CHAPTER 2

REVIEW OF LITERATURE
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In the following review of literature attempt has been made to cite as many of the Indian and foreign references as possible, on the related topics.

FAMILY STRUCTURE AND STRESS MANAGEMENT

Family structure – nuclear or joint – is considered as an important factor in the proposed research in relation to stress management ability of women. The family is an interaction based unit of any society with diverse and dynamic intra-family relationship. Family plays an important role in development of a person. Exposure to stressful life events, the experience of chronic stress and the level of psychological resource are rooted in social structural context of people’s lives (Chowdhury et al., 1999; and Denton & Walter, 1999). Denton et al. (2004) analyzed Canadian National Population Health Survey Data, and found that social structural and psychosocial determinants of health are generally more important for women being in high income category, having social support and working fulltime, and caring for a family, were more predictors of good health than man. Although, life style factors did play a part in women’s health.

Gupta (1989) conducted a study on role stress, locus control, coping styles, and role efficacy on first generation entrepreneurs. The study found that the family system to which an entrepreneur belonged had a significant bearing on role stress. Entrepreneurs from nuclear families experienced more role stress as compared to those from joint families. Entrepreneurs from nuclear families used significantly more extra punitive, defensive, and interpersistive styles of coping. Entrepreneurs from joint families used intropersistive and extrapersistive styles of coping more often.

Ramamurti & Jamuna (1984) reported on the basis of their study in India that individuals, both men and women, living in joint family were found to have better
adjustment than individuals living in nuclear families. The studies point towards the possibility that perception of availability of social support may be associated with better adjustment among older and retired women as well as housewives.

Nuclear family creates more stress as compared to joint family. Joint family and support from joint family acts as buffer against stress. Pandey & Srivastava (2000) study also identified that respondents belonging to nuclear family had expressed more interpersonal work stress than joint family respondents.

The family can act both as a buffer against sources of stress, such as periods of ill health, and as a source of models of positive coping behaviour. Families may also have a negative effect on health, through family role, related demands and unhealthy interactions, especially for females. This highlights the need to understand how family roles and responsibilities are negotiated across the life span and differ according to societally determined gender-related norms and power relationships (Sweeting, 2001).

It is also important to recognize that the family does not exist within a vacuum. It moderates and reflects the influence of wider social context. By concentrating purely on internal family process and family structure, there is danger of ignoring issues of structural advantage and disadvantage that impact on the family, particularly at key points within its life-span (McMunn et al., 2001).

Iqbal et al. (2004) conducted a study on anxiety in working women and nonworking women with reference to their education, family system, and number of children. A purposive sample of 50 working women and 50 nonworking women was taken. It was found that both working and nonworking women in joint family system were more frequently diagnosed with anxiety; but that association was not statistically significant.

Stressful and other psychological experiences as well as lifestyles of individuals are also patterned by various social structural variables like socio-economic status,
age, gender, family structure, residential density etc.. Denton et al. (2004) observed that family structure was important determinant for women in respect of their health.

Eirini (2005) conducted a study on women’s psychological distress in mid-adulthood and found that parental family structure was unrelated to psychological distress. Family structure did not moderate the relationship between parental involvement and daughter’s psychological distress.

Ugwu (2010) conducted a study on 147 sandwich generation middle aged working women, who were living with their aged parents or parents-in-law. The study investigated multiple-role stress experience both at home and at workplace and the coping with stress. Results showed that women who received care-giving supports either from their husbands or from family members experienced less stress. Women who cared sick parents experienced more stress than their counterparts. But large and normal family size did not play any significant role in measure of multiple role stress.

Madhavi & Vimala (2011) conducted a study on work related stress and work family issues experienced by women software professionals in Chennai. The results indicated that there was association between work family issues and number of family members of the employees. Majority of the employees with less family members had reported more work family issues than other. This was because there was no sharing of responsibility. When more adults were available; sharing of family responsibilities was possible, so the work family issues were observed to be at higher end for the respondents in small family.

Akram & Khuwaja (2014) conducted a study on depression among working and nonworking women. It was observed that the working women who lived in nuclear family system reported higher level of depression than those for joint family system. Because in joint family system the relatives might helped the working mothers in child raising and other household work, whereas there was no significant difference in level of depression of nonworking women living in both family systems.
PERCEIVED FAMILY ENVIRONMENT AND STRESS MANAGEMENT

Family environment plays a vital role in women’s life. Family provides most of the early environmental influence upon the personality which remains throughout the life. Perception of family environment varies from one stage to another stage of life cycle and also differently for both gender groups (Gupta & Shukla, 2007; and Gupta & Joshi, 2010). Family environment is equally important aspect in lives of working women (Agrawal, 1979; Frumm, 1993; and Flaxman, 1999).

