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SOCIAL SUPPORT AND MENTAL HEALTH AMONG MARRIED WOMEN TEACHERS

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ABSTRACT

The present study aimed to find out the social support and mental health among married women teachers. For this purpose, a total of 302 married women teachers were randomly selected from 41 Arts and Science Colleges affiliated to Bharathiar University located in and around Coimbatore city. Multi-dimensional Scale of Perceived Social Support and Mental Health Inventory were administered to all the subjects. Obtained scores were analyzed with the help of ANOVA, z test and Regression. Results revealed that significant difference in Social Support and Mental Health were observed with respect to age, income, years of marriage, teaching experience and working hours. Working hours of women was the strongest predictor of mental health.

INTRODUCTION

Women play a pivotal role in the overall progress of a country as they constitute half the human resources of any nation. The economic wealth of a country is seriously depleted if about half of the nation's human resource is neglected. Recognizing the need for involving women in various development activities, the Government of India has initiated several affirmative measures by way of programmes and schemes to bring them into the mainstream of development. These affirmative action's have brought about perceptible changes in the socio-economic conditions of women. According to Census 2011, the literacy rate of females which was 8.86 per cent in 1951 rose to 65.46 per cent in 2011. When women receive more and more opportunities to pursue higher education, they compete with men in all the fields. This has opened new vistas, increased awareness and raised aspirations of personal growth. This, along with economic pressure, has been instrumental in influencing women's decision to enter the work force. The employment of women outside home has added to their duties and functions. They have to maintain an equilibrium and balance between home and career. Married women hold greater responsibility within the family when

compared with the unmarried ones. They have to fulfill the roles of a wife, mother, daughter-in-law, daughter, and sister within the family, and an employee, colleague and friend at work. Vishwanath (1978) conducted a study among women teachers and found out that teaching jobs suit married women ideally due to the nature of the job and the timings.

Teaching profession

It is one of the most glorious occupations which most of the women prefer. Teachers comprise one of the most important groups of professionals, playing a vital role in shaping the future of any nation. Working in education is both exciting and demanding. Out of other professionals, for many faculty members there seems to be an absence of a clear boundary separating their work and their personal lives. The centrality of academic roles in the lives of the faculty has been extensively investigated, and past research has shown that the typical faculty member regularly works more than forty hours per week, has flexible work schedules that extend into evenings and weekends, and spends a significant amount of time working at home both during the week and on weekends. In addition, faculty members appeared to limit their social friendships to academic colleagues, and tie their vacations to their work by scheduling

them to coincide with vacation, refresher/orientation courses or work-related conferences. Due to challenges in education and heavy demands made by society on teachers, stress is sure to overpower. Thus increase in the number of roles played and when burdened with additional responsibility at work, it creates numerous chances for conflicts in role performances of women. One of the research studies shows that the sharing of social support was noticed as one of the strategies adopted by women to deal with stress (Banyard and Graham-Bermann, 1993) which may help in reducing the conflict between work and family responsibilities. Thiede and Ganster (1995) also found that the social support, either work or family based effects, balances work and family roles in a positive way because it helps in sharing the thoughts and the problems arising out of work and personal affairs.

Social Support

Social support is a multidimensional construct that refers to the psychological and material resources available to individuals through their interpersonal relationships. Social support is believed to have a positive impact on the working roles performed by women at work places by enhancing job satisfaction and creating balance, thereby eliminating work-family conflicts (Carlson and Perrewe, 1999). It is one of the important resources for working women to manage their work and family domains. Work - based social support is generally considered to be associated with the work outcomes and family – related social support with the family or non - work outcomes. The researchers have examined the relationship of social support (both work related and family related) with different factors. Social support can be bifurcated into two facets such as organizational support and family related support (Brough and Pears, 2004). Work related social support comes from the organizational members, such as peers and supervisors, where an employee works, whereas personal social support comes from spouse, parents, children, extended family or friends. Many studies have demonstrated that being integrated into social networks and receiving high levels of social support are important for mental health and well being particularly for women (Kessler and Mclead, 1995; Alarie, 1996). Also Social support network is believed to ameliorate the negative effects of role conflict on women's mental health (Cheung, 1995; Dona andBerry, 1994). Hence social support have a positive impact on one's health and well-being (Kaufmann and Beehr, 1989; Sarason, Sarason, and Pierce, 1990).

