



# A STUDY ON WELLBEING AMONG TRIBAL WOMEN

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## ABSTRACT

Well-being is an essential measure that contributes to the evaluation of the health and quality of life of an individual. Being a man or a woman has a significant impact on health. The aim was to study wellbeing among women living in tribal area. The Wellbeing scale developed by Dr.Vijjalaxmi Chauhan and Dr. Varsha Sharma (2005) was administered to the women. A sample of 100 of working and non-working women of the age group of 30 to 35 years from Tribal area, Manipur was randomly selected for the present study. The tests used to analyze the data were student t-test and chi- square test. The results found a significant difference in the wellbeing level among Working and Non-working women in Tribal area of Manipur. It was also noticed that the working nature, Residence, Type of Family may all contribute to the well-being of an Individual.

**Key words:** well being, Health, women

## Introduction

Women's mental health is an important element in one's overall wellbeing and contentedness, as it maintains cognitive alternates, emotional sanity, and balance of ourselves, lives, and relationships. When one is mentally balanced and at peace with themselves internally, they are practicing good mental health. Tribes are one of the most marginalized communities in India, tribal women have been regularly coming out of cultural boundaries and tradition, entering into the male dominated areas. Health is an important determinant of the well-being of any community. The age between 30-35 years is a unique and critical period of development during which unmet health needs and disparities in access to appropriate care, health status, and mortality rates are high. This is a time when purposeful prevention and intervention strategies may still alter trajectories and decrease threats to health along the adult life course.

## Reviews of literature

- Study conducted by Victoria R Terry et,al (2021) "Physical activity and mental well-being under COVID-19 lockdown: a cross-sectional multination study". An online survey was administered in the second quarter of 2020 ( $N = 2541$ ). Measured was planned and unplanned dimensions of PA using the Brunel Lifestyle Physical Activity Questionnaire and mental health using the 12-item General Health

Questionnaire. Steps per day were recorded only from participants who used an electronic device for this purpose, and sedentary behavior was reported in hours per day (sitting and screen time). Finding reveals that in the USA and Australia samples, there was a significant decline in planned PA from pre- to during lockdown. Among young adults, Australians exhibited the lowest planned PA scores, while in middle-aged groups, the UK recorded the highest. Young adults exhibited the largest reduction in unplanned PA. Across nations, there was a reduction of ~2000 steps per day. Large increases in sedentary behavior emerged during lockdown, which were most acute in young adults. Lockdown was associated with a decline in mental health that was more pronounced in women.

- Studied carried out by Julie S.Son et.al (2021) “Promoting Adults’ Physical Activity and Social Well-Being during COVID-19” .These study focuses on Staying healthy while following social distancing protocols is of great importance to older adults due to increased risk of serious complications from COVID-19. Mild to moderate physical activity improves immune system responses to viral respiratory infections. Additionally, social engagement has cumulative health protective benefits across the lifespan. At present, active and social recreation opportunities have been drastically reduced or disbanded due to group size limitations, stay-at-home orders, and reductions in services and facilities. The results show that community dwelling older adults are homebound and need alternative exercise and social opportunities to maintain their health during this time. Leisure professionals can promote physical activity and social well-being among older adults by increasing home-based opportunities, including offering additional online leisure services, opportunities for volunteerism, and social interactions.

## Methodology

The present study was envisaged with broad aim to study wellbeing among women living in tribal area.

## Objective:

1. To study the level of wellbeing among women of tribal area.
2. To know the wellbeing among working and non-working women of tribal area.
3. To study the dimensions of wellbeing.

## Hypothesis:

- The level of Wellbeing may not differ among women.
- There is no significant difference of wellbeing among working and nonworking tribal women.
- Dimensions of wellbeing may not vary among working and nonworking tribal women.

**Procedure:**

The present study was envisaged with broad aim to study wellbeing among Working and non-working women living in tribal area. A sample of 100 of working and non-working women of the age group of 30 to 35 years from Tribal area, Manipur was randomly selected for the present study. The tool was used to elicit the information was a developed scale by Dr.Vijjalaxmi Chauhan and Dr. Varsha Sharma, which comprises of 50 statements having 5 point scale covering six dimensions such as Emotional wellbeing, Psychological wellbeing, Social wellbeing, Spiritual wellbeing, Physical wellbeing and Self-awareness. Prior permission was taken from the respective individual. Visits as well as Google forms were made to collect information on wellbeing of working and non-working women. Women's were requested to fill the questionnaire. The sample was collected from Tribal areas of Manipur, Imphal.