Holahan & Moos (1985) investigated factors that buffer the potentially negative health effects of life stress by surveying 267 families from a representative community sample. Both husbands (mean age 44 years) and wives (mean age 42 years) were tested. Samples were separated into a distress group (high stress, high distress) and a stress resistant group (high stress, low distress) and were assessed on a battery of measures that included the Social Readjustment Rating Scale and the Family Environment Scale. Findings demonstrated that subjects who adapted to life stress with little physical or psychological strain were more easy going and less inclined to use avoidance coping than subjects who became ill under stress. In addition, in the stress-resistant group, men were more self-confident and women had better family support than their counterparts in the distressed group (Psyc Info Database Record (c) 2012 APA).

A longitudinal study assessed the impact of family support on mental health (Aldwin & Revenson, 1987). The sample consisted of 245 men and 248 women from randomly selected families in an urban area. The availability of support from one’s family at the time of the initial survey people who used active strategies were associated with better psychological adjustment one year later. Holahan & Moos (1987) research also indicated that individuals with family support were more likely to cope with stressful events by using active strategies rather than avoidance or withdrawal strategies.
Shulman et al. (1987) conducted a study to compare coping styles across different perceived family climates. Analysis indicated that the perception of family cohesion and organization, combined with respect for individual development, was related to a higher level of functional coping in the family members. A sense of lack of family support, or a sense of an over-controlling family climate, was related to a higher level of dysfunctional coping. Adolescent perception of family climate was found to be related to the nature of the task or situation being encountered.

Murch & Cohen (1988) investigated the relationships among life stress, perceived family environment, and psychological distress. Results indicated that low level of perceived family conflict and control served as life stress buffers in the prediction of distress, whereas high level of perceived independence served as a life stress exacerbator.

Stern & Zevon (1990) study supported the view that a negative perception of family environment was associated with the use of emotion-focused coping strategies, such as withdrawal, denial, and tension reduction. A positive perception of family climate was related to the use of more problem-focused strategies, such as active coping.

Vostanis & Judith (1995) have found that low ratings of family cohesion, expressiveness, intellectual-cultural, and active-recreational orientation were related to families having children diagnosed with mental illnesses as compared to families of non-clinical cases.

The presence or absence of support is a major determinant of the impact of a stressful life event. Data were obtained from 615 women seeking an abortion in a longitudinal study. Before the abortion, each woman rated the degree to which she received positive (expressed concern, offered help) and negative (argued, criticized) support from her partner, mother, and friends. Perception of positive support from each source was associated with greater well-being following the abortion (Major et al., 1997).
Wamboldt & Wamboldt (2000) also found that living with supportive family, with positive interaction, and clear communication was associated with low levels of stress, high levels of stress-coping behaviour, good psychological health, active adaptation to acute and chronic illness, and high levels of adherence to treatment. It seems that negative family functioning represents a potential source of stress, while positive interactions have buffering effect that is, reducing stress responses by enhancing emotional support and the modelling of coping behaviours amongst family members.

A small number of close and harmonious relationships can improve the quality of an adult’s life, whereas negative relationship or none can make life unpleasant. Social support, especially from family members, has positive effects on cardiovascular, endocrine, and immune systems, keeps blood pressure in the normal range, improves the body’s ability to cope with stress and can contribute to better physical and a longer life, especially in old age. Close relationships later in life can help people keep their emotions in check and avoid stress-related illness (Charles & Mavandadi, 2004). Close relationships with family and friends can also help people maintain high levels of cognitive functioning (Zunzunegui et al., 2003; and B’eland et al., 2005).

Varma & Dhawan (2006) conducted a study on 195 young urban educated married women with age range from 25-35 years. The results indicated that Indian women exhibited high level of well-being. The dimension of family group support contributed more to well-being. It was also found that women were able to control their major domains of lives and used active coping strategies to better their sense of well-being.

Herman et al. (2007) also found that family cohesion and supportive relationship between family members were associated with psychological adaptation and lower depression.
Wadkar & Mardhekar (2007) investigated the relationship between perceptions related to personal factors of women working in professional and nonprofessional fields. This study showed that there was no significant difference between women-work in professional fields and women-work in nonprofessional fields regarding their perception of family environment, physical coping resources, and self-confidence. Mardhekhar & Wadkar (2009) found that employed women perceived their family environment to be most favourable and conducive for their personal growth than educated housewives. Educated housewives were more frustrated and had low self-confidence.

