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Research Paper

Happiness and Sleep Quality among Working and Non-Working Women

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ABSTRACT

Happiness refers to a positive emotional state in the present and a hopeful outlook for the future. Sleep is a natural process characterized by decreased responsiveness to external stimuli, altered brain activity in the cerebral cortex, and reduced muscle tone. Both happiness and sleep quality influence well-being, productivity, and overall quality of life in women. The objective of the present study is to compare happiness and sleep quality among working and non-working women. The study was conducted among 200 women selected from the northern districts of Kerala, including Calicut, Malappuram, Kannur, and Wayanad. The sample consisted of 100 working women and 100 non-working women selected using simple random sampling. The inclusion criteria were adult women aged 18 to 50 years residing in the selected districts. The Oxford Happiness Questionnaire was used to measure happiness, and the Sleep Quality Scale was used to assess sleep quality. Data were collected in person and scored as per the tool manuals. The data were analyzed using SPSS software. Descriptive statistics was used to examine normality. Since the data satisfied the assumption of normal distribution, the independent sample t-test was applied to determine group differences in happiness and sleep quality among working and non-working women. The results indicate a significant difference in happiness between the two groups, with working women reporting higher happiness levels. However, there is no significant difference in sleep quality, suggesting that both working and non-working women experience similar sleep patterns. Shared household responsibilities, caregiving demands, and lifestyle pressures may contribute to this similarity in sleep quality. The findings highlight the importance of further in-depth and longitudinal research to explore the underlying factors influencing happiness and sleep among women. The study also underscores the need for strategies to promote psychological well-being and healthy sleep practices among both working and non-working women. The chief conclusion is that working women report higher happiness, while sleep quality does not differ significantly between the two groups.

Keywords: *Happiness, Sleep Quality, Working Women, Non-Working Women, Northern Kerala*

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Women contribute to society in diverse and meaningful ways, whether through paid work or unpaid domestic responsibilities. Working women support their families financially and strengthen the economy, while non-working women provide essential caregiving, emotional support, and family stability. Modern women often balance multiple roles, managing professional careers, household responsibilities, and active civic engagement. As more women join the workforce, they gain economic independence, autonomy, and broader opportunities for public participation—reflecting a significant social shift that recognizes women's contributions beyond traditional domestic roles. In India, the rise in women's employment, particularly in the organized sector, has been driven by increasing educational attainment. Yet, deep-rooted societal norms and gender expectations continue to limit their full participation. Despite representing nearly half of India's population, much of women's economic potential remains untapped. Recognizing this, the government has prioritized women's empowerment through initiatives aimed at promoting development and bridging the gap between potential and contribution (Singh & Singh, 2023).

Happiness, from a Buddhist perspective, is considered an attainable goal that can be actively nurtured through practice and effort. Research shows that happy individuals tend to form stronger relationships, experience more fulfilling marriages, and exhibit better parenting. They also enjoy improved physical health, stronger immunity, and a lower risk of heart-related conditions. Studies even suggest that happier people may live up to ten years longer than their less happy counterparts. Furthermore, happiness contributes to improved mental health, greater resilience, and an enhanced ability to cope with challenges and trauma (Izzo, 2017).

Sleep is a process in which important physiological changes and slowing basic bodily functions are accompanied by major shifts in consciousness (Baron & Misra, 2016). It is an intermediate or transitional state between wake state and death. Although, it is defined as a state where both body and mind rests for many hours. During this time the sensory system is inactive, all the muscles in the body are in relaxed state, and the consciousness of the person is lost until those hours (Carskadon & Dement, 2005). It is a natural process characterized by decreased responsiveness to external stimuli, altered brain activity in the cerebral cortex, and reduced muscle tone (Mong & Cusmano, 2016). It can be also explained as an active, repetitive and reversible state of perceptual disengagement and unresponsiveness to the environment (Dewald, Meyer, Oort, Kerkhof & Bogels, 2010).

Studies highlight the interplay between social, familial, and personal factors in shaping happiness and sleep. Jiang et al. (2022) found that student happiness in China was significantly influenced by these factors, while Asghari et al. (2012) reported high rates of sleep complaints among Iranian adults, particularly women, older adults, and those who were widowed or separated.

The present study aims to explore the relationship between sleep quality and happiness among working and non-working women in South India, a population that remains underrepresented in research. Findings may inform workplace policies, including flexible hours, stress management programs, and mental health support for working women. For non-working women, results could guide community-based initiatives that enhance emotional well-being and social engagement. Understanding gender-specific dynamics of sleep and happiness can contribute to effective strategies for promoting mental health and overall quality of life for women across diverse contexts.

MATERIALS AND METHOD

Statement of the Problem

To assess and compare happiness and sleep quality among working and non-working women.

Objectives

1. To study and compare the happiness of working and non-working women.
2. To study and compare the sleep quality of working and non-working women.

