A STUDY OF LIFE SATISFACTION AND MENTAL HEALTH AMONG WOMEN.

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ABSTRACT:

The purpose of this study was to find out the mean difference between Working and Non-working women in life satisfaction and mental health. The total sample consisted of 200 women taken as a sample from Nanded district. The research tool for mental health was measured by Dr. Kamlesh Sharma and Dr. B. R. A Research institute Indore and for Life Satisfaction scale by Q. G. Alam and Ramji Srivastava is used in the study. the 't' test was applied to check the significance level of mental health and life satisfaction in working and non-working women to check the correlation method used. Results revealed a significant difference in mental health and life satisfaction with respect to both working and non-working women on life satisfaction and mental health

Index Terms- Women's, Life satisfaction, mental health

INTRODUCTION:

The World Health Organization sees health as multidimensional and espouses a social model of health. It defines health as ‘a positive concept emphasizing social and personal resources as well as physical capacities.’ ‘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 (Kornhauser, 1965). “Mental Health” refers to the full and harmonious functioning of the total personality which gives satisfaction and a sense of fulfillment to the concept of Mental Health – as any other offered so far. All concepts are, after all, abstractions – that too arbitrary - to some or more extent. Life satisfaction is often considered a desirable goal in and of itself stemming from the Aristotelian
ethical model, eudaimonism, (from eudaimonia, the Greek word for happiness) where correct actions lead to individual well-being with happiness representing the supreme good (Beutell, 2006) [4]. In a more modern context, well-being is believed to be inherent to features such as social relationships, health, work-related conditions, personal welfare, liberty, moral values and personality traits. The last decade, however, has seen an increase in cross-cultural studies in which perceptions of national characteristics (e.g. societal, political and economical ones) also received more attention. Unfortunately, these kinds of studies usually classifying cultures as individualistic or collectivistic, have focused merely on comparing countries and have commonly attributed observed disparities to the cultures prevalent in the countries. Some of these differences, however, may have been the result of regional variation within countries rather than the result of cultural discrepancies between countries (Kashima, Kokubo, Kashima, Boxall, Yamaguchi & Macrae, 2004) [5]. Since psychological well-being is related to performance ratings beyond the effect of composite job satisfaction (Wright & Cropanzano, 2000) [6]. The influence of work-related conditions (employment status, the type of employment contract and job satisfaction) on life satisfaction will be studied more extensively. Research concerned with the relationship

**LITERATURE REVIEW:**

Khodidas (2013) found a significant difference in the mental state of being told to read it again by themselves. Data was collected on health level among working women and housewives. Mean score of employed and unemployed educated women and the subjects were mental health for 40 Working women was 68.25 & SD was 9.25 encouraged throughout the all the session. In the end, subjects with similar mental health mean for 40 housewives was 70.50 & SD thanked them for their cooperation after the completion of the test. The was 10.50 and difference between their ‘t’ value was 2.35 and answer sheets were scrutinized and the data obtained were systema-significant at 0.05 level. Therefore, the results reveal that mental tickly scored using standard and appropriate scoring methods for health is better for housewives than for working women. In contrast, female life satisfaction is virtually unaffected by hours of work. Women without children do not care about their hours of work at all, while women with children are significantly happier if they have a job regardless of how many hours it entails. (Ayres & Malouff, 2007) have also highlighted the importance of a brief problem-solving training in the workplace that can increase problem-solving skills and problem-solving self-efficacy in the course of improving positive effect, job satisfaction, and life satisfaction. Moving away from work impacts on life satisfaction, (Perrone et al. 2007) found that satisfaction with work and marriage was significantly related to life satisfaction. (Schaer, 2008) also stressed on Couples Coping Enhancement Training to increase dyadic competencies which can have positive effects on the general well-being, life satisfaction and other workplace variables like less burnout and less work stress.

