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A Comparative Study on Mental Health and Depression among Working and Non-Working Women in Madhubani District, Bihar, India

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ABSTRACT: The sense of one's identity or self is an important dimension of individual's personality giving each one of us unique individuality. Women and depression is holding a relationship of much interest over the last two decades. As more and more women enter the work force, they are increasingly exposed not only of the same work environment as men, but also to nuique pressure created by multiple roles and conflicting expectations . It has long been observed that women are about twice as likely to become clinically depressed (to have dysthymia or unipolar depression) as are men. These differences occur in most countries around the world. Depression are normal features of our lives. Modernity brought women education in its wake and she changed the arena of activity. She stepped out of the household of house and joined service like man. Now she got admiration, equality and opportunity. But the euphoria was ephemeral as she was supposed to take to this job as an additional responsibility. She not expected to shrink household work. This brought problems like strain and depression. A women by nature is expressive emotional and sensitive. Physiological social and cultural background of women probably plays a key role in mending a women's attitude and natures towards the external relation we know that women are generally more at risk to develop psychological disorder and depression in particular. Women are more likely than men to be adversely affected by mental disorders, the most common being anxiety and depressive disorders .

KEYWORDS: Depression, Women, Mental disorders, Anxiety and work.

I. INTRODUCTION

The sense of one's identity or self is an important dimension of individual's personality giving each one of us unique individuality. Women and depression is holding a relationship of much interest over the last two decades. As more and more women enter the work force, they are increasingly exposed not only of the same work environment as men, but also to nuique pressure created by multiple roles and conflicting expectations . It has long been observed that women are about twice as likely to become clinically depressed (to have dysthymia or unipolar depression) as are men. These differences occur in most countries around the world.

Depression:

Depression are normal features of our lives. Modernity brought women education in its wake and she changed the arena of activity. She stepped out of the household of house and joined service like man. Now she got admiration, equality and opportunity. But the euphoria was ephemeral as she was supposed to take to this job as an additional responsibility. She not expected to shrink household work. This brought problems like strain and depression. A women by nature is expressive emotional and sensitive. Physiological social and cultural background of women probably plays a key role in mending a women's attitude and natures towards the external relation we know that women are generally more at risk to develop psychological disorder and depression in particular.

Depression is a common illness worldwide, with an estimated 350 million affected. It is a leading cause of disability worldwide, and is a major contributor to the global burden of disease. It often starts at the young age and affects women more commonly than men. It affects not only the person affected but also the family and the society. Almost 1 million people commit suicide because of depression . The report on Global Burden of Disease estimates the point prevalence of depressive episodes to be 1.9% for men and 3.2% for women, and the one-year prevalence has been estimated to be 5.8% for men and 9.5% for women. It is estimated that by the year 2020 if current trends for demographic and epidemiological transition continue, the burden of depression will increase to 5.7% of the total burden of disease and it would be the second leading cause of disability-adjusted life years , second only to ischemic heart disease . In view of the morbidity, disability and global burden, depression has always been a focus of attention of researchers throughout the world. Various studies were done to assess the prevalence, psychosocial factors, cultural factors, co-morbidity, and treatment and prevention aspects of depression among various age groups. After a thorough

literature review there were no large scale studies done on working women population. So this study was done to compare the prevalence and risk factors of depression among working and non-working women.

Depression is a significant contributor to the global burden of disease and affects people in all communities across the world. While depression is the leading cause of disability for both males and females, the burden of depression is 50% higher for females than males. In fact, depression is the leading cause of disease burden for women in both high-income and low- and middle-income countries. Similarly a study conducted to analyze the gender difference in depression showed that females' subjects showed more prevalence than males of somatic depressive symptoms as well as pure depression symptoms. This scenario of depression among females instigated the investigator to assess the new dimension of depression and its risk factors among working and non-working females. As far as the risk factors for depression were concerned in this study, both the groups experienced the same risk factors but the working women had the important risk factor which is work place stress which lead to depression among working women which was statistically significant. Similarly the other common risk factors for both the groups was marital status (married females), higher socioeconomic status which were associated with depression. But as the grading of depression increases, both the group experienced similar prevalence which was not statistically significant. In contrast to our study, Subramani et al. CURES study showed that low income, separated and divorced women were the factors associated with depression.

