

Marital Adjustment and Anxiety Among Working and Non-Working Married Women in Bangalore

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ABSTRACT

Coleman and Miller (1975) reiterate that a good marriage makes a person feel adequate, desired, approved and complete to a degree which is not possible in any other form of human relationship. Marital adjustment as 'the state in which there is an overall feeling in husband and wife of happiness and satisfaction with their marriage and with each other. All the marriages are aimed at happiness in one or another way. Anxiety may be defined as an emotional state in which physiological and psychological indications like rapid tremor in the limbs, sweating of hands, flushing of the face and neck, heart palpitations, blood pressure, inability to sit still, pacing the room, chain smoking, tenseness, restlessness etc. are clearly visible. This study was conducted to assess the relationship between marital adjustment and anxiety level among working and non-working women. Sample consists of 150 working married women and 150 non-working married women were randomly selected from the area of Bangalore city with age range from 25 to 35 years and graduate qualification. The tool used for the study was Marital Adjustment Questionnaire by Dr. Pramod Kumar and Dr. (Km) Kanchan Rohatgi (1982). The present questionnaire has 25 items. There are two categories of responses 'Yes' or 'No' for each item. The major findings of the study included There is highly significant correlation between the two measures. The table suggests the correlation of Marital Adjustment and anxiety is $r=-.50$, (** $p<0.01$). It indicates that if anxiety is high in married women, then their married life will be suffered and vice-versa. There is non-significant difference between working and non-working married women and their marital adjustment ($t=1.168$, $df=298$, $p=NS$). This finding do not support our hypotheses that working married women and non-working married women differ from each other on marital adjustment. There is significant difference between working and non-working married women ($t=2.15$, $df=298$, $p<0.05$). The results indicate that non-working married women feel more anxiety in their married life as compared to working married women.

Keywords: *Marital Adjustment, working and non-working women, Anxiety*

Marriage is a commitment with love and responsibility for peace, happiness and development of strong family relationships Marriage is one of the greatest things in human life. Marriage allows a man and a woman to come together, sharing everything, and support each other throughout life. Marriage provides permanent stability, as

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the two people form, not only an economic unit, but a social force against the harsh realities of the world. A great marriage is not when the perfect couple comes together but it is when an imperfect couple learns to enjoy their differences (Dave Maurer). Some definitions by different psychologists are Coleman and Miller (1975) reiterate that a good marriage makes a person feel adequate, desired, approved and complete to a degree which is not possible in any other form of human relationship. Mazumdar (1996) defines marriage, "As a socially sanctioned union of male and female or as a secondary institution devised by society to sanction the union and mating of male and female for the purposes of establishing a household entering into relations, procreating and providing care for the offspring.

The Role of women in the society is constantly questioned and for centuries women have struggled to find their place in a world that is predominantly male oriented. Literature provides a porthole into the lives, thoughts and actions of women during certain periods of time in a fictitious form, yet often truthful in many ways. Woman has a great part to play in the progress of our country, as the mental and physical contact of women with life is much more lasting and comprehensive than that of men (**Bernard,1971**).

A Non-working women/ housewife's main duties are managing the family, caring for and educating her children, cooking and storing food, buying goods, cleaning and maintaining the home, sewing clothes for the family, etc. It is ironical that a woman employed within the home is referred to as a housewife, and outside the home, as a working woman. In both situations, the woman is working but how the woman is referred to, is based on the working place. The duty of the housewife is to take care of the day-to-day chores within the home. A woman who earns salary, wages, or other income through employment, outside the home, is termed as a working woman. With globalization and improvement in education, the literacy rate among women is increasing; this has resulted in more women taking up employment. In India, with women increasingly taking on jobs, the concept of the man being 'head of the family' is now changing. Working within and outside the home are the two phases of a woman's life. Balancing work and family life has become a major issue for women. Dealing with family issues as well as work issues has resulted in women dealing with an increasing amount of stress and anxiety. This research study attempts to understand the stress and anxiety among women as a result of dealing with this dual role.

Marital adjustment is very important for working women as women status and reality in the authoritarian patriarchal society in India may further exacerbate life stressor, anxiety or depression (Mukhopadhyay & Dewani, 1976). Women who step out of socially described roles often experience stress, tension, hostility due to their multiple roles. In that case, where they get spouse support becomes very relaxing and help them to cope up with that job stress. In this case, coping strategy plays very crucial role. Career and family responsibilities often leaves little time for women to spend quality time either with family or spare sometime for oneself. The responsibilities of working women far exceed than those of non-working women as working women has to make a balance between her domestic functions and professional commitments also. Research studies of household tasks have found that married women continue to be responsible for the great majority of tasks regardless of their employment status. Thus, married employed women need both general social support and support for their work role. Working women when performing multiple roles have to make different kinds of adjustments i.e., house, social, marital adjustment etc.

Anxiety occupies a focal position in the dynamics of human behavior it is a common reaction to frustration. Since anxiety is highly distressing, indeed one of the most intolerable psychic

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states with which the human organism has to deal, it demands some sort of adjustment which will afford relief. A large part of human adjustment is concerned with avoiding or relieving anxiety.

Growing out of many frustrating situations, anxiety serves as the driving force for a large number of subsequent adjustments.

In behavioral terms Sarason (1980) defined anxiety as a conditioned response to a perceived threatening stimulus which could be learned or inherited. Benjamin (1987) noted that anxiety can interface with attention, learning and testing. The idea that anxiety may interface with a student's ability to demonstrate what they have learned is not new. Anxiety can also interface with learning in that anxious students are more easily distracted by irrelevant or incidental aspects of the task at hand, having trouble in focusing on significant details.

Anxiety may be defined as mental distress with respect to some anticipated frustration. In this sense, it is to be distinguished from the immediate response to frustration itself, which is reacted to with aggression, or the danger which is reacted to with fear. Whatever the frustration is, it is recognized as dangerous because it will result in either pain or loss. The essence of human learning is that the individual shall acquire the capacity for recognizing by certain signs or cause, situations which promise to satisfy his need or cause him harm so that he can anticipate them on some future occasion and thereby make ready to accept and use those that satisfy and avoid those which promise to frustrate.

Previous research on the relationship between wife employment and marital adjustment has produced conflicting results: some investigators report a positive relationship between wife employment and marital adjustment others suggest the negative relationship. A working woman has to perform two roles. Firstly, a mother and housewife, and secondly of an employee both the roles demand on her time and energy. Her employment not only affects her entire personality but also her family relationship and is also liable to face crisis of adjustment which can result in depression. B. Sandhya Rani and M. Sarada Devi (2008) studied role stress of working and non-working women, majority of working and non-working women expressed stress regarding participation in social functions and religious activities.

MARITAL ADJUSTMENT

One of the most important relationships between a man and women is marriage. It involves emotional and legal commitment that is quite important in any adult life. Moreover, selecting a partner and entering into a marital contract is considered both maturational milestone and personal achievement, there is no doubt that the choice of marital partner is one of the most important decisions one makes in his/her lifetime. People marry for many reasons, like; love, happiness, companionship, and the desire to have children, physical attraction, or desire to escape from an unhappy situation. Marriage is a commitment with love and responsibility for peace, happiness and development of strong family relationships. Marriage as "socially legitimate sexual union, begun with a public announcement and undertaken with some ideas of permanence; it is assumed with more a less explicit marriage contract, which spells out the reciprocal rights and obligations between the spouses and future children.

Marital adjustment as 'the state in which there is an overall feeling in husband and wife of happiness and satisfaction with their marriage and with each other. All the marriages are aimed at happiness in one or another way. Most couples many filled up with expectations.