**WORKING STATUS OF WOMEN AND STRESS MANAGEMENT**

Indian women work with the framework of family system. They play significant role in household activity. Their lives are more family centered than men. In prevailing twenty first century the role of women in urban sector of society is changing rapidly. The time has come when women must come out of their homes and take part in public life. Women can play multiple roles as working women, as good house wife, as mother, and as caregivers for older parents. The term working women means who work outside of/or inside their homes to earn, and nonworking women means who are not economically or gainfully employed and are totally involved in household job. The happiness of a family depends upon women and double work pressure induces frustration, stress, and other problems. Working women have to work in two environments, one is the workplace and the other is home environment, women have to face all problems, if they are working they are supposed to perform all duties at workplace as well as at home. Working married women are more under stress than nonworking married women.

The research on stress and working status of women has reported controversial views. Holahan & Gilbert (1979) compared role conflict experienced by career and noncareer women. Greater role conflict was reported by the noncareer group than the career group.
Cooper (1981) reported that working women were more under stress than nonworking married women. Findings indicated that working married women who are engaged in multiple roles had to face severe stressful situations at work sometimes serve as to put a woman into an unhappy situation, sometimes getting stuck in a situation that increases stress. Many working married women experienced high stress levels, because heavy work put a bad effect on their lives and it created stress in their personalities.

Stewart & Salt (1981) investigated the relationship between life stress and depression and physical illness in 96, 33 years-old normal white females. Results indicated that life stress was associated with both illness and depression but that both type of stress and life-style were important moderators of these relationships. Thus, work stresses were associated with illness (not depression), and the relationship between life stress and illness was strongest among work-centered samples. Family stresses were associated with depression (not illness), and the relationship between life stress and depression was strongest among housewives than working women (PsycINFO Database Record (C) 2012 APA).

Women’s multiple roles supply the women with multiple identities, and that satisfying role can complement or offset less satisfying roles. Supporting this approach, evidence demonstrates that employed married women report fewer psychological or physical problems than nonemployed married women (Kessler & McRae, 1982; and Crockenberg, 1988). Cooke & Rousseau (1984) disclosed that employed might had beneficial effects on psychological well-being and marital happiness.

Kessler & MacRae (1982) also reported that working women can utilize their abilities and skills not only for them but for their family and society as well. Rich experiences out of the home may consist of intellectual stimulation, problem-solving, and handling challenge. These experiences are the source to enhance their self-esteem, self-confidence. They have their own income, which offers independence, freedom, and security. Along with financial distress the housewives may experience
lack of satisfaction, boredom, and feeling of worthlessness. Employment has positive psychosocial effect on women either as a safeguard against stress or as a primary source of well-being.

Women believe that a successful career is the key to financial and social life. Today, there are several roles women may choose to fulfill/carryout. Working women derive a wide range of intellectual, creative, and social as well as monetary benefits from their jobs. Working women are healthier as a working mother. Studies show that working women have lower blood pressure and lower cholesterol levels. Homemakers were the most likely to say that their health was poor. The findings suggested that good health was the result rather than the cause of combining work with family life (Hoffman, 1986).

Working married women reported more stress and less satisfaction than housewives in a sample of 200 Canadian couples (Burke & Weir, 1987).

McBride (1988) and Houston et al. (1992) found that the effect of employment on women’s or mother’s well-being had demonstrated highly inconsistent results. In support of the scarcity approach, which hypothesized that since human energy is fixed and limited, additional roles often result in stress, overload, and conflict, a group of studies indicated that employed and married women experienced more deterioration of physical and mental health than their nonemployed counterparts.

Chen & Lin (1992) conducted a study on daily life demands, social support, life satisfaction, and health of working women and housewives. Results from a survey of 444 Taipei women revealed that while working women experienced more daily life demands (role overload) than housewives, they also enjoyed more support in dealing with those demands. Results also showed that stress levels were higher in working women than housewives. Data showed that working women reported higher levels of depression than housewives.
Marshall & Barnett (1993) investigated the sources of work-family strains and gains in a sample of 300 two-earner couples. Although most men and women reported work-family gains, not all individuals experienced work-family strains. Workload and quality of experiences at work and at home were major predictors of work-family strains. Experience at work and at home, social support, and sex-role attitudes were major predictors of work-family gains. They observed that women who participated in multiple roles experienced low levels of stress-related mental and physical problems and felt generally better than their cohorts who engage in few roles. Research also found positive effects of combining home and work responsibilities (Barnett et al., 1991; and Waldron et al., 1998). Crosby (1991) research also supported the fact that women who occupied multiple roles were less depressed than other women. Research also supported the fact that employed women, regardless of marital status, reported greater happiness than the nonemployed women (Crosby & Jaskar, 1993). Mathur (1997) also found that married working women had significantly better psychological well-being and marital adjustment than housewives.