**Results and discussion:** The results of the study is discussed below

**Table – 1: Classification of Respondents by Age group**

Age group (years)	Respondents					
	Working		Non-working		Combined	
	N	%	N	%	N	%
30-32	28	56.0	27	54.0	55	55.0
33-35	22	44.0	23	46.0	45	45.0
<b>Total</b>	<b>50</b>	<b>100.0</b>	<b>50</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>

Table 1 depicts that the classification of respondents by age group, it reveals that 56% of working and 54% of the non-working respondents belongs to the age group of 30-32 years, whereas 44 percentage of working respondents and 46 percent of non-working respondent were in the age group of 33 to 35 years. Over all 55% of the young adults were in the age group of 30-32 years and 45% of the young adults were 33-35 years age group.

**Table – 2: Classification of Respondents by Qualification**

Qualification	Respondents					
	Working		Non-working		Combined	
	N	%	N	%	N	%
Upto PUC	2	4.0	7	14.0	9	9.0
UG/Diploma	27	54.0	36	72.0	63	63.0
PG	21	42.0	7	14.0	28	28.0
<b>Total</b>	<b>50</b>	<b>100.0</b>	<b>50</b>	<b>100.0</b>	<b>100</b>	<b>100.0</b>

Table 2 and Figure 1 shows that the qualification of the respondents. It depicts that 4% of the working and 14% of non-working respondents studied up to PUC and 54% of the working and 72% of non-working respondents studied up to Diploma, whereas 42% of working respondent and 14% of non-working respondents study till Post graduate. Over all 9% of young adult studied up to PUC followed by 63% of the young adults studied till Diploma/UG, 28% of young adults studied up to Post graduate.

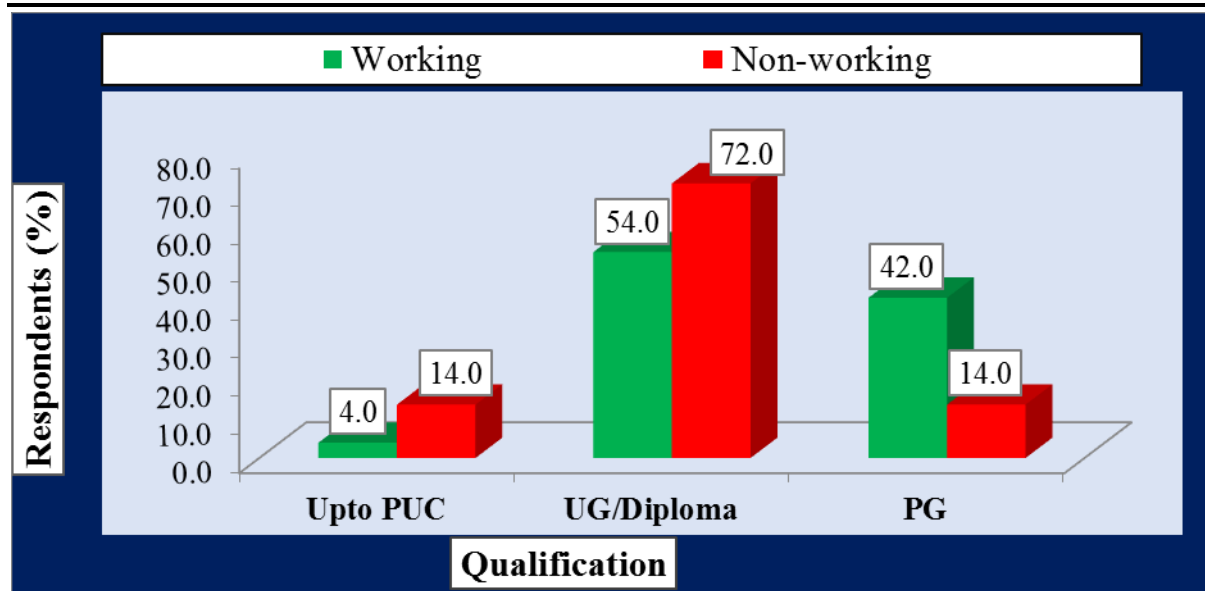


Figure. 1: Classification of Respondents by Qualification

Table – 3: Classification of Respondents by Well-being level among working women

Well-being Level	Scores	Working women	
		N	%
Above average	115-165	3	6.0
High	166-185	10	20.0
Extremely high	186-250	37	74.0
<b>Total</b>		<b>50</b>	<b>100.0</b>

The score obtained by the respondents have been totaled up and divided and has been categorized into three level of wellbeing. Based upon the total score obtained by the working woman has been divided into 3 levels of wellbeing. The working women who score 186-250 were categorized into extremely high level of wellbeing, the working women who scored from 166-185 were belongs to category of high and the working women scored from 115-165 were come into category of above average.