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Some of the expectations will be realistic while others unrealistic, this is due to the complex nature of marriage and each individual is as complex as a universe. Therefore, in marriage two universes close together. Marital adjustment calls for maturity that accepts and understands growth and development in the spouse. If this growth is not experienced and realized fully, death in marital relationship is inevitable. A relationship between couples is not instantaneous rather a slow progress. "It is like the undetected cancer that kills silently and softly". A study on 581 couples and 25% of them disclosed that at some time in the adjustment process, they discussed discovering and 18% had seriously considered it.

There is a list of six areas of marital adjustment, which is defined by the psychologist, such as, religion, social life, mutual friends, in laws, money and sex. Another psychologist defines ten areas of marital adjustment, i.e., values, couple growth, communication, conflict resolution, affection, roles, cooperation, sex, money and parenthood. A study on marriage and marital adjustment in USA presents social activities and recreation, training and disciplining of children, religion, in law relationship, financial matters, sexual relationship, communication, mutual trust and companionship as the areas of marital adjustment.

Comprehensive study of husbands and wives investigated some of the factors that contributed to marital satisfaction. Some of their findings revealed existing social, cultural, educational level the greater satisfaction. Occupation and income, which are often thought to be associated with levels of satisfaction, have no relationship with it. The number of children too affects marital satisfaction. There is evidence that the pressures of managing multiple roles in women are the greatest, and the psychological benefits of employment are the least, under conditions of heavy family responsibilities that is, when young children are at home. But beyond specific factors such as these, what is important to marital satisfaction over the course of marriage is the ability of partner to adjust to a variety of changes and to cope with a number of stresses. Marital role can be defined as set of attitudes and behaviors a spouse is expected to demonstrate in the content of the marriage relationship. A marital role comprises cultural expectations associated with the husband or with a wife. A husband is expected to provide used is considered as head of family while wife is expected to make home and companion, or the wife may be expected to be the strong one, upon whom the husband can rely.

Perhaps half of the adults suffering from severe stress blame the deteriorating relationships on their spouse. Looking at the growing rate of divorces, court cases for alimony, physical abuses and single parents; it does seem as if handling a relationship can be a tricky and often taxing issue. The possible causes can be endless. More often than not, stress arising from marital relationships is manifested in chronic disorders such as depression, insomnia and hypertension. Since a relationship depends on the nature of the persons involved, it helps to seek the middle path when the inherent individual differences surface. It often helps to change one's attitude, go for counseling or talk openly with your spouse about problems facing your relationship.

MARITAL ADJUSTMENT AMONG WORKING AND NON-WORKING WOMEN

Marriage adjustment seems complex than it may appear. Basically, in marriage, two persons adjust to each other's sensory, motor, emotional and intellectual capacities. On the personality level they must adjust together to their total environment, including such matters as a new household, children, provision and preparation of food, relatives, friends, relations and work (Fonseca, 1966). The success of marriage life much depends upon the success in marriage adjustment by the husband and wife. Marriage maladjustment results in conflicts and tensions

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and many a time divorce. Several studies have studied marriage adjustment in working and non-working women. For example, Nathawat and Mathur (1993) found that working women reported significantly better marital adjustment and subjective wellbeing than housewives; they also scored higher than housewives in general health, life satisfaction and self-esteem measures. Lloyd (1980) found that socioeconomic status is a contributing factor to marriage adjustment, and believed that higher income to be a significant factor. Similar findings have been supported by Adegoke (1987) and Rogers and May (2003) who reported that working class women are generally more satisfied with their lives than non-working women. However, the difference between these findings could be attributed to cultural differences. However, certain studies have reported contradictory findings. Kausar (2003) studied the effect of personality traits and socio-economic status on marriage adjustment in working women and found no difference between marriage adjustment of working women of low, middle and high socio-economic background and attributed that personality trait could be the factor liable for the marriage adjustment in working and non-working female rather being the socio-economic factor. Similar non-significant marriage differences in working and non-working women of Port Harcourt metropolis was reported by Nigeria-Tamunoimama Jamabo and Ordu (2012).

Researches demonstrated that Non-working married women are better marital adjusted than working married women this implies that working women cannot pay full attention to their family and are unable to satisfy their members. Whereas the non-working married women have more time to their household task and their married life goes smooth. According to the researches working married women cannot properly adjust with their married life because they have many roles to play at a time to find out the level of mental health of working and nonworking women.

Anxiety

Anxiety may be defined as an emotional state in which physiological and psychological indications like rapid tremor in the limbs, sweating of hands, flushing of the face and neck, heart palpitations, blood pressure, inability to sit still, pacing the room, chain smoking, tenseness, restlessness etc. are clearly visible. It has been studied as a motivational variable which interferes with academic achievement. Anxiety as a normal phenomenon does not act as an energizer or drive to outperform activities and achieve our goals. A moderate amount of anxiety may prove beneficial and thereby improve one's performance but as a pathological phenomenon, it impairs the capacity to think and act freely, and harm our state of mind.

Hull (1943) and Spence (1956) suggested that anxious persons are emotionally responsive and hence a well-learned response is not likely to be made- given the appropriate stimulus conditions- if the individual is anxious. High anxiety or emotional responsiveness would only add the confusion and difficulty of such tasks.

Spielberger (1966) viewed that anxiety is a palpable but transitory emotional state or condition characterized by feelings of tension and apprehension and heightened automatic nervous activity. According to Spielberger's (1966) STAT, anxiety is being studied as a personality trait (trait anxiety) and also as a transitory emotional state (state anxiety) and due to lack of distinction between the two, conceptual confusion with respect of anxiety has arisen.

Anxiety is distinguished from fear, which is an appropriate cognitive and emotional response to a perceived threat and is related to the specific behaviours of fight-or-flight responses,

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defensive behaviour or escape. It occurs in situations only perceived as uncontrollable or unavoidable, but not realistically so. Barlow (2001) defined anxiety as "a future-oriented mood state in which one is ready or prepared to attempt to cope with upcoming negative events," and that it is a distinction between future and present dangers which divides anxiety and fear. In positive psychology, anxiety is described as the mental state that results from a difficult challenge for which the subject has insufficient coping skills.

In the fast pace modern era of rapid industrialisation, urbanisation and commercialisation where daily routine is being scheduled with excess workload, and is too hectic to be carried on, anxiety and other problems like stress are increasing. These have become characteristics of modern-day life hampering our lifestyle and making certain phenomenon changes. Anxiety can be correlated with gender, age, socio-economic background and socio-economic status, educational background, life satisfaction, etc. Anxiety is one of the most common psychological disorders in school aged children and adolescents worldwide (Costello et al., 2003). The prevalence rate ranges from 4.0% to 25% with an average rate of 8.0% (Bernsteen & Borchardt, 1991; Bodd et al., 2000).

Anxiety is considered to be a universal phenomenon existing across culture, although its contexts and manifestations are influenced by cultural beliefs and practices (Kleinman, 1985; Guarnaccia, 1997). Despite the clinical focus on depression, youth anxiety disorders also are important because they are precursors to later development of depression (Chavira et al., 2004).

Anxiety is the displeasing feeling of fear and concern (Davison, 2008). Anxiety may be defined as a feeling tone of anticipation, generally unpleasant. Physiologically, it is manifested in the "fight or flight" mechanism which is triggered by a release of a comparatively large amount of adrenalin into the bloodstream. Anxiety often leads to a feeling of fatigue. In the psychological sphere, there is often an increased self-awareness felt as self-consciousness, or as heightened awareness of one's body. Insomnia is frequent. Perception of surroundings is likewise heightened and may be distorted.

Anxiety is considered to be a normal reaction to a stressor. It may help an individual to deal with a demanding situation by prompting them to cope with it. However, when anxiety becomes overwhelming, it may fall under the classification of anxiety disorder. Generally, it helps in improving the performance of an individual. It means anxiety should not cross its threshold value; otherwise, it will reach its abnormal level (National Institute of Mental Health, 2008).