Mental Health

Mental health is a level of psychological wellbeing and is not mere absence of mental illness. From the perspective of positive psychology or holism, mental health may include an individual's ability to enjoy life and create a balance between life activities and efforts to achieve psychological resilience. Mental and behavioral problems are increasing as part of the health problems the world over. Mental health has received increasing attention over the past few years as a common problem with serious consequences for the health and well-being of the people. Global impact of mental illness is increasing day to day. Mental health Problems is considered to be the most contributors to the burden of disease and disability worldwide. Five of the 10 leading causes of disability worldwide are mental health problems.

Mental health impacts
Mental health problems at workplace not only has an effect on individual but also on the productivity of the enterprise.

Employee performance, rates of illness, absenteeism, accidents and staff turnover are all affected by employees' mental health status. A study reveals that working married women faces more problems in their married life when compared to non-working married women (Hashmi et al., 2007). Study conducted by Mukhopadhyay (1997) found that working women play a dual role in family and work place. They experience a sustained stress to cope with both conditions and hence their mental well being gets affected. Research has indicated that women show higher levels of distress related to multiple role management (Cleary, 1987). Also Kibria et al. (1990) found that employed mothers experienced psychological distress due to the plethora of domestic duties. The jobs taken by women create more conflicting situation due to dual role played by them. This gives birth to anxiety, worry and inability to tolerate the whole burden. Sinha (1997) found that working status of women had significant effect on anxiety. Leger (2004) found that most working women experience depression and generalized anxiety disorder between the age group of 35-55 years. He also found that symptoms of depression and anxiety retard their success in workplace and household lives.

Around the world, depression occurs more frequently among women than among men. (Culbertson, 1997) found that different roles and less favourable opportunities produce depression in women than men. Jocelyn and Sanda (2011) assessed the relationship between social support and mental health (depression, anxiety and somatic anxiety) relative to its impact on managerial women. The results showed that working women had moderate levels of physical symptoms, depression and anxiety. Jeaw-Mei Chen and Phyllis Lan Lin (1992) in their study found that working women reported higher levels of depression . Thus the working women are prone to various mental health problems and hence the researcher intended to study the Social Support and Mental Health among Married women teachers.

MATERIALS AND METHODS

Sample

The sample for this study consists of 302 married women teachers working in the arts and science colleges affiliated to Bharathiar University located in and around Coimbatore City. Simple random sampling was adopted in which tippets random number table was used.

Tools

Multi-dimensional Scale of Perceived Social Support

Zimet, Dahlem, Zimet and Farley (1988) developed this scale which consists of 12 items measuring the perceived social support from three sources namely Family (Fam), friends (Fri) and significant others (SO) with 0.91 reliability.

Mental Health Inventory developed by Jagdish and A.K.Srivastava (1983).This inventory was used to assess individuals' mental health. The scale has six dimensions namely Positive self evaluation (10), Realistic perception (8), Integration of personality (12), Autonomy (6), Group oriented attitudes (10), Environmental mastery (9) with 55 items and reliability 0.896.