Hypotheses

1. There will be a significant difference between working and non-working women in happiness.
2. There will be a significant difference between working and non-working women in sleep quality.

Participants

The sample consisted of 200 adult women (age ranging from 18 to 50 years), of which 100 were working and 100 were non-working. Participants were selected using simple random sampling from northern districts of Kerala (Calicut, Malappuram, Kannur, and Wayanad). All participants gave informed consent prior to data collection. Data were collected through online survey forms.

Materials

1) Demographic data sheet: Demographic data sheet consists of social demographic details regarding the participants. This includes personal details of participants such as name, age and occupational status (working / non-working).

2) The Oxford Happiness Questionnaire (Hills & Argyle, 2002): The Oxford Happiness Questionnaire (OHQ) measures psychological well-being and happiness of an individual by using 29 self-report statements. It consists of 29 items rated on a six-point scale ranging from 1(strongly disagree) to 6(strongly agree). The scale includes 17 positive items and 12 negative items.

- **Reliability:** Reliability is the extent to which test scores are consistent, with respect to one or more sources of inconsistency. The OHQ demonstrated high scale reliabilities with values alpha (168) = 0.91.
- **Validity:** The OHQ has good construct validity in terms of positive association with extraversion ($r = .38$ $p < .001$,) and negative association with neuroticism ($r = -.57$ $p < .001$).

3) Sleep Quality Scale (Yi, Shin & Shin, 2006): The Sleep Quality Scale (SQS) is used to evaluate sleep quality in a variety of patients and research populations. It consists of 28 items. It evaluates six domains of sleep quality: daytime symptoms, restoration after sleep, problems initiating and maintaining sleep, difficulty waking and sleep satisfaction.

- **Reliability:** The Cronbach's alpha coefficient was 0.92 for internal consistency and the correlation coefficient was 0.81 for test- retest reliability at 2-weeks interval.
- **Validity:** The Sleep Quality Scale was developed using item analysis and factor analysis on items with content validity. The difference of Sleep Quality Scale score between insomniacs and normal subjects confirmed the construct validity ($t = -13.8$, $P = 0.000$). Concurrent validity was identified by the significant correlation of Sleep Quality Scale with the Pittsburgh Sleep Quality Index ($r = 0.72$, $P = 0.000$).

Procedure

The data for the present study were collected from women residing in the northern districts of Kerala (Calicut, Malappuram, Kannur, and Wayanad). The sampling was done using simple random sampling. The questionnaires were prepared in online form to ensure convenience and wider reach. A brief introduction and informed consent statement were provided at the beginning of the form, explaining the purpose of the study, confidentiality of responses, and participants' freedom to withdraw at any time.

After giving consent, participants first completed the Demographic Data Sheet, followed by the Oxford Happiness Questionnaire. Once this was completed, they proceeded to the Sleep Quality Scale. Participants responded individually without any external influence. All the ethical issues were taken care of and there was no physical or psychological harm. The identity of the participants was kept confidential, and only the researcher had access to the raw data. After data collection, responses were reviewed, organized, and prepared for scoring.

Scoring

The Oxford Happiness Questionnaire contains 29 items, of which 17 are positively worded and 12 are negatively worded. The positively worded items (2, 3, 4, 7, 8, 9, 11, 12, 15, 16, 17, 18, 20, 21, 22, 25, 26) are scored from 1 to 6, where 1 indicates strongly disagree and 6 indicates strongly agree. The negatively worded items (1, 5, 6, 10, 13, 14, 19, 23, 24, 27, 28, 29) are reverse scored, meaning 6 is assigned for strongly disagree and 1 for strongly agree. After converting the scores for negative items, all item scores are summed and the total is divided by 29 to obtain the final happiness score. Higher scores indicate a higher level of happiness.

The Sleep Quality Scale (SQS) is a 28-item self-report measure designed to assess overall sleep quality across different populations. The scale evaluates six domains of sleep-related functioning: daytime symptoms, restoration after sleep, problems with initiating and maintaining sleep, difficulty waking, and overall sleep satisfaction. Here 21 items are positively scored (Items 1 to 12, 17 to 23, 27 and 28) and these items are scored as 0 for rarely, 1 for sometimes, 2 for often and 3 for almost always. The remaining items (13, 14, 15, 16, 24, 25 and 26) are negatively scored and therefore reverse scored, where 3 is assigned for rarely, 2 for sometimes, 1 for often and 0 for almost always. After scoring all items, the values are summed to obtain the total sleep quality score. The total score ranges from 0 to 84, with higher scores indicating more acute sleep problems and therefore poorer sleep quality.

Variables

- **Independent variable**: Employment status (working vs non-working)
- **Dependent variables**: Happiness, Sleep quality

RESULT AND DISCUSSION

The present study employed descriptive statistics and Independent Sample t-tests to analyse the data, using the Statistical Package for Social Sciences (SPSS, Version 21).