Anxiety can be experienced with long, drawn out daily symptoms that reduce quality of life, known as chronic (or generalized) anxiety, or it can be experienced in short spurts with sporadic, stressful panic attacks, known as acute anxiety. Symptoms of anxiety can range in number, intensity, and frequency, depending on the person. While almost everyone has experienced anxiety at some point in their lives, most do not develop long-term problems with anxiety. Anxiety is particularly a human phenomenon and is considered to be a unique contribution of the 21st century to the mankind. The twenty first century is also known as "the age of anxiety". Fear or anxiety has evolved over countless generations as an adaptive mechanism for coping with dangerous or threatening situation and both terms have been used synonymously. However, there is a distinction between fear and anxiety. The former is episodic whereas the latter is chronic (Jitender & Mona, 2015).

Types, Risk factors, Causes and Effects of Anxiety

Anxiety is of mainly two types- State and Trait anxiety. State Anxiety

According to Spielberger et al. (1970), state anxiety reflects a "transitory emotional state or condition of the human organism that is characterized by subjective, consciously perceived feelings of tension and apprehension, and heightened autonomic nervous system activity." It is the anxiety state we experience when something causes us to feel appropriately and temporarily anxious and this anxiety then retreats until we feel 'normal' again. After the 'threat' has subsided, the anxiety state retreats and the person feels 'normal' again. This is how most people feel most of the time.

State anxiety is characterised by a state of heightened emotions that develop in response to a fear or danger of a particular situation. It can contribute to a degree of physical and mental paralysis, preventing performance of a task or where performance is severely affected, such as forgetting movements during a dance or gymnastic routine; to breaking in sprint or swim starts or missing relatively easy shots at goal i.e., pressure situations (NSW HSC Online, 2015).

Trait Anxiety

Trait anxiety refers to a general level of depression that is characteristic of an individual, that is, a trait related to personality. Trait anxiety varies according to how individuals have conditioned themselves to respond to and manage the stress. What may cause anxiety and stress in one person may not generate any emotion in another. People with high levels of trait anxiety are often quite easily stressed and anxious. According to Spielberger et al. (1970), "Trait anxiety denotes relatively stable individual differences in anxiety proneness and refers to a general tendency to respond with anxiety to perceived threats in the environment." It is the 'pre-set' level of anxiety experienced by an individual who has a tendency to be more anxious; to react less appropriately to anxiety provoking stimuli (NSW HSC Online, 2015).

Risk Factors for Anxiety

Very little is known about antecedent risk factors for anxiety disorders in girls and women. Seminal findings from a female twin registry suggest that genetic factors are an important hazard for anxiety disorders in women. Generalized anxiety disorder (GAD) is of interest because of findings that it shares a common genetic pathway with major depression in women (Kendler, 1996). Familial environment also may contribute to increased risk, especially for GAD (Hettema, Neale & Kendler, 2001). An emerging literature offers compelling evidence that early life adversity, such as childhood sexual or physical abuse, predisposes to the development of anxiety disorders later in life (Safren et al., 2002). Women who were sexually abused as children appear to be at increased risk of adult-onset Post Traumatic Stress Disorder (Nisith, Mechanic & Resick, 2000). Childhood physical and sexual abuse in patients with anxiety disorders and in a community sample. Similarly, when assessed as adults, adolescent girls who had formerly been exposed to stress exhibit a greater risk for symptoms of GAD than adolescent boys (Pine et al., 2002).

Other Risk factors of anxiety that may increase the risk of developing an anxiety disorder (Mayo Clinic):

- a. **Being females:** Females are more likely to be diagnosed with an anxiety disorder as compared with their male counterparts because they are exposed to more anxiety provoking situations both in personal and professional life such as handling family members and maintaining day- to- day schedules, being at office on time and working

till evening is really tiring job, and still she has to prepare meal at night and do the rest of the household work, and so on.

- b. Trauma:** Children who endured abuse or trauma or witnessed traumatic events are at higher risk of developing an anxiety disorder at some point in life. Adults who experience a traumatic event also can develop anxiety disorders.
- c. Stress due to an illness:** Having a health condition or serious illness can cause significant worry about issues such as treatment and future.
- d. Stress build up:** A big event or a build-up of smaller stressful life situations may trigger excessive anxiety - for example, a death in the family or ongoing worry about finances.
- e. Personality:** People with certain personality types for an example; neurotics and psychotics are more prone to anxiety disorders than others.
- f. Having blood relatives with an anxiety disorder:** Anxiety disorders can run in families.
- g. Drugs or alcohol:** Drug or alcohol use or abuse or withdrawal can cause or worsen anxiety.
- h. Other mental health disorders:** People with other mental health disorders, such as depression, often experience anxiety disorder as well.

Causes of Anxiety

Anxiety arises from faulty adaptations to the daily stress and strains of our life. Some of the main causes of anxiety may be due to following:

1. Physical Condition/Physical Triggers

a. Autonomic Nervous System of humans: The Autonomic Nervous System (ANS) of humans is hard wired to respond to dangers or threats. These responses are not subject to conscious control and are the same in humans as in lower animals. They represent an evolutionary adaptation to animal predators and other dangers that all animals including primitive humans had to cope with. The most familiar reaction of this type is the fight or flight reaction to a life-threatening situation when people have fight or flight reactions, the level of depression hormones in their blood rises. They become more alert and attentive, their eyes dilate, their heartbeats increase, their breathing rates increases, and their digestion slows down, making more energy available to the muscles. This emergency reaction is regulated by a part of the nervous system called the autonomic nervous system or ANS. The ANS is controlled by the hypothalamus, a specialized part of the brainstem that is among a group of structures called the limbic system. The limbic system controls human emotions through its connections to glands and muscles. It also connects to the ANS and higher brain centres, such as parts of the cerebral cortex. One problem with this arrangement is that the limbic system cannot tell the difference between a real physical threat and an anxiety-producing thought or idea. The hypothalamus may trigger the release of stress-hormones from the pituitary gland even when there is no external danger (Spielberger, 1972).

b. Biochemical basis of anxiety: A second problem is caused by the biochemical side-effects of too many false alarms in the ANS. When a person responds to a real danger, his/her body relieves itself of the stress hormones by facing up to the danger or fleeing from it. In modern life, however, people often have fight or flight reactions in situations where they cannot run away and lash out physically (Schwarzar, 1997). As a result, their bodies have to absorb all the biochemical charges of hyper arousal rather than release them. These biochemical changes can produce anxious feelings as well as muscle tension and other physical symptoms associated with anxiety.

c. **Social and environmental stressors:** Since humans are social creatures, anxiety often has a social dimension to act over it. People frequently report feelings of high anxiety when they anticipate fear of the loss of social approval or love. Social phobia is a specific anxiety disorder that is marked by high levels of anxiety or fear of embarrassment in social situations (Sheikh & Bhusan, 2002). Another social stressor is prejudice for people who belong to groups that are targets of bias have a higher risk of developing anxiety disorders. Some experts think, e.g., that the higher rates of phobias and panic disorder among women reflects their greater social and economic vulnerability. Several controversial studies indicate that the increase in violent or upsetting pictures and stories in news reports and entertainment may raise people's anxiety levels. Environmental or occupational factors can also cause anxiety people who must live or work around sudden or loud noises, bright or flashing lights, chemical vapours, or similar nuisances that they cannot avoid or control may develop heightened anxiety levels.

d. **Personality:** Many hypotheses show that life experiences alone does not determine whether a person will or will not develop anxiety (Taylor, 1953). The researchers believe personality may play a major role in how well a person deals with whatever life throws their way. This is based on the idea that people who have low self-esteem and poor coping skills seems to be more prone to developing anxiety than do people with higher self-esteem and good coping skills. People who have low self-esteem or poor coping skills tend to look at the situation as more of a challenge, which results in greater amount of self-inflicted stress. These stressors if left unchecked results in the development of anxiety. Still, other scientists believe and look to faulty brain chemistry as the underlying cause of anxiety. This is probably the most widely accepted theory of why people develop anxiety, but it is also one of the theories which are highly debated. This theory has become widely accepted since the symptoms of anxiety can be treated with medications. People suffering from anxiety and depression are thought to have altered levels of neurotransmitters. The two chief chemicals involved are Nor-adrenaline and Serotonin when given medications; the levels of neurotransmitters are regulated, therefore, relieving the symptoms of anxiety. The debate over the brain chemistry theory centres on the issue of whether the person would have improved even without the medications. Each of these theories, heredity, life experiences, brain chemistry and personality, are plausible causes of anxiety.