RESULTS AND DISCUSSION

This study investigated the role conflict and mental health among the married women teachers. The descriptive data revealed that more than half of the respondents were in the younger age group of 23-33 years old (54.3 %) and the rest of them were near to the middle age and above. Two third of the teachers have completed their M.Phil degree (65.6 %) whereas nearly one third of them are Doctorates (25.5 %). A meagre percentage of the teachers are Post Graduates (8.9%). A vast majority of the teachers are Assistant professors (78.5%) which can be stated that they are in the initial stages of the teaching career. It is also found that a good majority of the teachers are Hindus (83.4 %) which proves that Hindus are predominantly found in Coimbatore. Half of the teachers hail from urban areas (51 %) while the other half are from rural areas (49 %). More than half of the teachers are from joint families (54.3 %) and the remaining are from nuclear families (45.7 %). More than one fourth of the teacher's monthly income ranges between Rs.5000 -10,000 (37.1%). The findings further show that just less than half of the teachers have only one child (40.4 %) and nearby one third of the teachers have no children (28.5 %).In today's world, the number of children is decided based on the economic conditions of the family. It is also seen that nearly half of the teachers are in the marital life for less than 5 years (43 %) which shows that the teachers are in the early stages of their marital life. Further, more than one third of the teachers have teaching experience for less than 5 years (39.4%) which indicates that they are inexperienced in the teaching career. The results also reveal that a vast majority of the teachers work for 7 hours per day (44.4 %) in the college.

The results also reveal that majority of the respondents perceive that they receive moderate level of Social Support (69.2 %), 16.9 per cent of them perceive that they receive low level of Social Support and the remaining 13.9 per cent of the respondents of the perceive that they receive high level of social support. The results of overall level of mental health show that nearly two third of the respondents have moderate level of Mental Health Status, 19.2 per cent of the respondents have low level of Mental Health Status and the remaining 18.9 per cent of respondents have high level of Mental Health Status.

different demographic cohorts, categorized on the basis of age, income and working hours.

Hypothesis Testing

Ho1: *There is no significant difference between the age and Social Support and Mental Health*

Table 1: ANOVA findings showed a significant difference various age groups with regard to Social Support and Mental Health. Hence Ho1 is rejected.

The findings indicate that women who are in the age group of 45 years and above perceive more social support (Mean=68.96, S.D=12.33) and high mental health (Mean=108.51, S.D=19.54) when compared to other age groups. Age is one of the major factors affecting an individual. Age signifies the physical and mental maturity of an individual. In terms of occupations, age has a major role to play. The findings reveal that Social Support is maximum at higher age. Lynch, (1998), Walen and Lachman, (2000) indicated that interaction with, and social support from, kin are more strongly related to quality of life and general well-being in the middle-aged and elderly. This is consistent with findings showing that the elderly receive and prefer social support from kin networks over friendship networks (Adams and Blieszner, 1995; Reinhardt, 2001; Stacey-Konnert and Pynoos, 1992, Siebert, Mutran, and Reitzes, 1999). Almeida (2002) who reported that young and old women differ significantly in the level of stress experienced. Chaturvedi and Purushothaman (2009) also revealed that teachers in the age range of 40-60 years, with higher experience can cope better with the job stress than their counterparts. Since teachers of older age group might have settled in their career, they might be able to handle the difficult situations, have better understanding of one's family life ,career and hence are able to cope up with stressful situations along with the help of social support from all sources.

Ho2: *There is no significant difference between the income, Social Support and Mental Health*

Table 1. ANOVA results based on Age of the respondents

Variables	Age (n=302)						F value	Stat result
	23-33 yrs (164)		34-44 yrs (107)		45yrs and above (31)			
	Mean	SD	Mean	SD	Mean	SD		
Social Support								
Family Support	20.64	6.06	22.79	4.23	24.19	3.56	9.08	0.00*
Friends Support	19.13	5.30	21.09	4.64	21.67	5.57	6.43	0.03*
Significant others	19.59	6.21	22.05	4.69	23.09	5.36	8.99	0.00*
Overall Social Support	59.36	15.61	65.94	10.98	68.96	12.33	10.91	0.00*
Mental Health								
Positive self evaluation	17.79	3.64	19.59	3.69	19.00	4.47	7.67	0.01*
Realistic perception	15.36	3.12	16.23	2.82	16.03	3.34	2.79	0.06
Integration of personality	21.75	4.09	24.00	3.97	23.83	5.57	10.35	0.00*
Autonomy	11.27	2.56	12.42	2.62	11.22	2.71	6.92	0.00*
Group oriented attitude	19.95	3.98	21.54	3.70	20.61	4.23	5.31	0.04*
Environmental mastery	17.15	4.013	19.05	3.85	17.80	4.79	7.18	0.00*
Overall Mental Health	103.29	16.65	112.86	15.64	108.51	19.54	10.83	0.00*

