Jaiswal mamta (2017) has found significant difference between stress score of working and non- working women, study has found out that working women has significantly higher level of stress than non-working women. Islahi Fatima (2017)

has found no significance difference between the stress level of working and non-working women. In their study Mankani, Yenagi (2012) have found no significance difference between mental health of working and non-working women. Firdos saba, Amanullah (2017) have found highly significant difference in the mental health of dalit working and non-working women. Study has found dalit non-working women were less mentally healthy as compare to dalit working women. Adhikari harasankar (2012) has found significant difference in anxiety and depression level of working and non-working mothers. According to the study working mothers had high level of anxiety and depression as compared to non-working mothers.

In his research Patil maddangouda (2016) has found the significant difference between working and non-working married women. According to the study the married working women have very high level of stress in comparison to their non-working counterparts. Dudhatra revati r. Jogsan yogesh (2012) have also found the significant difference between mental health of working and non-working women. According to the study non-working women have better mental health as compared to working women. Pandey manju, Shrivastava Neharshi (2014) research has found that the significant difference between working and non-working women mental health. According to the study house wives have batter mental health in comparison to working women.

Chawra hashmukh m. (2018) found significant difference in the mental health of working and non-working women in his research .Singh shelendra kumar (2015) have also found the significant difference between mental health of working and non-working women. According to the study non-working women have better mental health as compared to the working women. Azim Samval, Lembarg (2015) has found significant difference between working and non-working adult women in anxiety, stress and depression. According to the study adult working women have very high level of anxiety, stress and depression than non-working adult women.

OBJECTIVES AND HYPOTHESES OF THE STUDY: Following objectives and hypotheses had been framed for the study -

- First object of the study was to find out whether there is any significant difference between working women and house wives upon various dimensions of mental health as- Positive self evaluation, Perception of reality, Integration of personality, Autonomy, Group oriented attitudes and Environmental competence. It was hypothesized that there would be no significant difference between the two groups.
- Second object of the study was to find out the impact of working and house wives status upon overall mental health level of women. It was hypothesized that there would be no significant impact of work status upon overall mental health of the two groups.

METHOD

Sample:

The total sample comprised of 30 women. Who have been selected with the help of randomized sampling technique from Nainital district of Uttarakhand. Out of 30 women,15 were taken from the working category and 15 women were the house wives. The age range of the sample was between 30 to 40 years of age.

Tools used:

For the collection of data “Mental Health inventory” (MHI) constructed by Jagdish and Shrivastav (1983) has been used. It is an individually administering inventory for mental health. The inventory has a total 56 items, In which 32 items are false keyed and 24 items are true keyed. All items of the scale are in question form demanding information for each in any of the 4 option: always, often, rarely and never. The items were scored as 4,3,2,1, respectively. The reliability of the inventory is .73 and validity is according to Gold Berg .54.

Techniques of data collection:

In the study interview and questionnaire were used for the testing of proposed hypothesis. Each subject was treated individually. Consent was also taken from the respondents after explaining to them the purpose of the research as well as the academic use of the data later on. Before administering the tests a short intake interview was taken where their doubts related to the tests were dealt with. Simple clarifications of word meanings were given on request without influencing subjects responses. Scoring was done as per given in the manual. After the data collection Mean, SD and t-test had been calculated to test the significance of Mean of the two groups.

RESULTS

Findings have been summarized in the table-1. Table shows the dimension wise Mean, SD and t scores of mental health of working women and house wives. A close perusal of the table shows that the first dimension of mental health was positive self evaluation. In this dimension the impact of work was found non-significant ($t=1.62$). However working women ($M=34.93$) have shown more positive self evaluation than house wives ($M=33.06$). The second dimension of mental health was perception of reality. In this dimension the impact of work was found non-significant ($t=0.42$). However working women ($M=23.66$) have shown more perception of reality than house wives ($M=22.93$).