2. Drugs/Medication

Numerous medications may cause anxiety like symptoms as a side effect. They include:

- a. Thyroid and asthma control
- b. Some psychotropic agents
- c. Corticosteroids
- d. Anti-hypertensive drugs
- e. NSAIDS (such as Flurbiprofen)
- f. Local anaesthetics
- g. Caffeine can also cause anxiety-like symptoms when consumed in excess amount.
- h. Withdrawal from certain prescription drugs primarily 3-blockers and corticosteroids i. Withdrawal from drugs of abuse, including LSD > Cocaine > Alcohol > Opiates

3. Psychological Conditions

a. **Childhood Development and Anxiety:** Researchers in early childhood development regard anxiety in adult life as a residue of childhood memories of dependency. Humans learn during the first year of life that they are not self-sufficient and that their basic survival depends on others. It is thought that this early experience of helplessness underlies the most common

anxieties of adult life, including fear of powerlessness and fear of not being loved. Thus, adults can be made anxious by symbolic threats to their sense of competence or significant relationships, even though they are no longer helpless children.

4. Other Causes of Anxiety

The causes of anxiety are wide-ranging and sometimes it seems to just come out of the blue, in these cases talking to a therapist who is more familiar with some of the common triggers of anxiety in men can help you find the root cause. Some of the common causes of anxiety are:

- Ongoing stress (e.g. pressure at work or from family life)
- Stress from a particular situation (e.g. job loss, moving house)
- Suffering abuse as a child (physical, psychological or sexual)
- Experiencing or witnessing a traumatic event
- Drug use (NB men more than women use drugs or alcohol to try and manage their anxiety, but these can actually contribute to anxiety in the long run).

Effects of Anxiety

The behavioural effects of anxiety may include withdrawal from situations which have provoked anxiety in the past. Anxiety can also be experienced in ways which include changes in sleeping patterns, nervous habits, and increased motor tension like foot tapping (Barker, 2003).

The emotional effects of anxiety may include "feelings of apprehension or dread, trouble concentrating, feeling tense or jumpy, anticipating the worst, irritability, restlessness, watching (and waiting) for signs (and occurrences) of danger, and, feeling like your mind's gone blank as well as "nightmares/bad dreams, obsessions about sensations, "deja vu", a trapped in your mind feeling, and feeling like everything is scary" (Smith, 2008).

The cognitive effects of anxiety may include thoughts about suspected dangers, such as fear of dying. "You may fear that the chest pains are a deadly heart attack or that the shooting pains in your head are the result of a tumour or aneurysm. You feel an intense fear when you think of dying, or you may think of it more often than normal, or can't get it out of your mind." (NSW HSC Online, 1987–2008).

Appraisal of Threat-Anxiety (State)

Threat appraisals are influenced by the objective characteristics of a situation and objectively dangerous stressors are realistically appraised as threatening by most people. But the thoughts and memories stimulated by a particular event, along with an individual's coping skills and previous experience with similar circumstances, may often have an even greater impact. Consequently, the same stimulus may be seen as a threat by one person, a challenge by another and as largely irrelevant by a third. The experience of threat is essentially a state of mind which has two main characteristics: it is future oriented, generally involving the anticipation of a potentially harmful event that has not yet happened; it is mediated by complex mental processes, that is, perception, thought, memory, and judgment which are involved in the appraisal process. Threat appraisals of present or future danger serve an important function in producing emotional reactions that mobilize an individual to take action to avoid harm. But even when there is no objective danger, the perception or appraisal of situation as threatening transmits the essential message of stress which results in arousal of an anxiety state (Spielberger, 1989).

REVIEW OF LITERATURE

Maqsood & Akhtar (2019) conducted a study on the effect of anxiety among working and non-working married women. Study concluded that working women have more anxiety as compared to nonworking women and helps that the non-working married women can perform better married life and they are free from stress and anxiety as compared to working married women.

Hashim (2012) 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.

Patil (2016) studied on the stress and anxiety among the working and non-working women. It was hypothesized that the working women's has more stress than the non-working women's. In order to verify the above hypothesis a sample of 90 women were taken. From which working women's (N= 45) and non-working women's (N= 45). To measure the anxiety, STAI was administrated individually to the subjects. The data were subjected to 't' analysis and the major findings of the study reveals that the working women's has more stresses and anxiety than the non-working women's.

Garimaand Sinha (2014) Conducted studied on "Marital Adjustment and Psychological Well-Being Differences in Working and Non-Working Female"; the present study intends to examine marital adjustment and psychological well-being among working and non-working women. The study was carried out on a purposive sample of 40 participants. Marital adjustment inventory and Ruff 's Medium Form of Psychological Well-Being Scale was administered on 40 working and non-working female participants. Results revealed that working and non-working women did not differ from each other on marital adjustment as well as on psychological wellbeing but on few dimensions of psychological wellbeing.

A recent study by Jamabo and Ordu, (2012) shows that both working and non-working class women exhibit no clear difference in their marital adjustment. The educational attainment of women does not affect their marital adjustment. Women who are of low income status exhibit the same degree of marital adjustment as those of higher economic status. There is no specific reason to explain the difference in their marital adjustment.

Dadhaniya (2011) conducted research on "A Behavior study of self-control and social adjustment among working and non-working women" the main aim of the present research is to find out the mean difference between working and non-working in self-control and social adjustment. The total sample consist 60 working and non-working women were taken. The research tool for self-control was measured by Arunkumar Singh and AlpanaSengupta Social Adjustment Scale was developed by Bell (1905) and Gujarati translated by Dr. D J Bhatt, (2010) was used. Here t-test was applied to check the significant of in social Adjustment and self-control between working and non-working women. To check the relation between social adjustment and self-control among co-relation methods are used. The study revealed that there was significant difference between working and non-working women in social adjustment and self-control. While the co-relation between self-control and social adjustment reveals 0.42 that is positive co-relation.

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Beck *et al.* (2016) conducted a study on the mental health and anxiety among working and non-working mothers and found that working mothers had better mental health and reported less anxiety than the non-working mothers. The most frequently 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.

Hoffman (2015) has concluded that the working woman who obtains satisfaction from her work, who has adequate arrangements so that her dual role does not involve undue strain and who does not feel so guilty that she over-compensates is likely to do quite well and under certain conditions better than non-working mother.

Macewen, K.E *et al.* (2010) studied the Inter role conflict, family support and marital adjustment of employed mothers. A sample of 51 employed mothers working full-time outside home and having at least one child in day-care were selected for the study. Interrole conflict was assessed using Parry and Warr's (1980) 12-item Interaction Strain Questionnaire, Marital adjustment was measured using Locke and Wallace's (1959) 15-item Short Marital Adjustment Test and Family support was assessed with Procidano and Heller's (2009) 20-item Perceived Social Support Family scale. The results revealed that there was a significant interaction between inter role conflict and family support in the longitudinal analysis, such that mother's high in family support and inter role conflict experienced a significantly more negative change in marital adjustment than mothers low in family support and high in inter role conflict. The results also inferred that employed mothers experiencing inter role conflict may not benefit from emotional support which does not resolve conflicts that are a source of distress. Instrumental, rather than emotional support reduces the impact of inter role conflict because it addresses employed mothers' time- and behavior-based conflicts by performing activities such as helping with household tasks and sharing child-care duties.