Difference in Role Conflict and Mental Health among Socio demographic factors

Z-test and ANOVA results for the between-group mean differences on Role Conflict and Mental Health for the

Table 2: ANOVA findings showed a significant difference between various income groups with regard to Social Support and Mental Health. Hence Ho2 is rejected. The findings indicate that women in the income group of Rs. 20,001 and above perceive that they receive more Social support

(Mean=66.33, S.D =12.54)   and high level of mental health (Mean=111.55, S.D =15.99) when compared to other income groups.

Amaro et al. (1987) studied Latina women and found that those with higher income and those who were married reported greater psychological well being. **Raback et al. (2012)** found that low income seems to be a more important correlate of mental disorders.

health. Hence less number of working hours contribute to high level of mental health.

Ho4: *There is no significant relationship between Social support and Mental health*

Table 4: Correlation analysis reveals that Social support is positively and significantly associated with Mental health (r=0.464, P<0.01 sig) of the married women teachers. Hence Ho4 is rejected

Table 2. ANOVA results based on Monthly income

Variables	Monthly income (Rs.) (N=302)								F	Stat result
	5000-10,000(112)		10,001-15,000(73)		15, 001-20,000 (22)		20,001 and above (95)			
	Mean	SD	Mean	SD	Mean	SD	Mean	SD		
	Social Support									
Family Support	20.83	5.96	21.39	5.79	22.72	3.65	22.92	4.48	2.96	0.03*
Friends Support	19.04	5.55	20.01	5.10	20.90	4.33	21.18	4.82	3.18	0.02*
Support from significant others	19.28	6.21	21.05	5.65	21.86	4.33	22.22	5.271	4.94	0.00*
Overall Social Support	59.16	15.45	62.46	14.48	65.50	9.82	66.33	12.54	4.81	0.00*
	Mental health									
Positive self evaluation	17.99	3.57	18.19	3.53	19.36	4.53	19.32	4.08	2.67	0.04*
Realistic perception	15.44	3.27	15.36	2.83	15.90	3.37	16.33	2.84	1.94	0.12
Integration of personality	22.13	4.36	22.20	4.31	22.68	4.76	23.95	4.10	3.65	0.01*
Autonomy	11.62	2.86	11.30	2.56	12.04	1.86	11.94	2.59	0.97	0.40
Group oriented attitude	19.97	3.69	20.21	4.67	20.95	4.25	21.50	3.47	2.91	0.03*
Environmental mastery	17.73	3.57	17.69	4.70	16.81	5.05	18.48	4.00	1.26	0.28
Overall Mental Health	104.90	16.82	104.98	17.52	107.77	19.89	111.55	15.99	3.19	0.02*

Table 3. ANOVA results based on number of hours of work in the college per day

Variables	Hours of work (N=302)						F value	Stat result
	6 hrs (94)		7hrs (134)		8hrs and above (74)			
	Mean	SD	Mean	SD	Mean	SD		
	Mental Health							
Positive self evaluation	19.13	4.00	19.35	3.59	16.37	3.21	17.70	0.00*
Realistic perception	16.05	3.00	16.26	3.00	14.40	2.87	10.03	0.00*
Integration of personality	23.46	4.45	23.57	4.26	20.40	3.52	15.79	0.00*
Autonomy	12.13	2.80	11.82	2.62	10.82	2.30	5.64	0.04*
Group oriented attitude	21.71	3.79	20.91	3.68	18.55	3.97	15.28	0.00*
Environmental mastery	19.20	3.73	18.21	4.11	15.64	3.74	17.89	0.00*
Overall Mental Health	111.71	16.80	110.15	16.45	96.21	14.02	23.43	0.00*