Mental Health:

Mental health is one of the most important public health issues as it is a major contributor (14%) to the global burden of disease worldwide. It means the ability to respond to diverse experiences of life with flexibility and a sense of purpose. It can be described as a state of balance between an individual and his surrounding world, a state of harmony between oneself and others. Mental health is the foundation for well-being and effective functioning for an individual and for a community and that of women is important both for their own health and for the well-being of their children and families. Women are more likely than men to be adversely affected by mental disorders, the most common being anxiety and depressive disorders.

Mental health is the capacity of the individual, the group and the environment to interact with one another in ways that promote subjective well-being, the optimal development and use of mental abilities (cognitive, affective, and relational), the achievement of individual and collective goals consistent with justice and the attainment and preservation of conditions of fundamental equality. WHO predicts that 20% of the Indian population will suffer from mental health illness by the year 2020. Barely 1-2% of the health budget is dedicated to mental health in comparison to 10-12% in other countries (Fortis, 2013). In India, the prevalence of mental disorders ranges from 10 to 370 per 1000 population in different parts of the country. A woman's mental health and psychological wellbeing is deeply affected and influenced by her society and the roles she plays in her society. Whether it is the role of a daughter, a wife, a mother, a sister, a homemaker, a manager, a teacher, etc., all influence her quality of life.

II. REVIEW OF LITERATURE

Being a recent move, there have been various researches on different aspects of the initiative ranging from the economical to social and ethical dimensions. Some of these researches retrieved through internet searches have been reviewed here:

Kopp et al.(2008) established in their study that job related factors and social support from family were important predictors of mental health. Home and workplace atmosphere played a major role in deciding the mental health status of married working women. Conducive workplace atmosphere, favourable attitude of colleagues at workplace, and favourable attitudes of husbands/in-laws at home were found to be protective of overall mental health.

Chandola et al(2004) observed that both work-to-family and family-to-work conflict affected the mental health of men and women in three different countries.

Adzlin et al.(2011) showed the prevalence of psychological distress among married working women as 22.8%.

B. Gelaye, S. Lemma, N. Deyassa et al.(2012), Another study in Ethiopia showed the prevalence of mental distress in working women as 25.9%.

III. MATERIALS AND METHODS

The study was conducted as a community based cross sectional study among 20 years and above age group women residing in the field practice in different area of Madhubani District, Bihar. According to the purpose of present study

100 working and non-working woman has been selected. There were 50 working and 50 non-working women were taken as a sample from Madhubani District, Bihar

Instruments:

For this purpose the following test tools were considered with their reliability validity and objectivity mentioned in their respective manuals. In present study two questionnaires used in research.

Mental Health Scale :

The mental health scale was made by **Dr. D. J. Bhatt and Ms. Geeta R. Geeda**. This scale contains 40 statements pertaining to five domains aim of mental health, these five dimensions include perception of reality, integration of personality, positive self-evaluation, group oriented attitudes and environmental mastery to be rated on a 3-point scale. In this scale statements no. 1, 3, 9, 14, 19, 20, 22, 24, 25, 26, 28, 33, 34, 37, 38 are negative and others are positive. Which statements are positive and for agree, disagree, neutral 3, 2, 1 score is used and which are negative statements for agree, disagree, neutral 2, 3, 1 score is used. Reliability of present study is checked by three methods in which 0.81 by logical similarity 0.94 by half-divided method, and test, re-test has 0.87.

Beck Depression Inventory (BDI):

The depression scale was made by **Beck ward, Mendesion, Moch and Drbaug (1961)**. It is comprised of twenty one items. Although the inventory was designed as a clinical instrument but in practice it is frequently used to dichotomize subjects into depressed and non-depressed groups. This inventory has test-retest reliability coefficient ranging from 0.74 to 0.83 on different time intervals and positively correlated with Hamilton depression rating scale with a person r of 0.71

IV .RESULT AND DISCUSSION

The main objective of present study was to do comparative study of mental health and depression among working and non-working women. In it statistical 't' method was used and their correlation was measured. Results discussions of present study is as under :

Table:1
The Mean, SD and 't' value of Mental Health Among Working and Non-working women

