CHAPTER - III

STATEMENT OF PROBLEM AND HYPOTHESES

From the research studies reviewed in the last chapter two main questions emerged namely:

(a) What would be the factors contributing to bio-psycho-social well-being of middle aged women?
(b) Would naturopathy and deep muscle relaxation training be effective in enhancing bio-psycho-social well-being of middle aged women?

These were the two questions raised in the two main problems of the present investigation as depicted in figures 3.01 and 3.02.

OBJECTIVES

Keeping these two problems in view, the objectives of the research were spelt out. They were:

1. To ascertain the factors contributing to biological or somatic well-being of middle aged women.
2. To analyse the relationship between physiological parameters and bio-psycho-social well-being.
3. To study the factors associated with psychological well-being of middle aged women.
4. To find out the factors related to social well-being of middle aged women.

5. To identify the functions emerging from the clusters of factors which would significantly discriminate healthy and unhealthy middle aged women and similarly the middle aged women belonging to pre, peri and post-menopausal phases.

6. To determine the relative efficacy of naturopathy and deep muscle relaxation (Jacobson's method) training on bio-psycho-social well-being of middle aged women.

HYPOTHESES

On the basis of previous research findings seven hypotheses were framed for the present investigation.

Barrett et al., (1933); Ramamurthy (1978); Jamuna (1984) and Williams (1989) reported significant relationship between certain demographic variables and somatic well-being. Richards (1974); Indira and Murthy (1980) and Elders et al., (1987) found some of the clinical variables to be significantly related to somatic well-being. Grant et al., (1974); Bageley (1981); Lustman (1988) and Thomas (1995) held that psychological variables significantly contributed to somatic well-being. As almost all these studies were univariate in nature, it was decided to use multivariate approach for throwing more light on the factors contributing to somatic well-being. Keeping these findings in view, it was hypothesized.

"Biological well-being would be a function of clinical, demographic and psychological variables"
(As mentioned in the model - Figure 3.01).

[Hypothesis 1]
PROBLEM 1

**Body mass index**
**Food habits**
**Onset of puberty**
**Menopausal status**
**Onset of menopause**
**History of hysterectomy**

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**Clinical Factors**

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**Bio-chemical Factors**

- Estrogen
- Progesterone
- Total cholesterol
- High density lipoprotein cholesterol (HDL)
- Low density lipoprotein cholesterol (LDL)
- Very low density lipoprotein cholesterol (VLDL)
- Triglyceride
- Calcium

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**Demographic Factors**

- Age
- Marital status
- Years of marital life
- Educational level
- Employment status
- Nature of employment
- Years of employment
- Hours of work
- Family size
- Family type
- Family income
- Religion
- Marital status of children

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**Fig.3.01 Factors Contributing to Bio-Psycho-Social Well-being**

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**PROBLEM 2**

**Naturopathy Intervention**

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**Deep Muscle Relaxation Training**

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**BIO-Psycho-social WELL-BEING**
Extending the findings of Rosenman and Friedman (1974); Padmakumari et al., (1989); Makowiec (1994); Bluementhal et al., (1995) and Kushnir and Kristal (1995) to the present study, it was hypothesized.

"There would be significant relationship between physiological parameters such as estrogen, progesterone, cardiovascular risk factor, triglyceride and calcium and bio-psycho-social well-being".

[Hypothesis 2]

According to Neugarten (1956); Neugarten and Guttman (1968); Jamuna and Ramamurthi (1984) and Dwivedi and Misra (1993), certain demographic variables significantly contributed to psychological well-being. The findings of Munday and Cox (1967); Richards (1973); Sarason et al., (1978) and Salter (1985) revealed significant contribution of clinical variables to psychological well-being. Studies of Cooke and Greene (1981) and Jonsson and Theorell (1991) established significant relationship between selected psychological variables and psychological well-being. Hence it was hypothesized.

"Clinical, demographic and psychological factors would significantly contribute to psychological well-being".

[Hypothesis 3]

Extending the findings of Devi (1967); Lowenthal et al., (1977); Noor (1995) and Pina and Bengtson (1995) on the relationship between certain variables and social well-being to the present study, it was hypothesized,
"Social well-being would be significantly related to clinical, demographic and psychological variables".

[Hypothesis 4]

There is strong evidence relating to the association between health status of women and well-being (Dennerstein et al., 1994). Thomas (1995) concluded that healthy women had fewer concerns in their roles as wives, mothers and workers and unhealthy women had worries and more arguments with their children. Furthermore, Vankeep and Kellerhals (1975); Jamuna (1984); Ladesert et al., (1994) and Collins (1994) reported that well-being of women was significantly related to menopausal status. Based on the studies mentioned above, the next hypothesis was framed.

"There would be functions emerging from clusters of factors which would significantly discriminate healthy and unhealthy middle aged women and similarly the middle aged women belonging to pre, peri and post-menopausal phases".

[Hypothesis 5]

Very few studies have been carried out on naturopathy and the well-being of women. Geetha and Devi (1996) assessed the effect of naturopathy treatment on obesity and the results indicated favourable changes in lipid level. Hence it was hypothesized,

"Naturopathy would significantly enhance bio-psycho-social well-being" (Figure 3.02).

[Hypothesis 6]
Blanchard et al. (1986) and Jane and Logan (1991) reported positive influence of relaxation intervention in promotion of bio-psycho-social well-being. Keeping this in view, it was hypothesized:

"Deep muscle relaxation training would be significantly effective in promoting bio-psycho-social well-being".

[Hypothesis 7]

These hypotheses were tested following the methodology described in the next chapter.