Table 4. Correlation between Social Support and Mental health

Variables	Role Conflict	Mental Health
Social Support	1	.464**
Mental Health	.464**	1

**Correlation significant at 0.01 level (2-tailed).

Table 5. Regression Analysis for Independent variables and Mental Health

Variables	B	Std. Error	Beta	T value	Sig
Constant	121.571	2.612		46.550	.000
Number of working hours per day	-7.419	1.261	-.322	-5.885	.000

R	R Square	F value	Sig
322	103	34.628	000

Ho3: *There is no significant difference between the number of hours of work per day in the College and Mental health.*

Table 3: ANOVA results exhibits a significant difference between number of hours of work per day in the college with regard to Mental Health. Hence Ho3 is rejected.

The findings indicate that respondents who work 6 hours in the college have high level of Mental health (Mean=111.71, S.D=16.80). Sparks et al. (1996), Vander Hulst, (2003), Taris et al., (2007) research clearly shows that the outcomes of long working hours are deterioration in both physical and mental

These findings reveal that higher the social support perceived by the teachers, the higher the level of Mental Health. These findings collaborate with the findings of Ayo Hammed (2008) who implied that there is a positive relationship between social support and the mental health of women. He found that when there is a high level of social support there is a corresponding high improvement in mental health of women. Also Kessler and Mcleod (2002), Cohen (1998), Stansfeld and Sprooton (2002), House and Kahn (1985) demonstrated that being integrated into social networks and receiving high levels of Social support is important for mental health and wellbeing. Kaufmann and Beehr (1989), Sarason and Pierce (1990)

research also showed that Social support plays an important role in promoting health and well-being. Also, Hoffman (1996), and Kee et al. (1998) reported that lack of social support has been linked etiologically to common mental disorders in women.

Ho5: *The number of working hours per day do not predict mental health of the married women teachers.*

Table 6: Multiple regression analysis revealed that number of working hours per day have a significant (r=.322, p<0.05) strong negative relationship with Mental Health of the married women teachers. Thus it is inferred that controlling for all the variables, the level of Mental Health of the respondents tend to increase significantly with decrease in the number of working hours per day. Thus the number of working hours per day are the significant predictors of Mental Health. These findings are consistent with the findings of Jex (1999), Proctor et al. (1996) and Yang et al. (2006) found that long working hours a negative effect on general health, mental health and cardiovascular disease, in contrary Artazcoz et al. (2007), Baldwin et al. (1997) and Park et al. (2001) found no ill effects due to long hours of work.

Conclusion and Recommendation

The position of women and their status in any society is an index of its civilization. They are to be considered as equal partners in the process of development and constitute a significant part of the work-force in India. Today women have attained a remarkable position in probably all the fields. But the problems they face due to role conflict issues are numerous. This in turn may have a positive impact on mental health**.** Ayo Hammed (2008) found that stress and work/family conflict lead to high levels of mental health problems among married working women. The study also demonstrated that high levels of social support lead to high levels of improvement of the mental health of women, while lack of social support lead to mental illness and other health outcomes among women. Hence the current study was undertaken to study the Social Support and Mental health among married women teachers working in Arts and Science colleges affiliated to Bharathiar University, Coimbatore. The study included a sample of 302 married women teachers randomly selected from 41 Arts and Science colleges affiliated to Bharathiar University, Coimbatore. Results of the study revealed that significant difference in Social Support and Mental Health were observed with respect to age, income and working hours. These findings reveal that higher the levels of Social Support experienced by the teachers, higher the level of Mental Health Age and working hours were the strongest predictors of Social Support and Mental Health. This study therefore serves as an awareness forum to sensitize the married woman teacher's problems and to establish family and work supportive programmes which can help the teachers reduce their role conflict and enhance the mental health.