**OBJECTIVE OF THE STUDY:**

1. To study the life satisfaction between working and non-working women.
2. To study the mental health between working and non-working women.
HYPOTHESIS OF THE STUDY

1. There is no significant difference in life satisfaction among working and non-working women.
2. There is no significant difference in mental health among working and non-working women.

METHOD

Sample:
According to the purpose of the present study 200 working and non-working women has been selected. There were 100 working and 100 non-working women taken as a sample from Nanded district.

Tools:
Present study following psychological tests were used.

(A) Life Satisfaction Test:
Developed by Alam and Shrivastav (1983) was used. The test contains 60 questions each having two options of “Yes” and “No”. For the assessment of the test “Yes” option is marked with ‘1’ and “No” option is marked ‘0’. The reliability of the test is 0.84 and the validity is 0.74-0.84.

(B) Mental Health Scale:
Prepared by Dr. Kamlesh Shama (2009) was used. The test consists of a total of 60 questions and three options – ‘Yes’, ‘May be’ and ‘No’ for each answer are given to mark the response. The test contains 30 positive and 30 negative questions. For positive questions 2, 1, 0 answers are marked against the given three options similarly 0, 1, 2 answers are marked against negative question’s response. The test-retest reliability is 0.86 and 0.88 and the validity of the test is 0.79.

Statistical Analysis:
The descriptive statistics analysis performed mean, standard deviation was calculated life satisfaction and mental health levels.

Table 1 – Showing life satisfaction score of Working and Non-Working women

<table>
<thead>
<tr>
<th>Women</th>
<th>N</th>
<th>MEAN</th>
<th>S.D.</th>
<th>‘t’ Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working</td>
<td>100</td>
<td>69.74</td>
<td>28.68</td>
<td>5.27</td>
</tr>
<tr>
<td>Non-working</td>
<td>100</td>
<td>57.75</td>
<td>25.04</td>
<td></td>
</tr>
</tbody>
</table>

Table No. 1:
The results from Table 2 indicate that the mean score on life satisfaction of working women is higher than the non-working women's. The t-value (t = 5.27) also signifies that there exists a significant difference in life satisfaction among working and non-working women. The working women were found to be highly satisfied with their life as compared to non-working women. The mean score of life satisfaction in working women mean score 69.74 and the standard deviation is 28.68 whereas the mean score of non-working women mean score is 57.75 and standard deviation of 25.04. From the Table 2 it is inferred that ‘t’ value is 5.27, Therefore, from the
above result, the Hypothesis 2 which states that “Life satisfaction level would be high among non-working women than the working women's” is not accepted.

Table 2 – Showing mental health scores of Working and Non-Working women

<table>
<thead>
<tr>
<th>Women</th>
<th>N</th>
<th>MEAN</th>
<th>S.D.</th>
<th>‘t’</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working</td>
<td>100</td>
<td>53.73</td>
<td>24.81</td>
<td>9.22</td>
</tr>
<tr>
<td>Non-working</td>
<td>100</td>
<td>73.76</td>
<td>26.55</td>
<td></td>
</tr>
</tbody>
</table>

The above table reveals that the mean of the data collected for the Mental Health of working women is 53.73 (Moderate) and for non-working women is 73.76 (Moderate). The same figures were put to the standard deviation in the working women S.D. is 24.81 and for non-working women S.D. is 26.55 When the sum of figures was put to ‘t’ test we get 9.22.

When the tabulated value of 't' at 0.01 level of significance is compared with the calculated value, it was found that calculated value 9.22.

Thus, it can be concluded that there is significant difference in the References Mental health level of working and non-working women. The Mental health is higher among non-working in comparison to working women.

Discussion

In the present study it was hypothesized that there would be a significant mean difference between mental health of working women housewives. Table shows the mean for the mental health level of working and non-working women. The mean of working women was 24.81 and of non-working women it was 26.55 which clearly indicates the mean difference between working and non-working women. The results clearly indicated that mental health mean scores were higher among housewives in comparison to working women. Results indicate that life satisfaction in working women is higher than that of non-working women.

References:

- The guiding vision of the mental health service