The third dimension of mental health was integration of personality. In this dimension the impact of work was found non-significant ($t=1.46$). However working women ($M=37.53$) have shown more integration of personality than house wives ($M=34.73$). The fourth dimension of mental health was autonomy. In this dimension the impact of work was found significant ($t=2.73$). The working women ($M=18.66$) were found more autonomy than house wives ($M=16.86$) women.

The fifth dimension of mental health was Group oriented attitudes. In this dimension the impact of work was found non-significant ($t=0.27$). Although, working women ($M=32.26$) have shown more Group oriented attitudes than house wives ($M=31.86$). The sixth dimension of mental health was Environmental competence. In this dimension the impact of work was found non-significant ($t=0.91$). Here working women ($M=28.06$) have shown less Environmental competence than house wives ($M=29.4$). Dimension wise graphical presentation of scores have been done in the figure-1.

The overall scores on mental health reveals that the impact of work upon working women ($M=28.06$) and house wives ($M=29.40$) was found to be non-significant. These scores have been presented in Figure-2.

Table: 1- Level of Mental Health and its dimension of working women and house wives:

Dimension of Mental Health	Working women			House wives			t-value	remarks
	N	Mean	SD	N	Mean	SD		
Positive self evaluation	15	34.93	2.52	15	33.06	3.67	1.62	NS
Perception of reality	15	23.66	4.22	15	22.93	5.09	0.42	NS
Integration of personality	15	37.53	3.88	15	34.73	6.31	1.46	NS
Autonomy	15	18.66	1.91	15	16.86	1.68	2.73	S
Group oriented attitudes	15	32.26	3.73	15	31.86	4.15	0.27	NS

Environmental competence	15	28.06	2.96	15	29.40	4.77	0.91	NS
Mental Health (total)	15	175.13	14.87	15	168.86	21.75	0.92	NS

Figure 1- Figure showing the mean values of working and house wives women on various dimensions of mental health-

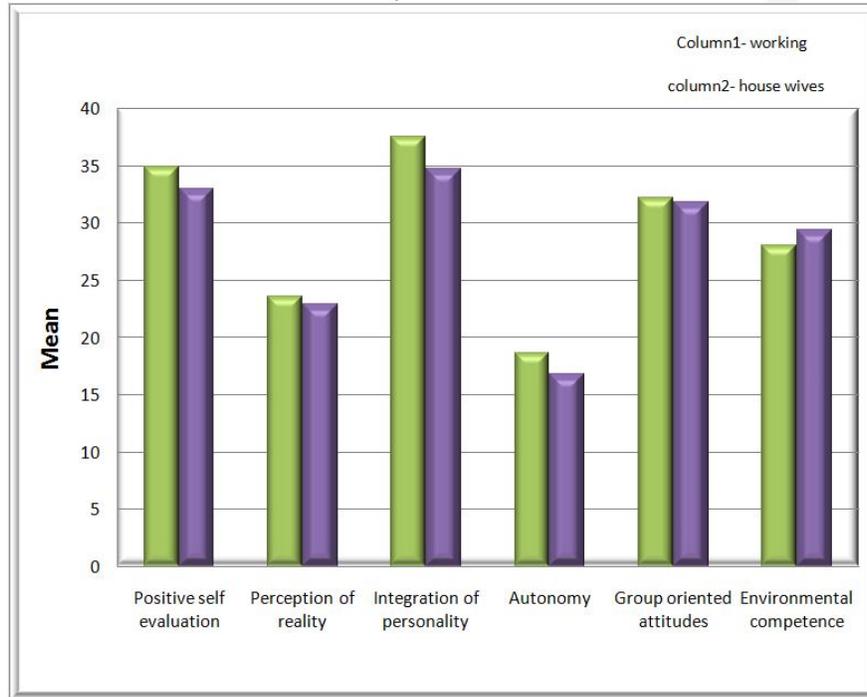
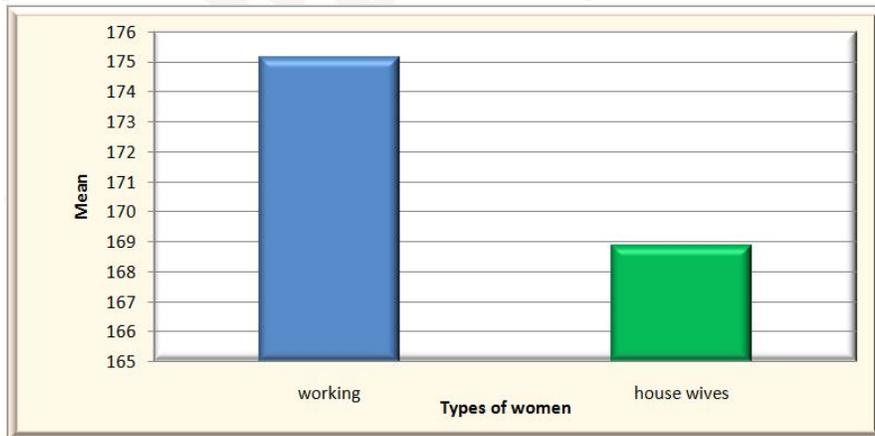


