

Mental Health and Emotional maturity of Dalit Working and Non-Working Women

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ABSTRACT

In Indian society, caste is a major determinant of social status. It largely determines the life options and alternatives. The dalit form is known as a large proportion of the lowest caste. Social segregation, rituals of purity and different culture are the origins of differential access to education, health, nutrition, employment etc. In some places, the position of women is highly compromised, they carry the dual burden of being a dalit and a woman with full of responsibilities. The present study was conducted to measure the mental health and emotional maturity of dalit working and non- working women. The total sample comprised of 45 dalit women each from the two categories (i.e. working and non-working). The sample was randomly selected. The mental health inventory developed by Jagdish and A.K Srivastava (1983) was used to assess the mental health of the participants. Further, Emotional maturity scale developed by Singh and Bhargava (1988) was administered to measure the emotional maturity of women. The result shows that there were highly significant differences in all dimension of emotional maturity except only one social maladjustment. Similarly, there was also found a highly significant difference on mental health.

Keywords: *Mental Health, Emotional Maturity, Dalit Working and Non-working women*

In Indian society, caste is a major determinant of social status. It largely determines the life options and alternatives. Social exclusion, power, a ritual of purity and occupation are categorically distributing the society system into a caste. Sometimes, this leads to inconsistency on access to education, health, nutrition, social, and economic status. In social ranking, dalits form a large proportion of the lowest caste. The position of women is highly compromised in every caste, as dalits women reported to have the problems regarding the social and economic discrimination throughout their life. Undoubtedly, evidence revealed that under the Indian society dalit communities suffer from social oppression and social prejudice. Instead of this,

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different institutions like non-government and government organizations continuously putting their efforts to explore the significant issues of the lower caste and linking the gaps as well as they are proposing the better plans, supportive systems, and empowerment schemes for their development or better growth. Similarly, different projects are also running in regards to providing funds or grants to secure their rights.

The women groups are mostly surviving under pressure and domestic violence. Few risk factors such as lower status, economically unstable, lack of education and limited resources etc...., may create any changes in physical condition and may influence their mental state as well. The World Health Organization (2005) has recently defined mental health as “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community”. The three core components of this definition are (1) well-being, (2) effective functioning of an individual and (3) effective functioning for a community. Similarly, issues like marital relationships, unemployment, lack of knowledge, lack of self-satisfaction, stress, depression, and unprovoked rights and lack of decision making power all these sensitive issues may cause emotional instability.

Smitson (1974) defined that emotional maturity is a process in which the personality is continuously striving for a greater sense of emotional health, both intra-psychically and intrapersonally. Various studies have illuminated the significant role of mental health and emotional maturity of women as well as their risk factors and outcome among them. As studies quoted that working women have poor mental health and a higher level of depression compared to nonworking women (Dudhatra and Jogsan (2012). No doubt, a different factor may play an important role to support and affect a mental state as job related factors and social support from family were important predictors of mental health (Kopp, Stauder, Purebl, Janszky, and Skrabski 2008). The most relevant source of stress related to working mothers reported that they do not have enough time to involve in community engagement, whereas lack of social activity of non-working mothers are also quoted one of the major stressors because of their household chores. However, Pearlin 1975; Rosenfield, (1980) have shown that employed wives show fewer symptoms of psychological distress than full-time homemakers do.

On the other hand, Rout, Cooper, and Kerslake, (1997) found that the working mothers had better mental health and reported less depression than the non-working mothers. Whereas, Khodidas (2013) revealed that mental health of housewives was better than working women. Thus, studies have variation in accordance with the findings. In this context, the present study was an attempt to assess the significant difference and relationship between mental health and emotional maturity among dalit working and non-dalit working women.

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Objectives

1. To examine mental health of dalit working and non-working women.
2. To study the emotional maturity and its dimensions namely-emotional instability, emotional regression, social maladjustment, personality disintegration, lack of independence among dalit working and non-working women.