Basic descriptive statistics for variables of Happiness and Sleep Quality

Preliminary analysis of the variables happiness and sleep quality was conducted using basic descriptive statistics, including mean, median, mode, skewness, and kurtosis, to examine the distribution and normality of the data. The results of these analyses are presented in Table 1,

which provides a summary of central tendency and distribution characteristics for both working and non-working women on happiness and sleep quality.

Table (1) descriptive statistics for the variable happiness and sleep quality.

Variable	Mean	Median	Mode	Std Deviation	Skewness	Kurtosis
Happiness	4.03	4	3.59	.60	.276	-.129
Sleep Quality	77.52	77.50	82	12.55	.144	-.458

Table (1) presents the arithmetic mean, median, mode, skewness, and kurtosis for Happiness and Sleep Quality. For Happiness, the mean, median, and mode were 4.03, 4.00, and 3.59, respectively, indicating that the measures of central tendency are approximately equal. The skewness value of 0.276 suggests a slight positive skew, while the kurtosis value of -0.129 indicates a very mild platykurtic distribution; both values are small enough to consider the distribution approximately normal.

For Sleep Quality, the mean, median, and mode were 77.52, 77.50, and 82.00, respectively. The skewness of 0.144 indicates a slight positive skew, and the kurtosis of -0.458 suggests a slightly platykurtic distribution. Since both indices are relatively small, the Sleep Quality scores can also be considered normally distributed. Overall, the descriptive statistics indicate that the distributions of both Happiness and Sleep Quality in the sample are approximately normal, supporting the use of parametric tests in subsequent analyses.

Comparisons between working women and non-working women on the variable happiness

To test Hypothesis (1), which states that "there will be a significant difference between working and non-working women on happiness," an Independent Sample t-test was conducted. The results of this analysis are presented in Table (2). This test was used to compare the mean Happiness scores of the two independent groups (working and non-working women) to determine whether any observed differences were statistically significant.

Table (2) independent sample t-test of working and non-working on happiness.

Variable	Working Mean	SD	Non-Mean	Working SD	t-Value
Happiness	4.15	.64	3.91	.54	2.83**

***p>0.01 level*

Table (2) presents the comparison between working and non-working women on the variable Happiness. The t-value obtained was 2.83, which is significant at the 0.01 level, indicating a statistically significant difference between the two groups. Working women had a mean happiness score of 4.15 (SD = 0.64), whereas non-working women had a mean score of 3.91 (SD = 0.54). This suggests that working women reported higher levels of happiness compared to non-working women. These findings are supported by previous research, although results in the literature are mixed. For instance, Ugur (2024) reported that homemakers in Türkiye experienced higher happiness levels than working women, while Sato (2022) similarly found that housewives were happier than working women. However, the present study indicates the opposite pattern, with working women experiencing greater happiness.

The result of the present study may be attributed to factors such as financial independence, social interaction, a sense of purpose, or opportunities for personal growth associated with

employment. Therefore, Hypothesis (1), which states that "there will be a significant difference between working and non-working women on happiness", is accepted.

Comparisons between working women and non-working women on the variable sleep quality

To test Hypothesis (2), which states that "there will be a significant difference between working women and non-working women on sleep quality," an Independent Sample t-test was conducted. The results of this comparison are presented in Table (3). This analysis was carried out to determine whether the mean Sleep Quality scores differ significantly between the two independent groups.

Table (3) independent sample t-test of working and non-working on sleep quality

Variable	Working Mean	SD	Non-Working Mean	SD	t-Value
Sleep quality	78.64	11.99	76.41	13.05	1.25

Table (3) presents the comparison of sleep quality between working and non-working women using an independent sample t-test. The mean score for sleep quality among working women was 78.64 (SD = 11.99), while that of non-working women was 76.41 (SD = 13.05). The obtained t-value of 1.25 was not statistically significant, indicating that there exists no statistically significant difference in sleep quality between the two groups (working and non-working women). This suggests that employment status does not influence sleep quality, and both working and non-working women experience similar levels of sleep quality.

No existing studies have directly examined the relationship between employment status and sleep quality. Expanding the scope of research in this area could provide deeper insights into the determinants of sleep quality among women. From the result it is concluded that the hypothesis (2) which states that "there will be a significant difference between working and non-working women on sleep quality" is rejected.

CONCLUSION

The study finds that working women show higher levels of happiness than non-working women. Employment status does not influence sleep quality among women, as both groups report similar sleep patterns. Happiness in women appears to increase with employment, likely due to factors such as social interaction, personal growth, financial independence, and a sense of purpose or role fulfillment. Sleep quality, however, remains stable across different lifestyle roles, suggesting it is shaped more by routines, health habits, and psychological well-being than by work status. These findings indicate that wellbeing programs for women should focus on enhancing emotional satisfaction, promoting meaningful activities, encouraging personal development, and supporting a balanced lifestyle, rather than emphasizing employment status alone.

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Conflict of Interest

The author(s) declared no conflict of interest.

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