Sr. No.	Variable	N	Mean	SD	t
1	Working Women	50	70.50	9.26	2.36*
2	Non-working Women	50	75.60	10.72	

• $P < 0.05$

** $P < 0.01$

The result obtained on the basic area of mental health reveals significant difference of working and non-working woman. The non-working woman received higher mean score **75.60** as compared to the working woman **70.50**. There has mean difference is **5.10** and the standard deviation score of working woman received **9.26** and the non-working woman received **10.72**. So we can say that non-working woman have a good mental health than the working woman. The 't' value of mental health is **2.36**. There has significant difference between working and non-working woman. It means hypothesis is not accepted. It is clearly revealed from Table-1 that there is a significant difference of mental health on working and non-working woman. In simple terms it can be concluded that mental health of working woman is lesser than non-working woman. Evidences of research findings given by **Jogsan (2011)** conducted study on 200 male and female. Results indicate the females have better mental health to compared .

Table : 2
Showing the Mean, SD and t-value of Depression Among Working and Non-working Women

Sr. No.	Variable	N	Mean	SD	t
1	Working Women	50	21.25	3.63	5.00**
2	Non-working Women	50	18.45	2.86	

• $P < 0.05$

****P < 0.01**

The result obtained on the basic area of depression reveals significant difference of working and non-working woman. The working woman received higher mean score **21.25** as compared to the non-working woman **18.45**. There has meandifference is **2.80** and standard deviation score of working woman received **3.63** and non-working woman received **2.86** and the 't' value is **5.00**. There has significant difference among working and non-working woman in depression. So we can say that depression of non-working woman is lesser than the working woman. It is clearly revealed from table-2 that there is a significant difference of depression on working and non-working woman. In simple terms it can be concluded that depression of non-working woman is lesser than the working woman. Evidences of research findings given by **Pandya M. and Zala K. (2009)** conducted study on 120 male employees. Results indicate the depression of non-working man is lesser than the working male.

Table : 3**Showing the Correlation Between Mental Health and Depression Among Working and Non-working Women**

Sr. No.	Variable	N	t
1	Mental Health	100	0.71**
2	Depression	100	

****P < 0.01**

The result obtained that high positive correlation between mental health and depression among working and non-working woman. The **0.71** high positive correlation between mental health and depression. It is clearly revealed from table-3 that there is a higher positive correlation between mental health and depression among working and non-working woman. Evidences of research findings given by **Doshi R. (2008)** conducted study on 100 male. Result indicate that there is a higher positive correlation between mental health and depression.

V. CONCLUSION

There were significant difference in mental health among working and non-working women results indicate the non-working women have better mental health to compared working women. There were significant difference depression among working and non-working women. We can say that the depression of non-working women is lesser than the working women. There were 0.71 correlation are seen between mental health and depression.

REFERENCES

1. M. S. Kopp, A. Stauder, G. Purebl, I. Janszky, and A. Skrabski,(2008) "Work stress and mental health in a changing society," European Journal of Public Health, vol. 18, no. 3, pp. 238–244, 2008.
2. T. Chandola, P. Martikainen, M. Bartley et al., (2004) Does conflict between home and work explain the effect of multiple roles on mental health? A comparative study of Finland, Japan, and the UK," International Journal of Epidemiology, vol. 33, no. 4, pp. 884–893,
3. U. Adzlin, M. Marhani, A. A. Salina et al.,(2011) "Prevalence of psychological distress and depressive disorders among married working women in Malaysia," Malaysian Journal of Psychiatry, vol. 20, no. 1, PP.122-125.
4. B. Gelaye, S. Lemma, N. Deyassa et al., (2012) "Prevalence and correlates of mental distress among working adults in Ethiopia," Clinical Practice & Epidemiology in Mental Health, vol. 8, pp. 126–133,
5. Revati R Dudhatra, Yogesh A Jogsan.(2012) Mental Health and Depression among Working and Non-Working Women: International Journal of Scientific and Research.;2(8),pp.154-157.
6. SubramaniPoongothai et al,(2009)Prevalence of Depression in a Large Urban South Indian Population — The Chennai Urban Rural Epidemiology Study (Cures – 70).PLOS One.;4(9):pp.365-369.



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