Depression is the leading cause of disability for both males and females, the burden of depression is 50% higher for females than males. In fact, depression is the leading cause of disease burden for women in both high-income and low- and middle-income countries.

Nathawat & Mathur (2015) 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 (2015) 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.

Hashim *et al.* (2010) 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.

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Akbari (2012) investigated the existence of anxiety as well as life satisfaction among working and nonworking mothers. In result, significant difference was observed in physical and family anxiety among the resonance. But the role stress was found to be significantly higher among working mothers than nonworking mothers as well as life satisfaction was better among working mothers than non-working mothers.

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 nonworking mothers lack of social life was a major stressor.

Study done among working and non-working women in Rajkot conducted by Revati et al (2012) showed the risk factors for depression were concerned in this study, both the groups experienced the same risk factors but the working women had the important risk factor which is work place stress which leads to depression among working women which was statistically significant.

Dr. M K Khande and Giakwad U S (2009) conducted research on "Adjustment Problem of working and non-working women" the present study has been conducted to examine the adjustment problem of working and non-working women form Aurangabad city. The sample 100 working and non-working women was selected for the study. Bell's adjustment inventory was used in order to find out adjustment in the areas of such a home, social, health, emotional and occupational adjustment. The study revealed that working women were adjusted well especially in social, emotional, health point of view, than the non-working women. The nonworking women are well adjusted at home than working women, in working women college teachers were better adjusted than occupational.

Tank Sarita (2011) conducted research on "A Study of marital adjustment and stress among working and non-working women" the main purpose of the study was to find out the marital adjustment and stress among working and non-working women. The total sample consist 60 working and non-working women were taken from the Rajkot city. Marital Adjustment Inventory developed by Dr. Pramod Kumar and Kanchan Rohatgi (2009) another research tool for stress was measured by Thakur and Mishra. Here t-test was applied to check the significant of in marital Adjustment and stress between working and non-working women. There was significant difference between working and non-working women in marital adjustment and there was no significant difference between working and non-working women in stress.

Hashmi et al. (2007) aimed at exploring the relationship between Marital Adjustment, Stress and Depression among Working and Non-Working Married Women. A sample consisted of 150 working (75) and non-working (75) married women from Multan, Islamabad and Bawalpur who were doctors, lectures and bankers. Convenient random sampling was used for this study. Urdu Translation of Dyadic Adjustment Scale (2000), Beck Depression Inventory (1996) and Stress Scale (1991) were used for data collection. The results indicated high significant relationship between marital adjustment, depression and stress. The results indicate that non-working married women are better adjusted in their married life than working married women. The findings of the results also show that working married women have to face more problems in their married life as compared to non-working married women. The results further show that highly educated working and non-working married

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women can perform well in their married life and they are free from depression as compared to educated working and non-working married women.

Indian society, being sociocentric, lays importance on interpersonal relationships. It is therefore unsurprising that marital conflict is the commonest cause of suicide among women (Ministry of Home Affairs, 2010). And Banerjee G, Nandi DN, Nandi S, Sarkar S, Boral GC, Ghosh A (1990) also support the findings.

Significance of the Study

Women and marital relationship have been the popular topic for the researchers and scientists for many years. There have been many studies done on marital adjustment, social support, depression and suicidal ideation. there are many factors which contribute to marital adjustment like occupation and income which are often thought to be associated with levels of satisfaction, the number of children, the pressure of managing multiple roles in women, under conditions of heavy family responsibility, the possible causes can be endless.

As the structure of families these days has been changed from joint to nuclear and the increasing responsibilities and burden of giving a good standard of living to the children, changed the one-parent working to both-parents working, adjustment and satisfaction of individuals is facing great challenges and problems. The conflicting relationship and unsatisfying lifestyle and increasing burden of work is giving rise to depression in women, one of the reasons is the patriarchal system supported in India although women today walk hand in hand with men but still, she is supposed to stay at home and do household work. Although they try to manage both job and house work but the stress of managing two roles at the same time increases the risk of developing stress and depression and on some serious cases even it takes the form of suicidal thinking.

Family plays very important role in providing support to women. The support provided to married women enhances the quality of marriage. Although social support is not limited to family only.it is found that when husband supports the wife there is good mutual.

Understanding and better marital adjustment in working women. Whereas some findings state that non-working women have better marital adjustment and strong social support provide by the family and this could be one of the reasons that arranged marriages work well. There may be the misconceptions of the thoughts and cultural difference.so it became important to study the underlying factors.

Women constitute more than half of the world's population, yet their representation in the work force has been significantly low in comparison to men. However, the recent trend suggests an assuring rise in the number of women in working population. Modernization, social change and education among women have enabled some women to enter new professions, new occupations which were totally closed to them earlier. Work life Balances are however more relevant today than ever before and Indian organizations are recognizing this. Women are entering the workforce in a society where "most of the household chores and responsibility of bringing up the children are dumped on them". Career and competitive pressures are making more demands on the employees' time as a result of which attention to family and self is taking a back seat-which is disturbing the mental equilibrium as well as deteriorating person health. Moreover, employee aspirations are growing, both at work and home. The purpose of this study is to examine the marital adjustment among the working women in industries. Marital adjustment has been related to personality, job & home stresses,

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mental illness, depression, education, sex role attitude, happiness and success in life. Working women at present are more prone to stress because they bear the double burden of housework and a job outside the home.

The present study is designed to investigate the issue of marital adjustment and anxiety among working and non-working married women. This study is helpful to find out the problems faced by working and non-working women in marital adjustment and the factors associated which leads to anxiety among women.

METHODOLOGY

Objectives of the study

1. To Compare working and non- working women on level of marital adjustment.
2. To Compare working and non-working women on level of anxiety
3. To study the relationship between marital adjustment and anxiety level among working and non-working women.

Hypothesis

1. Marital adjustment is better among Non-working women.
2. There is a significant difference in working and non-working women in experiencing anxiety.
3. There is significant positive relationship between marital adjustment and anxiety among working and non-working women

CONCEPTUAL DEFINITION OF THE TERMS

- **Marital Adjustment:** Marital adjustment as 'the state in which there is an overall feeling in husband and wife of happiness and satisfaction with their marriage and with each other.
- **Anxiety:** Anxiety means mental state characterized by apprehension, uncertainty and fear. General anxiety as state and trait anxiety is measured. State anxiety as subjective feelings of tension, apprehension, nervousness and worry.

OPERATIONAL DEFINITION OF THE TERMS

- **Marital Adjustment:** Marital adjustment calls for maturity that accepts and understands growth and development in the spouse. For the purpose of the present study, marital adjustment means the total score obtained by women on marital adjustment questionnaire by Dr. Pramod Kumar and Dr. (Km) Kanchana Rohatgi (1982).
- **Anxiety:** Anxiety is described as a personality trait that indicates relatively stable individual differences in anxiety-proneness (Spielberger et al., 1983). For the purpose of the present study, anxiety means the total score obtained by women on state trait anxiety inventory (STAI) developed by (spielberger et al., 1970)
- **Working Women:** A woman who earns salary, wages, or other income through employment, outside the home, is termed as a working woman.
- **Non-Working Women:** A woman who does not earns salary, wages, or other income through employment, outside the home, is termed as a non-working woman.

Sample

Sample consists of 150 working married women and 150 non-working married women were randomly selected from the area of Bangalore city with age range from 25 to 35 years and

graduate qualification.

Variable of the Study

- **Independent variable:** Working and non-working women
- **Dependent Variable:** Marital adjustment, Anxiety

INCLUSION & EXCLUSION

Inclusion

- Only women in the age group 25-35 years was included
- Only women residing in Bangalore area was included
- Those who give consent and willing to participate was included

Exclusion

- Those who are above 35 years was excluded
- Those who do not give consent and willing to participate was excluded.