Figure 2- Overall mental health scores of working and house wives women-



DISCUSSION

In this study attempts had been made to assess various dimensions of mental health of working women and house wives. Six dimensions of mental health had been measured. The first dimension was **Positive self evaluation**. It includes self- confidence, self acceptance, self identity, feeling of worth- whileness, realization of one’s potentialities, etc. In our study the impact of work place was not found significant, both the groups have shown almost equal Positive self evaluation. But in comparing the

mean score there is some difference, working women's positive self evaluation are better than house wives. The second dimension was **Perception of reality**. It is related to the perceptions free from need distortion, absences of excessive fantasy and a broad outlook on the world. In our study the impact of work place was not found significant, both the groups have shown almost equal Perception of reality. But in the mean scores of working women and house wives perception of reality have some difference. Working women's perception of reality are better than house wives. It may be because of their experiences and exposure to the world outside the family. The third dimension was **Integration of personality**. It indicates balance of psychic forces in the individual and the ability to understand and to share other people's emotions, the ability to concentrate at work and interest in several activities. In our study the impact of work place was not found significant, both the groups have shown almost equal Integration of personality. While comparing the mean scores, working women's integration of personality was found to be better than house wives. It may be the result of better developmental opportunities than their counterparts.

The fourth dimension was **Autonomy**. It includes stable set of internal standards for one's action, dependence for own development, upon own potentialities rather dependence on other people. In our study the impact of work place was found significant, both the groups have shown difference in autonomy. Working women have appeared to be more autonomous than house wives. It seems to be the result of their economic independence. The fifth dimension was **Group oriented attitudes**. It is association with the ability to get along with others, work with others and ability to find recreation. In our study the impact of work place was not found significant, both the groups have shown almost equal Group oriented attitudes. But in comparing the mean scores of working women and house wives, group oriented attitudes are different. Working women's group oriented attitudes are found to be better than house wives. The sixth dimension was **Environmental competence**. It includes efficiency in meeting situational requirements, the ability to work and play the ability to take responsibilities and capacity for adjustments. In our study the impact of work place was not found significant, both the groups have shown almost equal Environmental competence. But in the mean score of working women and house wives environmental competence there are some difference, working women's environmental competence are better than house wives.

The overall mental health scores of working women and house wives have also been compared to assess the overall impact of being working and non-working upon mental health status of women. In the study it was found that working women have shown the higher level of mental health than house wives. However this difference was not enough to consider being working as a determinant of mental health. Our results are in compliance with Mankani, Yenagi (2012), who have found no significance difference between mental health of working and non-working women. Shukla shruti, Jaiswal mamta (2017) has found significant difference between stress score of working and non-working women; study has found out that working women has significantly higher level of stress than non-working women. It may be concluded that being working is helpful in the development of personality and mental health, but it can not be considered as a determining factor of mental health among women.

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