Hypotheses

1. There would be a significant difference between dalit working and non-working women on mental health.
2. There would be a significant difference between dalit working and non-working women on emotional maturity and its dimensions such as-. emotional instability, emotional regression, social maladjustment, personality disintegration, lack of independence
3. There would be a significant correlation between mental health and emotional maturity among dalit working-women.
4. There would be a significant correlation between mental health and emotional maturity among dalit non-working women.

SAMPLE AND METHODOLOGY

The total sample comprised of 90 dalit women, further divided into two categories namely working and non-working women. Out of 90 sample of Dalits, 45 dalit women were taken from the working category and 45 were selected from the non-working group. Several castes of dalit were selected from gurgaon, faridabaad and New Delhi. Working dalit women were having different occupations such as teachers (in school), labourers, sweepers, home based business, or other service.

Measures

Mental health inventory was used developed by Jagdish and Srivastava (1983). It was made to assess individual's good mental health or psychological well-being. This inventory is meant for a psychological investigation. It consists of 55 items in which 32 items are false keyed and rest are i.e., 23 items are true keyed. The reliability of the inventory was determined by 'spilt – half method using odd- even procedure.

Emotional maturity scale developed by Singh and Bhargava (1988) was used to measure the emotional maturity of the subjects. Emotional maturity scale has a total of 48 items and it has five dimensions: Emotional instability, Emotional regression, Social maladjustment, Personality disintegration, Lack of independence.

Test- retest reliability of the test was found to be 0.75. Internal consistency of 5 dimension was as Emotional instability – 0.75, Emotional regression- 0.63, Social maladjustment - 0.58, Personality disintegration- 0.86, Lack of independence- 0.42.

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RESULT

Results are being presented in the following tables:

Table 1: showing MS, SDs, t value and significance level among Dalit working and non-working women on mental health and emotional maturity and its dimensions

Variable	Groups	N	M	SD	t	P-value
Mental Health	*DWW	(45)	139.77	5.33	3.80	.000
	**DNWW	(45)	132.22	12.20		
Emotional instability	*DWW	(45)	18.35	2.82	4.27	.000
	**DNWW	(45)	21.62	4.28		
Emotional regression	*DWW	(45)	17.37	5.01	6.47	.000
	**DNWW	(45)	25.33	6.54		
Social maladjustment	*DWW	(45)	20.93	3.81	.42	.676
	**DNWW	(45)	21.31	4.67		
Personality disintegration	*DWW	(45)	15.04	3.86	5.76	.000
	**DNWW	(45)	20.15	4.51		
Lack of Independence	*DWW	(45)	16.64	3.49	6.53	.000
	**DNWW	(45)	21.71	3.84		

*DWW- Dalit working women, **DNWW- Dalit non-working women

Table 2: showing the Ms and SDs of Dalit working women.

	Mean	Std. Deviation	N
Working Dalit women on emotional maturity	88.35	13.91	45
Working Dalit women on Mental Health	139.77	5.33	45

Table 3: shows the Correlation value between Emotional maturity and Mental Health of Dalit working women.

Correlations			
		WWEM	WWMH
WWEM	Pearson Correlation	1	-.023
	Sig. (2-tailed)		.880
	N	45	45

Working women on Emotional Maturity & Working women on Mental Health

Tables 4: Showing Ms and SDs of Dalit non-working women

	Mean	Std. Deviation	N
Dalit Non-working women on emotional maturity	110.13	20.90	45
Dalit Non-working women on Mental Health	132.22	12.20	45

Table 5: Showing the Correlation value between Emotional maturity and Mental Health of Dalit Non-working women.