Tools Used

1. Marital Adjustment Questionnaire by Dr. Pramod Kumar and Dr. (Km) Kanchana Rohatgi (1982). The present questionnaire has 25 items. There are two categories of responses 'Yes' or 'No' for each item.

Reliability

Reliability of the Questionnaire was calculated both by split-half method, correlating odd-even items, applying the Spearman-Brown formula and test-retest reliability was also studied, with an interval of three weeks. The obtained reliability was .70 and .84 respectively.

Validity

The face validity of the questionnaire appeared to be fairly high as the items were prepared following intensive interviews of 100 married couples regarding their concept of happy married life. The content validity was adequately assured as only those items were selected for the initial questionnaire for which there was 100 percent agreement among the judges.

Scoring Method

A 'Yes' response is assigned a score of 1 except for items 4, 10 and 19 in which case reverse is applicable. The sum of these values gives the marital adjustment score for the husband. Since the responses contributing towards marital adjustment are given a score, the higher the total score, the higher would be the marital adjustment of the husband.

2. State Trait Anxiety Inventory (STAI) (SPIELBERGER ET AL., 1970)

Maternal state and trait anxiety was measured using Spielberger State-Trait Anxiety Inventory. State Trait Anxiety Inventory (STAI) Spielberger et al., (1970) is a reliable and valid tool that has been used with both clinical and non-clinical populations. The measure comprises separate self-report scales for assessing state and trait anxiety. The state anxiety scale consists of 20 items that evaluate how a person presently feels (or the current feelings of tension, anxiety, and nervousness), while trait anxiety scale evaluates how the subject generally feels with respect to 20 statements. State anxiety is conceptualized as transitory emotional state, whereas trait-anxiety refers to relatively stable individual differences in proneness to anxiety. Adaptation of Spielberger State-Trait Anxiety Inventory by Mohandas and Kumar (1994), Mahatma Gandhi University was used in this study. This inventory also contains 20 state and 20 trait questions and was filled on each occasion. Reliability is standardized tool which was tested in the locality by many researchers. Split- half reliability was 0.89 for State anxiety and 0.79 for Trait anxiety. Validity is the correlation coefficient

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obtained for State inventory was 0.84 and for Trait inventory was 0.86. Face validity was also assured by item analysis. Cronbach's alpha, in the previous study was >0.88 for state anxiety and >0.83 for trait anxiety.

Scoring: The range of possible scores of STAI varies from minimum score of twenty to maximum score of 80 in both State and Trait subscales. Clients respond to each STAI item by rating themselves on a four-point scale as described below:

State Anxiety

1. Not at all
2. Somewhat
3. Moderately so
4. Very much so

Trait Anxiety

1. Almost never
2. Sometimes
3. Often
4. Almost always

The total score of 160 is considered as the maximum scores for STAI and in this study STAI score of < 50% was considered as mild anxiety, 50-70% as moderate anxiety and above 70% scores as severe anxiety.

Procedure

To begin with the research, the researcher was contact the 150 working married women and 150 non-working married women were randomly selected from the area of Bangalore city. The nature of the study was explained to them, consent of the women regarding data collection was taken and they will be assured of confidentiality. This study was examining Marital Adjustment among working and Non-working married women and how social support provided to married women helps her in maintaining relationships in her life. What are the factors which contribute to maintain a healthy relationship between husband and wife? And how marital adjustment is affected by depression and suicidal ideation among women. For this purpose, four standardised instruments were taken which were administered on married working and non-working women separately. The four instruments are Marital Adjustment scale and anxiety inventory. On first day two tests marital adjustment scale and anxiety were administered. For Once all the information is collected the tests were taken back from the participants. The test was conducted, score obtained was calculated for each subscale, raw score was converted into percentile score and then interpretations, conclusions and suggestions was made on that basis.

Statistical Analysis

Descriptive statistics was used to calculate data. Mean, SD and t-values and correlation for all the variables were calculated.

RESULTS & DISCUSSION

Keeping in view the objectives of the study and their corresponding hypotheses, the data was statistically processed using appropriate design and technique. Hence, after the data has been collected this must be processed an analysed to draw proper inference.

Thus, the analysis of data means studying the tabulated material in order to determine inherent factors or meanings. It involves breaking down the existing complex factors into simpler parts and putting the parts together in new arrangement for the purpose of interpretation.

Interpretation is the most important step in the total research process. It calls for a critical examination of the results of one's analysis in the light of all limitations of data gathered. Thus analysis and interpretations of data help researchers to attack the related problems with

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appropriate statistical techniques to avoid the unnecessary labour.

For MARITAL ADJUSTMENT AND ANXIETY AMONG WORKING AND NON-WORKING MARRIED WOMEN IN BANGALORE, the data analysis and interpretation was calculated as follows:

HYPOTHESIS TO BE TESTED

Hypothesis 1: Marital adjustment is better among Non-working women.

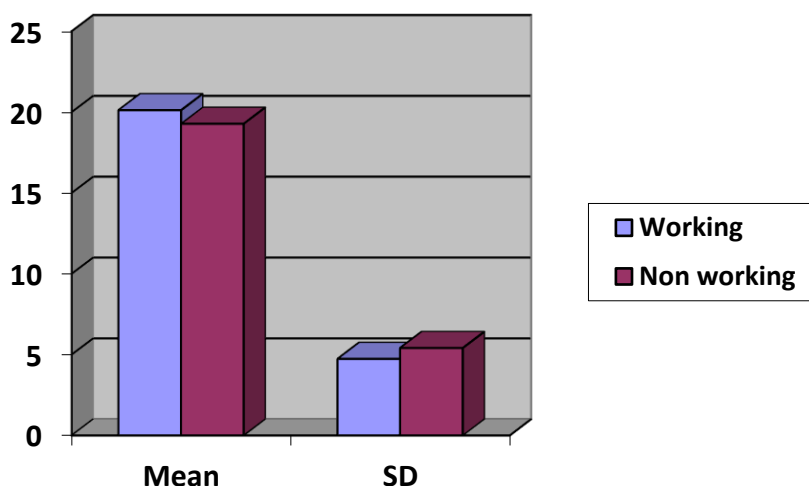
Table 5.1 Means, Standard deviations and t-value of scores of working and non-working married women on marital adjustment (N=300)

| Variable | N | Mean | SD | t | Significance |
|---------------------------|-----|---------|---------|-------|--------------|
| Working married Women | 150 | 20.1200 | 4.73602 | 1.168 | NS |
| Non-working married women | 150 | 19.2800 | 5.41431 | | |

Df=298, NS = Not significant, * sig at 0.05, ** sig at 0.01

The comparison of scores of working and non-working married women on marital adjustment is performed in the table 5.1, which shows that there is non-significant difference between working and non-working married women and their marital adjustment ($t=1.168$, $df=298$, $p=NS$). This finding do not support our hypotheses that working married women and non-working married women differ from each other on marital adjustment. Thus, the hypothesis state that marital adjustment is better among Non-working women is rejected.

Working and non-working women did not find significant difference on the variable of marital adjustment. This can be supported by Hashmi, Khurshid and Hassan (2007 studied 150 married women (working married women=75, non-working married women=75). Results revealed non-significant difference between working and non-working married women and their marital adjustment. Non-working women also have many problems like working married women. Jamabo and Ordu (2012) in their study regarding marital adjustment of working and nonworking women also found that both working class and non-working class women exhibit no clear difference in their marital adjustment. The educational attainment of women does not affect their marital adjustment. Moore et al. (1984) also failed to find significant differences on marital adjustment amongst working and nonworking women.