Nathawat & Mathur (1993) conducted a study on marital adjustment and subjective well-being in Indian educated housewives and working women. Results indicated significantly better marital adjustment and subjective well-being for the working women than for the housewives. Working women reported higher scores on general health, life satisfaction, and self-esteem, and lower scores on hopelessness, insecurity and anxiety compared with the housewives, although the housewives had lower scores on negative affect than the working women.

Sarwar (1994) conducted a study on marital adjustment and depression among working and nonworking women. Study indicated that working women might be prone to depression because they bore the double burden of house work and a job outside the home.
Kahn & Cuthbertson (1998) studied that working mothers and mothers who were full-time homemakers when tested on three aspects of mental health: free-floating anxiety, somatic anxiety, and depression. Apart from it, stress-coping strategies utilized, were also measured. Few differences were found between the both groups of mothers.

Bernas & Major (2000) suggested that the best way to deal with work-family conflicts is to find an individualized management strategy. They further concluded that a working woman can take the initiative in finding a work-family management strategy that is best suited to her needs. They assert that working women can cultivate useful resources in an effort to reduce experienced stress and work-family conflict. In particular, supportive home and work environment are directly associated with reduced stress and indirectly linked to diminished work family conflict. It is necessary for a working woman to find the management strategy best for her because the family needs of all women are neither homogenous nor static.

Jain & Gunthy (2001) also found that working women reported more hassles than housewives. Working women found difficulty in coping strategies to deal effectively as well as mentally strained themselves.

A woman who is almost wholly responsible for dependent elder may feel angry and resentful because she has no time for herself. She may experience role conflict between her caregiver role and role as wife, mother, and employee that undermines her sense of well-being. She is at risk for depression (Stephens et al., 2001).

Sahu & Rath (2003) conducted a study on self-efficacy and well-being among working and non-working women from urban areas of Orissa and found positive and significant correlation between self-efficacy and well-being. The study also explored that strong involvement in work enhanced women’s well-being. Working women had high financial and emotional security provided by their work experience. Women’s employment provided opportunity to become self-reliant.
The level of life stress and various dimensions of mental health among working (n = 30) and non-working (n = 30) women of Varanasi city was examined by Ojha & Rani (2004). Results revealed that working women significantly scored higher on life stress as compared to non-working women. Significant negative correlations were found between life stress and positive self-evaluation and between life stress and integration of personality among both working and non-working women.

Kulik (2004) found that the conflicting demands of home and workplace were especially intense in dual-earner families and might adversely affect the psychological well-being of both spouses, and to counteract or at least mitigate the effects of role conflict, it was found that employed people used a broad range of coping strategies in an effort to enhance psychological well-being.

Iqbal et al. (2004) conducted a study on anxiety among working and non-working women. A purposive sample of 50 working and 50 non-working women was taken. It was observed that majority of non-working women had anxiety (74%) when compared with anxiety in working women (i.e., 36%). This association was found to be highly significant.

Aujla et al. (2004) conducted a study to know sociological and environmental factors that caused stress among women and to know about fighting technique used by them. It was concluded that working women were significantly more stressed because of shortage of time and overburden of work than non-working women. Both groups used some common stress management techniques like relaxation, meditation, social support, psychotherapy, and listening music.

Aziz (2004) conducted a study on role stress among women in Indian information technology sector. Results indicated that resource inadequacy and role overload were main stressors. Differences in level of stress between married and unmarried women were found considerable but education was not found to play any significant role.
Aditi & Kumari (2005) conducted a study with the aim of delineating the personality patterns of women in relation to employment status and psychological stress tolerance. Sample comprised of 200 working and 200 nonworking women who were administered EPPS and STI. Multiple regression analysis revealed common and specific need patterns contributing to stress tolerance, for both working and nonworking women. It was discussed that as needs increase, the stress perceptions of working women were moderated or lowered, leading to increased stress tolerance, while those of nonworking women were intensified and exaggerated resulting in decreased stress tolerance. It was also discussed that the stress buffering effects of friendship and other social support system were significant contributor to the high levels of stress tolerance among working women.