Correlations			
		NWWEM	NWWMH
NWWEM	Pearson Correlation	1	-.443**
	Sig. (2-tailed)		.002
	N	45	45

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

Non-working women on Emotional Maturity & Non- working women on Mental Health

DISCUSSION

The aim of the present investigation was to find out the significant difference and the relationship between mental health and emotional maturity of dalit working-women and non-working women. The data were analysed with the help of the Pearson's correlation and t-test. As Table- 1 has indicated that significant difference ($t=3.806$, $p<.0001$) were found between dalit working and dalit non- working women on mental health. Dalit non-working women reported less mean scores ($M=132.22$) on mental health as compare to the ($M=139.77$) dalit-working women. It indicates that dalit non- working women were less mentally healthy as compare to dalit working-women. Might be the reason are the other factors sometimes lack of education and dependency on others. As known fact, these points may create the inequalities and inconsistency to assess few services like health, society status, employment, lack of opportunities. Supported by Usha, Rout, Cary, Cooper, Helen Kerslake, (1997) examined the mental health, self-esteem and role satisfaction of women by comparing. The working mothers had better mental health and reported less depression than the non-working mothers. Kopp, Stauder, Purebl, Janszky, and Skrabski revealed that job related factors and social support from family were important predictors of mental health. Thus, our first hypothesis was accepted.

Similarly, table 1 also shows that there was a highly significant difference ($t=4.270$, $p<.0001$) between dalit working and non- working women on the first dimension of emotional instability. Dalit non-working women scored higher ($M=21.62$) as compare the mean score of ($M=18.35$)dalit working women on this dimension. Thus, working and non- working both significantly differed on emotional instability. Thus, our second hypothesis was accepted by the findings.

It can be observed from table 1 that there was also a highly significant difference ($t=6.473$, $p<.0001$) between dalit working and non- working women on the second dimension emotional regression on emotional maturity. Non-working women scored higher ($M=25.33$) as compare to the mean score of ($M=17.37$) dalit working women. It revealed that non- working dalit women might be suffering from the feeling of inferiority, restlessness, hostility, and aggressiveness and self-centre because these are symptoms of emotional regression suggested by Singh and

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Bhargava (1988). Supported by Pearlin 1975; Rosenfield, (1980) shown that employed wives show fewer symptoms of psychological distress than full-time homemakers. Thus, our second hypothesis was also accepted.

Similarly, Table 1 shows that working and non-working dalit women are not found significantly different ($t=.420$) on the third dimension of social maladjustment in emotional maturity. Thus, our second hypothesis was not accepted on this dimension.

Similarly, result revealed that there was highly significant difference indicated ($t=5.766$, $p<.0001$) between dalit working women and dalit non-working women on the fifth dimension personality disintegration of emotional maturity. Personality breakdown, like reaction, phobias, rationalization, pessimism, immorality, all are the symptoms of personality disintegration reported by Singh and Bhargava (1988). The mean score of dalit non-working women ($M=20.15$) is higher as compare to the mean score ($M=15.04$) of the dalit working women. Thus, our second hypothesis was accepted by the results.

The last dimension of emotional maturity is a lack of independence. The dimension reflects the egotistic attitude and lacks of objective interest. The result of the (table-1) revealed that dalit working and non-working women were shows highly significant difference ($t\text{-value}=6.537$, $p<.0001$) on the last dimension lack of independence. The mean score of non-working women ($M=21.71$) is higher as compare to the mean score of ($M=16.64$) working women. Thus, our second hypothesis was again accepted.

Remaining table-3 shows the non-significant correlation between emotional maturity and mental health among dalit working women. However, table-5 shows the correlation between emotional maturity and mental health among non-working women. It revealed that there was a significant negative correlation between emotional maturity and mental health of non-working women. These findings are contradicted from the previous studies. It may happen sometime, because to make a balance and to enhance the relationship generally women made a lot of adjustments in their surrounding and faced many inequalities and issues like low status, economic conditions, low educational, poverty, injustice, dependency, may cause a negative impact on mental health.

CONCLUSION

The result shows that there was a highly significant difference in all dimensions of emotional maturity except only one social maladjustment. Similarly, there was also a highly significant difference found on mental health. Despite relative findings, our research evidence suggests that may be due to disparities and lack of opportunities dalit non-working women are more at risk of emotional instability and poor mental health.

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