Graph 4.2: Mean and standard deviation of working and non-working married women on marital adjustment

Hypothesis 2: Working women is experience more anxiety than Non-working women

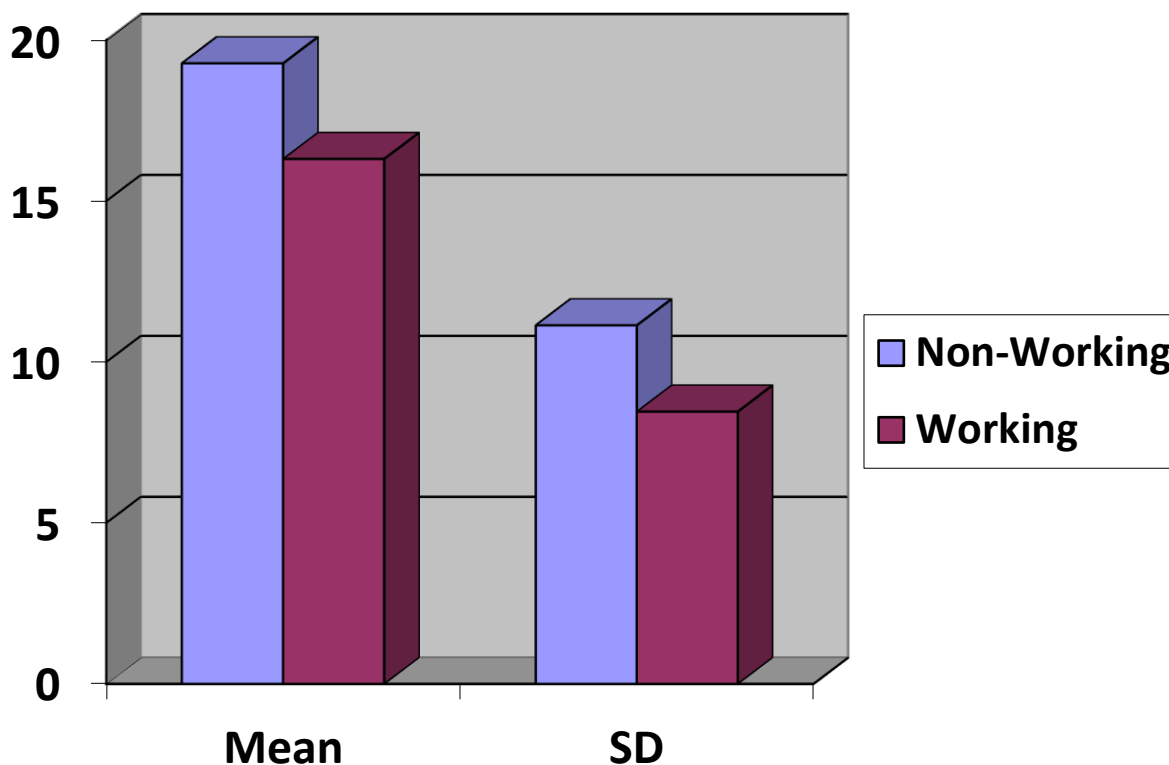
Table 5.2 Means, Standard deviations and t-value of scores of working and non-working married women on anxiety (N=300)

| Variable | N | Mean | SD | t | Significance |
|---------------------------|-----|-------|-------|-------|--------------|
| Non-Working married Women | 150 | 19.28 | 11.14 | 2.15* | *P<0.05 |
| Working married women | 150 | 16.31 | 8.46 | | |

Df=298, NS = Not significant, * sig at 0.05, ** sig at 0.01

The analysis of anxiety scores of subjects (Table-5.2) shows that there is significant difference between working and non-working married women (t=2.15, df=298, p<0.05). The findings does not support our second hypothesis “Working women is experience more anxiety than Non-working women.” Comparison of working women with non-working women found to be significant on anxiety. The results indicate that working married women feel less anxiety in their married life as compared to non-working married women.

Bhadoria, S. (2013) reported significant differences in level of Anxiety and depression with respect to both working and non-working women. Working and non- working women have differed from each other on Apathy, sleep disturbances, pessimism, Fatigability, irritability, self-centered, Sadness, Self-dislike, Self-Acquisition, Self-preoccupation, indecisiveness. Dudhatra & Yogesh (2012) found significant difference in anxiety with respect to both working and non-working women.



Graph 4.3: Mean and standard deviation of working and non-working married women on anxiety

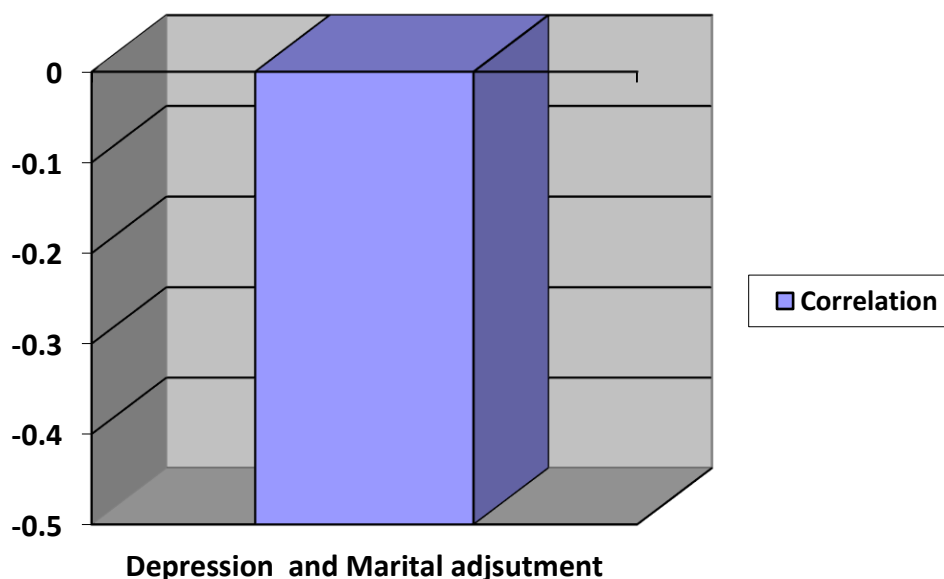
Hypothesis 3: There is significant positive relationship between marital adjustment and anxiety among working and non-working women.

Table 5.3 Correlation Matrix of Scores anxiety and Marital Adjustment.

| Variables | N | Correlation | Significance |
|--------------------|-----|-------------|--------------|
| Anxiety | 300 | -0.50 | **P<0.01 |
| Marital Adjustment | | | |

Df=298, NS = Not significant, * sig at 0.05, ** sig at 0.01

Results presented in the table 5.3 indicate that there is highly significant correlation between the two measures. The table suggests the correlation of Marital Adjustment and anxiety is $r = -.50$, ($**p < 0.01$). It indicates that if anxiety is high in married women then their married life will be suffered and vice-versa. Our hypothesis regarding this relationship is supported, which implies that higher the anxiety lower would be the marital adjustment. The result of the study is consistent with the result of the previous studies conducted by Kim (2012) conducted a study on the relationship between the quality of marital adjustment and depressive symptoms in Korean American couples. Results from linear regression indicated a negative relationship between marital adjustment and depressive symptoms at a significant level for wives and near significant for husbands. The model explained 15% of the variance in wives' depressive symptoms. Laganá, Spellman, Wakefield & Oliver (2011) found that higher depressive symptomatology were associated with worse marital adjustment. Trevino, Wooten and Scott (2007) examined the relationships between the relationships between anxiety and marital adjustment. Correlations for the total group between anxiety and overall marital adjustment and the subscales of marital adjustment were significant.



Graph 5.3: Correlation between Marital adjustment and anxiety of working and non-working married women

DISCUSSION

The aim of the present study is marital adjustment and anxiety among working and non-working married women. Marital adjustment as 'the state in which there is an overall feeling in husband and wife of happiness and satisfaction with their marriage and with each other. All the marriages are aimed at happiness in one or another way. Most couples many filled up

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with expectations. Some of the expectations will be realistic while others unrealistic, this is due to the complex nature of marriage and each individual is as complex as a universe. Therefore, in marriage two universes close together.