So the above table 3 shows that majority (74%) of the respondents have extremely high level of wellbeing who scored between 186-250 and 20% of the respondents belong to high level of wellbeing , while 6% of respondents have above average high level of wellbeing who scored between 115-165 .

Table – 4: Classification of Respondents by Well-being level among Non-working women

Well-being Level	Scores	Non-working women	
		N	%
Above average	115-165	11	22.0
High	166-185	18	36.0
Extremely high	186-250	21	42.0
<b>Total</b>		<b>50</b>	<b>100.0</b>

The above table 4 shows that majority (42%) of the respondents have extremely high level of wellbeing who scored between 186 – 250 and 36% of the respondents belong to high level of wellbeing , while 22% of respondents have above average level of wellbeing who scored between 115-165.

**Table – 5: Classification of Respondents by Well-being level among Working and Non-working women**

Well-being level	Scores	Respondents				$\chi^2$ Value
		Working		Non-working		
		N	%	N	%	
Above average	115-165	3	6.0	11	22.0	11.27*
High	166-185	10	20.0	18	36.0	
Extremely high	186-250	37	74.0	21	42.0	
<b>Total</b>		<b>50</b>	<b>100.0</b>	<b>50</b>	<b>100.0</b>	

\*Significant at 5% level,

$$\chi^2 (0.05, 2df) = 5.991$$

The above table 5 and Figure 2 indicate the classification of Wellbeing level among working and non working women's. The result shows that majority (74%) of the working respondents and 42% of the non-working respondents have extremely high level of wellbeing, while 20% of the working respondents and 36% of the non-working respondents belong to high level of wellbeing, followed by least percentage (6%) of the working respondents and 22% of the non-working respondents who has above average level of wellbeing.

The data subjected to chi-square test it reveals the difference of wellbeing among working and non-working women was found to be statistically significant  $\chi^2 (0.05, 2df) = 5.991$ . It shows that in above average level of wellbeing non-working women are better than working women. The possible reasons could be due to non-working women are satisfied with their social relationships, believing in god, having healthy diet and having hope in life. Thus rejecting the null hypothesis stating that wellbeing may not differ significantly among working and non-working women.

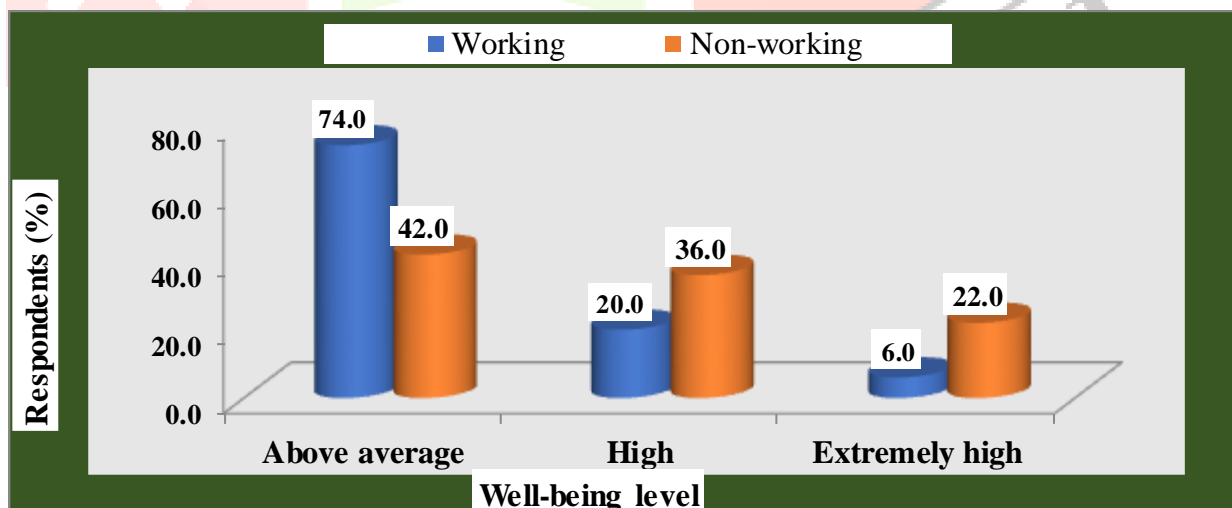


Fig .2 : Classification of Respondents by Well-being level among Working and Non-working