A study (Thompson et al., 2005) aimed to test a path model in which work stress affected police women’s functioning in their family environment through a component of burnout and emotional exhaustion. Work role stressors assessed were role ambiguity and role overload. Work based support from supervisors, but not from colleagues, was predicted to reduce role stressors, and emotional exhaustion, and improve perceptions of family functioning (cohesion and conflict). Data were collected via a mail out survey to 1081 police women in an Australian state police service. Useable surveys were returned by 421 police women. Path analysis indicated a good fit to the model. Supervisor, but not coworker support reduced role stressors, which had a significant path to family cohesion and conflict, through emotional exhaustion. The finding suggested that a fruitful avenue of exploration of stress transmission to the family would be an examination of behaviours linked to emotional exhaustion. Additionally, interventions designed to reduce stress in police women should include supervisor training in social support.

Gill & Aujla (2006) conducted a study to examine psychological and physiological stressors among working and nonworking women. Data were collected from 75 working and 75 nonworking women from four localities of Ludhiana city.
Results indicated that common factors of stress in both categories were unfinished tasks, compulsion of doing disliked activities, death of close relatives, and improper sleep. In working women, stressors were ‘pleasing others’ (M = 0.92) and overburden of work (M = 1.04), whereas in nonworking women stressors were ‘wrong working posture’ (M = 0.97), and noninvolvement in decision making by family (M = 1.02). The study showed that working women were more stressed as compared to nonworking women. In another study Aujla et al. (2004) also observed similar finding. In contrast Beja Jr. (2012) observed that employed women tended to report higher subjective well-being and happiness than housewives.

Sanlier & Arpaci (2007) studied the relationship between stress and working status of women. They found that stress level of working women was higher as compared to nonworking women. Perry-Jenkins et al. (2007) asserted that increase in role overload was positively related to both depression and conflict.

Hashim et al. (2007) conducted a study to explore the relationship between marital adjustment, stress, and depression. Sample of the study consisted of 75 nonworking and 75 working married women. The finding showed that working married women had to face more problems in their married life as compared to nonworking married women. The result further indicated that highly educated working and nonworking married women could perform well in the married life and they were free from depression as compared to their counterparts.

Anderson (2009) found that working mothers had better mental health and reported less depression than the non-working mothers. Women’s multiple roles are good for their mental health. The most frequent reported source of stress for working mothers was not having enough time to do everything, whereas for non-working mothers lack of social life was a major stressor.

Mardhekar & Wadkar (2009) conducted a study on perceptions of educated housewives vis-à-vis working women related to frustration, self-confidence, and
family environment. The study evaluated responses of 160 housewives and 160 working women, on self-reported inventories. Results revealed that housewives were more frustrated and had low self-confidence than working women. It had also been noticed that employed women perceived their family environment to be most favourable and conducive for their personal growth.

Saxena (2009) conducted a study to compare frustration among working (n = 30) and nonworking women (n = 30). Finding confirmed that the working women had higher level of frustration than the nonworking women.

Karve & Nair (2010) aimed to examine the relationship between role stress and coping ability with role stress among Indian women executives. 200 adult women executives ageing 25-60 years employed in different public, private and government sector had been studies. Results showed that executives tended to use more proactive style of approach mode of coping with role stress wherein they dealt with role stress through own efforts, seeking help from significant others and using organization resources to reduce role stress.

Adhikari (2012) conducted a comparative study of anxiety and depression among working and non-working mothers. A total of 60 mothers (30 working and 30 nonworking) were studied. The result showed that there were significant differences in degree of depression and both type of anxiety among working mothers’ group. But no significant difference was noticed in case of anxiety and depression pattern of non-working mother’s group.

Soomro et al. (2012) made a comparative analysis of depression among housewives and working women in Karachi, Pakistan. The purposive samples of hundred housewives and working women were examined. The results indicated that there was significant difference in the level of depression of working women and housewives. The level of depression among the housewives was twice as that of working women.
Dudhatra & Jogsan (2012) conducted a study on mental health and depression among working and nonworking women. Total sample of 80 working and nonworking were examined. Results showed significant difference in mental health and depression. Working women were less depressed and had better mental health than nonworking women.

Akram & Khuwaja (2014) conducted a study which aimed to explore the level of depression among working and nonworking women. Sample of the study consisted of 100 working women and 98 nonworking women selected through purposive sampling technique. The result showed that nonworking women had more depressive tendencies as compared to their working women counterparts.