

Assessment Of Work Stress And Health Status Of Employed Women Working In Rural Area Of Southern State In India

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Abstract:

Background: With rapid modernization and improvement of education in society, Indian women have been now increasingly involved in various occupations. Coping with workplace pressure and household chores is challenging to working women.

Aims: The objective of this study is to understand the various occupation stress factors and health status of working women in rural areas.

Settings and Design: A descriptive study was conducted among 108 working women in Vaniyamkulam Panchayat, Kerala employed in various jobs using a pretested semi structured questionnaire. Data regarding occupational stress and health status was obtained using a structured questionnaire by interview method and analyzed using SPSS software version 19.

Results: Majority (63%) of participants were aged between 30-50 years. Most were married (83.3%) and 74.2% had at least one child. 13.9% Husband was unemployed. Majority were professional and semi professional and worked in organized sector. Anxiety about children's future (11.1%), none to care children in the absence (7.4%), financial pressure (8.3%), absence of domestic help (7.4%), unable to give self care (5.6%), Inadequate salary (4.6%) and job insecurity (4.6%) were found to be very stressful in working women. 6.5% of women had hypertension and 5.5% were diabetic. 11.1% were underweight.

Conclusions:

Anxiety and care related to children was associated with high stress among working women followed by domestic help and financial pressure. variable degree of stress is perceived in other factors. Combined efforts by employer and family support is required to provide productive healthy stress-free work environment to women.

Key-words:

Occupational stress, Women health, Anxiety, Mental health

Introduction:

Indian women have now come long way after independence from just skilled homemakers restricted within four walls of household to contemporary women with knowledge, acquired skill and capabilities to pursue their dreams and be at par with their male counterparts contributing to the economy and pride of Nation. With reforms and changing mindset of greater population, today's world opens a greater opportunity to women of current era. Lots have been discussed about successful women who are occupying the pinnacles of multinational companies and yet leading a wonderful family life. They are just a creamy stratum of the society settled in major cities and big companies and cannot be generalized to working women population of the nation, especially rural India. Balancing work and family life have become a major issue for women.

NFHS-4 data shows that 20.4% of women worked in India.¹ Dealing with family issues as well as work issues has resulted in women dealing with an increasing amount of stress. Job stress may be as "the stress produced during interaction between the individual and his work environment when the demands of work exceed the individual's resources or abilities." Broadly defined, work stress is the 'harmful physical and emotional responses that occur when the requirements of the job do not match the capabilities. Studies have shown that stress levels are higher in working women than housewives.² People are overwhelmed by a lesser number and intensity of stressors and slide downhill, losing relationships, jobs, and eventually their mental and physical health. Most of the times working women need to fulfil the demand at work followed by rendering her traditional responsibility as care taker of kids and family playing multiple roles of a cook, a family maid, a tutor, a nurse and much more. In today's scenario the husband and wife both work towards creating a balance with their work life and home most women tend to get stressed to make both ends and demands more energy and time. Most women perceive that achieving a work life balance is a challenge.⁴ This situation may be much difficult in rural areas due to socio economic characteristics prevailing in those areas.

Kerala is the southernmost in India and is home to 2.76% of India's population. The state ranks first concerning sociodemographic indices and has exceptional achievement in the elimination of poverty, and providing primary education and health care.¹ The state also takes credit for the highest female literacy and has had one of the highest rates of female workforce participation among the states reflecting the benefit of female literacy. 21% of working-age women in Kerala were employed and a comparable employment rate is observed in rural areas also.² The objective of this study is to understand the various occupation stress factors of working women in rural areas and assess their overall health status.

Subjects and Methods:

The study is descriptive. A woman who earns salary, wages, or other income through employment outside the home is termed a working woman. The study was conducted in Vaniyamkulam panchayat, Ottapalam taluk, Palakkad district in Kerala state, India. Various establishments where women were employed were included in the study after taking permission from the concerned in-charges. The establishments included textile shops, schools, banks, hospitals, nursing homes, and shops.

Inclusion criteria:

- Women more than 18yrs of age
- Women who consented to participate in study

Exclusion criteria

- Women who were reluctant in giving information
- Women who were employed for less than 3months

A total of 108 working women were included in the study by convenient sampling. Permission was obtained

from the employer and consent was taken from the participant for the study. The data was collected using a pre-designed, structured questionnaire consisting of questions regarding general information with a socio-demographic profile in section 1, section 2 consisting of job profile, career growth, working environment, and section 3 assessing the health status of the working women by interview method. Nutritional status was assessed by measuring the BMI. All participants found to have health issues were referred to P K Das Institute of Medical Science for further guidance.