**Table -6 Dimension wise Response of Well-being scores among Working and Non-working women**

N=100

Sl No	Aspects	Well-being Scores (%)				Student 't' Test
		Working (n=50)		Non-working (n=50)		
		Mean	SD	Mean	SD	
I	Emotional	71.9	10.9	62.5	8.3	4.85*
II	Psychological	76.4	8.2	73.2	9.4	1.84 <sup>NS</sup>
III	Social	75.9	6.2	71.3	7.2	3.42*
IV	Spiritual	86.4	10.3	79.0	14.1	2.98*
V	Self-awareness	75.7	7.3	72.4	7.9	2.17*
VI	Physical	76.0	11.6	73.9	11.7	0.89 <sup>NS</sup>
	<b>Combined</b>	<b>76.6</b>	<b>5.2</b>	<b>71.9</b>	<b>7.0</b>	<b>3.79*</b>

\* Significant at 5% level,

t (0.05,98df) = 1.96

Table 6 outlines mean wellbeing scores of working and non-working women which describes the dimension wise difference among respondents. The mean score (71.9) of working respondents was found to be higher when compared to the non-working respondents (62.5). Emotional wellbeing dimension among working and non-working women found to be significant at 5 percentage level with the t value being (t= 4.85\*), it shows that working women were more emotional wellbeing than non-working women, which means that working women possess better emotional wellbeing such as happy with care and support they get to lead a happy life. Thus rejecting the null hypothesis stated that there is no significant relationship between the wellbeing of working and non-working women.

There was a non-significant association found between working and non-working respondents in the dimension of Psychological wellbeing. The working women showed higher mean average of (76.4) and moderate mean score was obtained by the non-working respondents (73.2). The t-test value found to be (t=1.84<sup>NS</sup>), it shows that working and non-working women have equal psychological wellbeing such as having positive thinking like nothing is impossible in life, having hope in life and believing in simple living and high thinking. Thus, accepting the null hypothesis stated that there is no significant relationship between the wellbeing of working and non-working women.

The high score obtained by the working respondents (75.9) as compared to non-working respondents (71.3) in the social wellbeing category. It is seen that there is a significant difference at 5% level (t-test =3.42\*) this indicates an association of social wellbeing with working and non-working respondents. Probable reasons could be working women actively take part in social activities and having satisfactory social relationship etc. Thus the stated null hypothesis is rejected which says that wellbeing is not influenced by work.

Spiritual wellbeing was seen higher in working respondents' (86.4) when compared to the non-working respondents' (79.0). The above results shows a significant difference on statistical analysis at 5% level ( $t$  test= 2.98\*). This indicated a significant association of spiritual wellbeing with work of the respondents'. The probable reasons could be working women believe in god and spirituality makes them peaceful. Thus the stated null hypothesis is rejected which says that wellbeing score is not influenced by work.

Self-awareness was seen higher in working respondents (75.7) when compared with non-working respondents (72.4). It is seen that there is a significant difference at 5% level ( $t$  test= 2.17\*). This indicates an association of empathy with work of the respondents'. The probable reasons could be working women are leading purpose full life with the feeling of self-competent and having the feeling of energetic and good personality. Thus the stated null hypothesis rejected which says that wellbeing score is not influenced by work.

Mean wellbeing of respondents for physical wellbeing was seen higher in working (76.0) when compared to non-working women (73.9). It is found to be non-significant with the  $t$  value being ( $t = 0.89$  <sup>NS</sup>), it shows that both working and non-working have equal physical wellbeing. Thus, accepting the null hypothesis stated that there's no significant relationship between the wellbeing of working and non-working women.

### **Conclusion :**

Study concludes that in domain wise specific it was found that in spiritual wellbeing both working and Non-working respondents has better wellbeing scores Whereas, physical and psychological wellbeing working women respondents mean scores is higher than the Non-working respondents. The working respondents were found to be socially oriented and were found to be more concern about their emotional wellbeing than the Non-working respondents. It was also noticed that the working nature, Residence, Type of Family may all contribute to the well-being of an Individual.

### **Reference :**

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