Social work Intervention

Social Work is a profession in which a social worker assist individuals alone or in groups to obtain social and personal satisfaction and independence through applying scientific knowledge and skills in human relations. Social workers work with the various social problems of individuals, groups and communities and assist people by helping them cope with and solve issues in everyday lives such as family and personal problems and dealing with relationships. Interventions are intended to aid clients in alleviating problems impeding their well-being. Social workers provide interventions to assist with the needs and problems of individuals, families and groups. Social work interventions range from primarily person-focused psychosocial processes to involvement in social policy, planning and development. In the current study, Social work intervention can be suggested to the married women teachers by using the methods of Social Work such as Social Case work, Social Group work and other techniques such as counselling, therapies, psycho education to enhance the coping strategies among the married women teachers. Counselling as one of the social treatments in Social case work can be given to the teachers and their family members to help them towards the solution for their present problems .Social worker through counselling can provide an environment to the teachers where they can feel free to let out their thoughts and feelings .The teachers can be made to realize the situations which create them conflicts in the work and family. With the help of the Social worker they can schedule the time to be allotted both for work and family. Quality time can be spend with their children, spouse and family members. Social Group Work ,a method of Social Work which develops the ability of establishing constructive relationship in the individuals through group activities .Social group work through group activities helps the group members to increase their capacities for participation, belonging, decision making, responsibility taking and adjusting themselves.

Group work can be applied among married women teachers which help them to understand the universe of the problem such that they can realize that others also undergo the same problem. Through group work, the teachers can understand the magnitude of the problem and can have the group feeling which can help them share their problems with the other members in the groups and find solutions to solve the problems. Group work also helps the teachers to strengthen their social networks with their colleagues. Social group work also paves way for effective communication. Group work among the junior and senior faculties can help junior teachers to cope with the work family issues with the guidance of senior teachers. Social work research as a method of Social Work is a systematic investigation into the problems in the society and provide solution to the problems. Conducting researches among the married women teachers on different aspects such as occupational stress, job satisfaction, work performance, turn over intentions, quality of work life, work family balance, resilience, marital adjustment etc., can make the family members, colleges and the government aware regarding the working women problems and provide suitable interventions. Therapeutic interventions can also be given to the teachers to understand their intra-psychic conflicts. Psycho therapy can be applied to the teachers to understand their personality growth in the direction of maturity, competence and self actualization. In psychotherapy, through free association, the teachers may be given opportunity to say whatever comes in their mind. This can help the social worker to understand the conflicts which are unaware. Family therapy can be given to the teachers and their family members. It helps to understand the communication pattern in the family. The family members can be made to understand the teacher's dual responsibilities so that they may act as a support for the teachers at families. A work schedule can be prepared by the teachers and their family members so that the work at family can be equally shared by the spouse.

Marital therapy also helps the teachers to deal with the relationship problems with their spouse.

Coping strategies can be adopted by the teachers to solve their conflict issues. When they feel stressed, they can listen to the music which makes them relaxed, also they can watch comics where humour is a tool of stress reduction. A good balanced diet is essential to deal with stress. Balanced diet with fruits and vegetables can refresh mind and keeps body healthy. Regular Relaxation technique is a method of counteracting the harmful effects of psychological changes due to stress. Also meditation is a path of psychic control which systematically cultures the mind and relaxes the sub conscious mind. Recreations are very important which is a mechanism helps to come out of stressful situations. The teachers going outing with the families weekly once, also a short picnics arranged by the colleges with the teachers along with their families once in six months, organizing interaction and cultural programmes for teachers monthly twice make them free from their routine schedule.

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