Results:

Table no1 shows that majority of participants belong to age group of 30-40 years. 83.3 % were married and only 1.9% were widows. all were literate. 91.7% belong to Hindu religion. 68.5% lived in nuclear family and 74.2% had at least 2 living children. The husbands were unemployed among 13.9 % working women.

Table no 1 showing the socio-demographic profile of rural working women

S/no.	Demographic profile	No. of participants	Percentage(%)
1.	Age (in years)	20-30	22.2
		30-40	35.2
		40-50	27.8
		>50	14.8
2.	Educational status	Primary schooling	5.6
		Upto 10 th std	22.2
		Graduation	37
		Postgraduation & above	35.2
3.	Religion	Christian	3.7
		Hindu	91.7
		Muslim	4.6
4.	Type of family	Joint	25
		Nuclear	68.5
		3-generation	6.5
5.	Marital status	Single	14.9
		Married	83.3
		Widowed	1.8
6.	No. of children	None	6.4
		1-2	74.2
		>2	4.6
		Not applicable	14.8
7.	No. of dependent family member	2or less than2	34.3
		More than 3	65.7
8.	Employment status of spouse	Employed	79.6
		unemployed	13.9

19.4 % were unskilled workers, and nearly 60% worked in organized sectors. The majority (68.9%) had

experience of less than 10 years. Most of them (85.2%) worked only on day shift. The working hours varied between 8-9 hours in 49.2 %. Most women (93.5%) had a day length of more than 16 hours. The majority stated that the motivation for work was financial independence (60%) followed by personal satisfaction (48.0 %).

Table no. 2 Employment profile of participants

Sl.no	Employment profile		No. of participants	Percentage (%)
1.	Type of occupation	Professional	13	12.1
		Semi-professional	62	57.8
		Skilled	13	12.1
		Unskilled	20	19.4
2.	Sector of employment	Organized	64	59.2
		Unorganized	44	40.7
3.	Years of experience	0-10	69	63.9
		10-20	22	20.4
		>20 years	17	13.8
4.	Job profile	Full time	99	91.7
		Part time	9	8.3
5.	Shift rotation	Only day	92	85.2
		Only night	1	0.9
		Both	15	13.9
6.	Duration of working hours	<8hrs	57	52.8
		8-9hrs	49	49.2
		>9hrs	02	1.9
6.	Monthly income	<10,000	21	19.4
		10,000 – 20,000	39	35.2
		>20,000	48	45.4
7.	Motivation for work for working women	Personal Satisfaction	52	48
		Financial independence	65	60
		Constructive utilization of time	20	18
		Support from family	34	31
		Others	08	7
8.	Day length in hours	<16hrs	07	6.5%
		>16hrs	101	93.5%

Table 3 showed that long working hours (38.8%) and job pressure (25.5%) were moderately stressful in job profile of working women. Inadequate salary (14.8%) and job rotation (11.1%) were moderately stressful with respect to career growth. Physical tiredness (7.4%) and unable to give enough time to care (5.6%) were found very stressful in working women. Unable to have food on time was found to be stressful by 91.9% of working women. With respect to family and relationship and anxiety about the child's future was perceived as highly

stressful among 11.1% and moderately stressful among 28.7% of working mothers. None to take care of children in their absence was stressful for more than 50% of mothers.

Table no. 3. Factors affecting perceived stress among rural working women.