The study hypothesized that “working and non-working will affect significantly on marital adjustment of married women” and findings reject the stated hypothesis. Working and non-working women did not find significant difference on the variable of marital adjustment. This can be supported by Hashmi, Khurshid and Hassan (2007) studied 150 married women (working married women=75, non-working married women=75). Results revealed non-significant difference between working and non-working married women and their marital adjustment. Non-working women also have many problems like working married women. There is significant difference in the anxiety of working and non-working married women.” Comparison of working women with non-working women found to be significant on anxiety. The results indicate that working married women feel more anxiety in their married life as compared to non-working married women.

The working women had better mental health and reported less anxiety than the non-working mothers. The most frequently 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. Palstam, Bjersing and Mannerkorpi (2012) conducted a study which shows working women have better health than nonworking women in terms of pain, fatigue, stiffness, depression, disease specific health status and physical aspects of quality of life, which represent body functions and overall health status. However, they were equally impaired in tests of physical capacity. Moderate pain levels were compatible with work, while severe pain appeared to compromise work. Fatigue was better tolerated, as women scoring severe levels of fatigue worked.

Kim (2012) conducted a study on the relationship between the quality of marital adjustment and depressive symptoms in Korean American couples. Results from linear regression indicated a negative relationship between marital adjustment and depressive symptoms at a significant level for wives and near significant for husbands. The model explained 15% of the variance in wives' depressive symptoms. Lagena , Spellman, Wakefield & Oliver (2011) found that higher depressive symptomatology were associated with worse marital adjustment. Trevino, Wooten and Scott (2007) examined the relationships between the relationships between anxiety and marital adjustment. Correlations for the total group between anxiety and overall marital adjustment and the subscales of marital adjustment were significant. Kouros, Papp and Cummings (2008) researched on newlywed couples and investigated longitudinal associations between marital satisfaction and depressive symptoms in a community sample of 296 couples in established relationships with children. Support was found for reciprocal relations between marital satisfaction and depressive symptoms in couples with established relationships.

Major Findings

- There is highly significant correlation between the two measures. The table suggests the correlation of Marital Adjustment and anxiety is $r=-.50$, (** $p<0.01$). It indicates that if anxiety is high in married women then their married life will be suffered and vice-versa.
- There is non-significant difference between working and non-working married women and their marital adjustment ($t=1.168$, $df=298$, $p=NS$). This finding do not

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support our hypotheses that working married women and non-working married women differ from each other on marital adjustment.

- There is significant difference between working and non-working married women ($t=2.15$, $df=298$, $p<0.05$). The results indicate that non-working married women feel more anxiety in their married life as compared to working married women.

CONCLUSION

- Working married women have to face double work pressure and family conflicts, role of spouse also is an important factor. The families and societies should try to understand the mental state of such women and require counselling. Also, they should have a soft corner for them.
- Working women are more frustrated, depressed and have a poor mental health as compared to Non-working married women. There are some factors which influence this like they are more ambitious towards work and have a higher level of aspiration and thus they give more importance to their work rather than family. They like being independent and cannot tolerate any kind of pressure of family. When their career goals are accomplished, after a certain period of life, they start feeling isolated, insecure, feel a lack of social status. At this point of time, if they don't get family support, they feel frustrated and depressed. In the Indian culture, marriage is considered as a social status and gives a social satisfaction and respectable position in the society.
- Durkheim's study of socialization suggests that "Isolation is the main cause of frustration and depression and thus develops poor mental health". It has been found in many researches that due to isolation, suicidal tendencies are developed both in men and women. In the early stage of life, i.e., 25-35 years, due to over ambitiousness, career orientation and higher needs of achievements, they do not give preference to marriage. After these needs are fulfilled, they isolate themselves from the society and family and thus complexes are developed in them. They start feeling that the money that they earn should be spent on whom. Self feeling and individual difference are also seen in them. This way they are unable to entertain their life. Only 2 to 3 percent of them are able to entertain their life that also when family support is provided. Married working women work along with their family responsibilities. They have a feeling of happiness because they have a family, children and husband's support. The money that they earn is spent on their family and a satisfaction is felt by them. They do not have a feeling of isolation, insecurity and have a social status which reduces frustration and depression in them. Though they have a double work pressure, they are able to entertain their life with a social satisfaction. This provides them a good mental health, a feeling of happiness and pleasure and enjoy a good socio-economic status.
- Women are found as the real builders of our nation itself. I cannot think of a single instance where the appointment has not justified itself. Indian women have awakened from their part slumber. They are not slaves of men now. The time has come when women must come of their homes and take their parts in public life. The best roles they can play are working women, good housewife and mother. As a dutiful mother, she can make her children happy, healthy and responsible citizens.
- As a housewife, she is a source of joy, comfort and inspiration to her husband and as working woman she works outside her house in offices, banks, etc. Working unmarried women are free from family responsibilities.
- The seventeenth century has been the age of enlightenment, the eighteenth has been the age of reasons and nineteenth the age of progress and the twentieth the age of

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anxiety. Both an employed and unemployed women play a significant role in household activities and their families. Their life is more family centered than that of men. The happiness of family to a great extent depends upon her.

- The study revealed that the findings of the study indicate that working married women have to face less anxiety as compared to non-working married women. It concludes that on some aspects non-working married women cannot contribute significantly for the well-being of their family and it leads to lower marital adjustment. While measuring relationship among both the variables (marital adjustment and anxiety), it was found that they both are negatively correlated with each other.

Implication

Findings of the study was a great beneficiaries to the following:

(a) Community

Community can be benefited with findings of this research work as it can help them to understand the problems of married women. Findings can also be helpful to develop sensitivity in them and can make them more mature, more sensitive and in having more genuine attitude towards the people. It can promote humor, equality and love in community.

(b) Family

Family can be benefited with the findings of this research work as it can help the members of the family to understand each other's problems. Women spouses can understand them and help them in their work. Women's father in law and other members can solve their problems regarding their work as well as other problems.

(c) Society

Society can be benefitted with the findings of this research work, as it can help the all women regarding their life style, work style and their understanding and maturity level. Findings can also be helpful to develop sensitivity in them and in having more genuine attitude towards the people. It can promote equality and love in society.

a) Counselor

Counselor can also benefitted with the findings of this research work, as the main work of counselor is to counsel the person who is facing any problem like conflict, etc. Counselor can help and guide the women and suggested them to live without tension and how they can support their family.

b) Psychiatric

Psychiatric can also benefited with the results of this research work. They can help the women who cannot balance with their family status. They can suggest the women how they can balance their social and personal requirements. They can suggest them how they can increase the tolerance level.

Implication

Findings of the study was a great beneficiaries to the following:

(d) Community

Community can be benefited with findings of this research work as it can help them to understand the problems of married women. Findings can also be helpful to develop sensitivity in them and can make them more mature, more sensitive and in having more genuine attitude towards the people. It can promote humor, equality and love in community.

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(e) Family

Family can be benefited with the findings of this research work as it can help the members of the family to understand each other's problems. Women spouses can understand them and help them in their work. Women's father in law and other members can solve their problems regarding their work as well as other problems.

(f) Society

Society can be benefitted with the findings of this research work, as it can help the all women regarding their life style, work style and their understanding and maturity level. Findings can also be helpful to develop sensitivity in them and in having more genuine attitude towards the people. It can promote equality and love in society.

c) Counselor

Counselor can also benefitted with the findings of this research work, as the main work of counselor is to counsel the person who is facing any problem like conflict, etc. Counselor can help and guide the women and suggested them to live without tension and how they can support their family.

d) Psychiatric

Psychiatric can also benefited with the results of this research work. They can help the women who cannot balance with their family status. They can suggest the women how they can balance their social and personal requirements. They can suggest them how they can increase the tolerance level.

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