Slno	factors		Very stressful(%)	Moderately Stressful(%)	Least Stressful(%)	Not Stressful(%)
1	job profile	Long working hours	2(1.9)	42(38.8)	30(27.8)	34(31.5)
		Working condition	2(1.9)	11(10.2)	51(47.2)	44(40.7)
		Job pressure	3(2.8)	27(25.0)	29(26.9)	49(45.4)
2	Career growth	Delayed promotions	1(0.9)	13(12)	28(25.9)	66(66.1)
		Inadequate salary	5(4.6)	16(14.8)	33(13.6)	54(50)
		Job insecurities	4(3.7)	8(7.4)	36(33.3)	60(55.6)
		Job rotation	3(2.8)	12(11.1)	28(25.9)	65(60.2)
3.	Organization environment/working conditions	No grant of leave on time	2(1.9)	14(13)	31(28.7)	61(56.5)
		Relationship with colleagues	1(0.9)	4(3.7)	17(14.8)	86(79.6)
		Lack of support and negative attitude by society	2(1.9)	6(5.6)	21(19.4)	79(73.1)
		Comparison with male co-worker	4(3.7)	4(3.7)	22(20.4)	78(72.2)
		Harassment of any kind	3(2.8)	5(4.6)	21(19.4)	79(73.1)
4.	Personal factors	Lack of sleep	1(0.9)	25(23.1)	24(22.2)	58(53.7)
		Unable to have food on time	3(2.8)	20 (18.5)	33(30.6)	52(8.1)
		Unable to give enough care to self	6(5.6)	17(15.7)	38(35.2)	47(43.5)
		Physical tiredness	8(7.4)	26(24.1)	33(30.6)	41(38.0)
5.	Family and social factors	Disruption of family time	3(2.8)	25(23.1)	33(30.6)	47(43.5)
		Marital	3(2.8)	8(7.4)	20(18.5)	77(71.3)

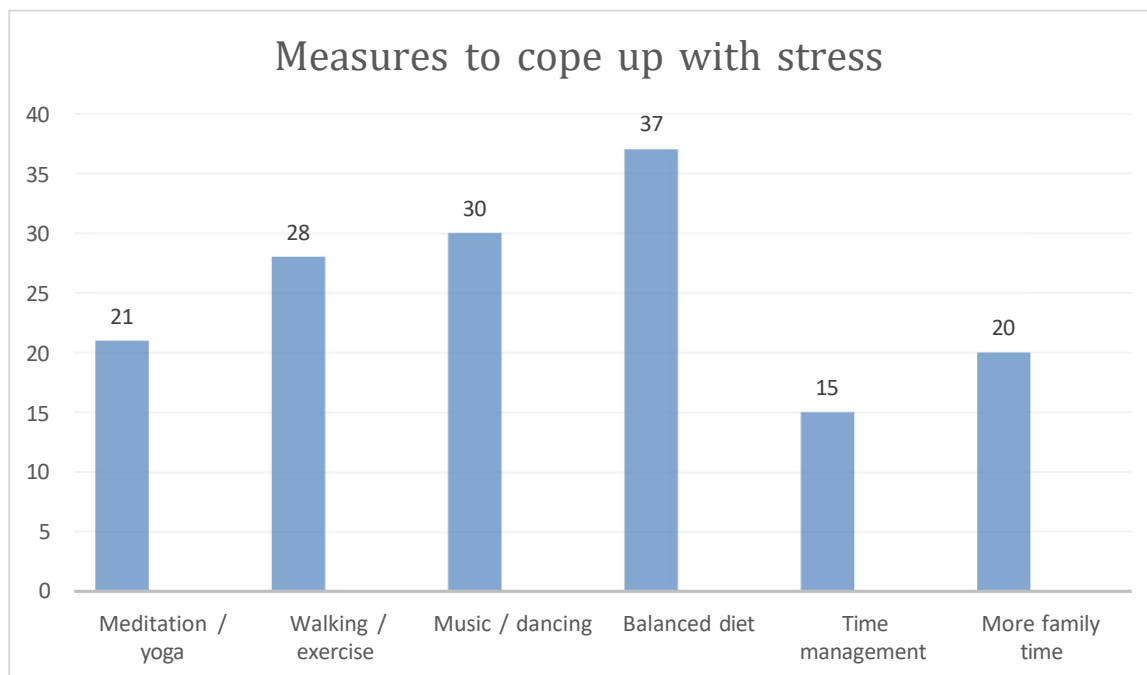
		disagreements Caring ill family member Anxiety about children's future None to take care children in the absence	3(2.8) 12(11.1) 8(7.4)	14(13) 32(28.7) 11(10.2)	26(24.1) 22(20.4) 30(24.1)	65(60.2) 42(38.8) 59(54.6)
6.	Other factors	Financial pressure Absence of domestic help Traveling away from home	9(8.3) 8(7.4) 4(3.7)	20(18.5) 14(13.0) 12(11.1)	31(28.7) 25(23.1) 36(33.3)	48(44.4) 61(56.5) 56(51.9)

Table no 4 shows 6.5 % of women were hypertensive and 5.5% were diabetics. Joint pain (21.2 %) and headache (24.2%) were the most frequent health complaints. 11.1 % of women were found to be underweight and 34.4 % were obsessed.

Table no. 4 Health status of working women

Health status		No.of working women	Percentage
Known medical condition	Hypertension	7	6.5
	Diabetes	6	5.5
	Asthma	5	4.6
	No medical condition	90	83.4
Frequent health complaint	Headache	26	24.2
	Heartburns	10	9.3
	Joint pain	23	21.2
	Tiredness	19	17.6
	No complaints	30	27.7
BMI Status	Underweight	12	11.1
	Normal	59	54.6
	Obese	37	34.4

Fig No 1. Measures by employed women to cope up with stress



Discussion:

The transforming world has opened wide opportunities for employment for women in both organized and unorganized sectors across the state, as well as in rural areas. Women in Rural areas work in various areas such as administrative, technical, and service sectors. The majority were working in the organized sectors as teachers (41.4%) and health sector (19%) as doctors, nurses, and laboratory assistants, similar job distribution had been reported by Disabil GJ in Canada.⁷ All participants in the study were literate which was consistent with the known literacy level of Kerala State and a majority had high educational qualifications of graduation and above (62%). A study done by Harilal et al in Kerala reported higher levels of stress in highly qualified working women.⁴

Long working hours and lack of time for hobbies and leisure were found to be stressful among the majority of rural working women. Similar was the finding by G. Delina et al⁶ who reported that long working hours (73.5%) and lack of leisure (87.9%) to be significantly caused work and life imbalance. This is likely because they shoulder the responsibility of household chores as well as job pressure as external help may be limited in rural areas. Job insecurity was found to be highly stressful among 11.1%. Nashwal k and et al¹⁰ reported that job insecurity was related to high stress level and high morning cortisol level in women. In this study 13.9% felt job rotation as stressful. Night and job rotation were associated with decreased health-related quality of life as reported by Kim.w and etal in a study conducted in Korea¹⁰. This present study we found that stress related to job insecurities was lesser in women working in organised sector compared to the unorganized sector which was significant. Income and education was found to have no relation. The absence of domestic help was perceived to be stressful by more than 50 % of women. even study by Krishnan.L also ranked the absence of servants or domestic help as 2nd stressor for working women.¹³

Financial independence was found to be the motivation for work in the majority in our study. Whereas sukhla S et al in India¹² reported support from family as perceived motivation for work in their study. They also found that higher number of working women lived in joint families in comparison with non-working women.

In our study majority lived in nuclear families and perceived high stress related to care of children in their absence. With respect to family and relationships most working mothers (61.2%) found anxiety about children's future. Similarly, Krishnan.L ranked as the same as first stressor.¹³

Shruthi Shukla and et al¹² also reported 20% of working women were underweight. This was similar to a finding in this study. We also found that for the majority (91.9%) of women, the inability to have food on time and unable to give self-care was highly stressful. These factors can place working women at increased risk of non-communicable diseases. This study reported that 24.2% of women had frequent headaches. Aazami S et al had reported that the nature of work and the pressure of promotion were significant predictors of headache and sleep disorders in working women.⁸ Arunima chudhuri reported that increased stress level adversely affects pulmonary function. Our study found 5% of our participants were asthmatic.

Balanced diet (37%) followed by music and dance (30%) were the most common stress management measures opted by working women in our study. Krishnan L¹³ also ranked meditation followed by balanced diet and entertainment programs as stress management measures opted by women in her study. The study by T Laluka et al found that physically active women reported less stress compared to physically inactive working women.¹¹

Sensitization of women and their families regarding key concerns related to the challenges of working women and helping them develop coping strategies is of paramount importance for having a healthy women's workforce. Regular health screening, means of recreation, and appropriate provision for safe breastfeeding corners can relieve stress in young women. Prevention of harassment at the workplace and the establishment of women's grievance cells for both organized and unorganized sectors can ensure for working women a better workplace safety. Access to a balanced diet at the workplace and other active recreation measures can help cope with stress. Women self help groups can help in establishing creches or day care for children to support working women and relive their anxiety related to child care.

CONCLUSION:

Anxiety and care related to children was associated with high stress among working women followed by domestic help and financial pressure. variable degree of stress is perceived in other factors. Majority of them consider their work to be moderately stressful. Combined efforts by employer and family support is required to provide productive healthy stress-free work environment to women.

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