ORIGINAL ARTICLE

Measuring the Level of Depression, Anxiety and Self Esteem Among Working and Non-Working Married Women of Sindh Province

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ABSTRACT

Background: Depression is one of the common disabilities which is difficult to treat, hence an interesting as well as difficult to research. However, depression can be managed. The management will still a number of challenges, like failure to cut back and reoccurrence. One who has the ability to face and fight threats and weakness, and having self-satisfaction are the signs of high self-esteem.

Objective: The objective of the study was to assess the level of depression, anxiety and self-esteem, among working and nonworking married women of Sindh Province. This study is of great significance that it was not done before in the proposed area, where there is a crystal-clear depression and self-esteem variation in working v/s non-working women.

Study design: An analytical cross-sectional study

Place and Duration: Sindh Province from January to June 2022

Methodology: The research was conducted on the pre-developed questionnaire. There was a sample size of (N=67) that was collected from working and non-working women of Sindh Province Pakistan. For measuring the level of depression and anxiety, the Kessler Psychological Distress Scale (K10) scale was used for the measurement of Self-Esteem, Rosenberg Self-Esteem Scale was used among all participants. Consent was taken from all the participants of the study. For statistical data analysis, T-tests and ANOVA were used on SPSS.

Results: In this study out of 67 women 47.8% were working and 52.2% were not working. Regarding psychological well-being 27% of women had severe psychological distress, 25% had moderate psychological distress, 30% were psychologically well and 18% had mild psychological distress

Conclusion: The findings showed that working women have higher self-esteem than non-working women, but that non-working women have higher levels of distress than working women. This research opens the doors for further researching the causes and way forwards for low self-esteem and high distress with different dimensions.

Keywords: Depression, Anxiety, Self-esteem, Working, Non-working women, Sindh Province

INTRODUCTION

Domestic work has been added to the obligations and limits of both genders as a result of changes in family structures and workers' transformation, including women's entry into the labour market 1. The findings suggest that women continue to bear the burden of child-rearing and household chores and that "doing everything" has established a social convention for women ^{2, 3}. According to studies, women who are employed have lower-paying employment. Both work duties and physical illnesses are affected by stress, anxiety, and signs of physical ailments ⁴. Therefore, in context, the division of roles hypothesis holds that the allocation and division of family duties is a determinant in family involvement, with the man serving as the breadwinner and the woman as the housewife. Women's perspectives, on the other hand, stress equal employment possibilities for men and women ⁵. Performing tasks involves effort, according to the rehabilitation model and when a person does not wish to make a mental or physical effort, recovery is made ⁶. The primary concept of this idea is that high levels of effort at work are linked to crucial situations such as high blood pressure, heart illness, and overall uneasiness. If stress is prolonged, recovery is confined, anxiety is more likely, proper rest is a problem and mental and emotional well-being is reduced ⁷⁻¹¹. The scarcity theory also states that people have powerful and limited resources that are insufficient to fulfil their numerous duties, causing shame, worry, and despair 12, 13

Role-playing theory contradicts these beliefs, claiming that a person with multiple roles compensates for failure in one position ¹⁴. As a result of these jobs, you'll have more resources and social networking power ¹⁵. The study also found that those who play several roles had fewer psychological and physical issues than those who play fewer roles ¹⁶. Working outside the home improves women's social interactions and financial independence on a collective level. As a result of their numerous resources, their selfesteem and resistance to violence improve. Without a question, juggling career and family responsibilities need the presence of a

Superwoman ¹⁷. Working women, on the other hand, have resources (financial independence, social standing, sense of efficiency, etc.) that produce a sense of fulfilment and power, which serves a dual purpose. Working and unemployed women have shown contradictory findings, according to researchers. Unemployed women, for example, are more anxious and have a lower quality of life than working women ¹⁸.

Operational women's psychological well-being, health, and versatility are greater than unemployed women's and their family issues, marriage strife, and anxiety are slight ¹⁹⁻²³. Working women, on the other hand, have higher stress levels and insomnia disruptions than sedentary women, according to some studies ²⁴. Another research has revealed no variation between employing and non-working women who are psychologically healthy and satisfied in their relationships ²⁵⁻²⁸.

The researcher selects this topic because many people believe and as per previous literature, the level of psychological distress was observed high in non-working women than working ones, also the level of self-esteem was observed high in working women as compared to non-working ones. As a result, the researcher found it to be a fascinating subject for additional discussion and in-depth investigation of the relationship between anxiety, depression, and self-esteem. The hypothesis of this study is that the level of depression and anxiety would be high in nonworking women with low self-esteem and the level of self-esteem would be high and depression anxiety would be low in working women.

METHODOLOGY

This analytical cross-sectional study was conducted in Sindh Province from January to June 2022. The study's sample size is N=67, and the Sindh Province was sampled using a straightforward random sampling approach. A total of 67 working and non-working married women from Sindh province were

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included in this study. Unmarried females or out of the Sindh province were excluded.

To gather the data, a thorough demographic form was created that has all the necessary details for research purposes. The demographic form asks for your name (optional), city, age, and if you're employed or not.

Rosenberg Self-Esteem Scale (Rosenberg, 1965): The scale is a ten-item Likert scale, and responses range from strongly agree to strongly disagree on a four-point scale. The 5,024 juniors and seniors from 10 randomly chosen high schools in New York State made up the original sample for which the measure was created.

Kessler Psychological Distress Scale (K10): This 10-item survey asks about the anxiety and depression symptoms a person has encountered in the most recent four weeks in order to produce a general measure of suffering.

Procedure: First, detailed consent was taken from all the participants that the data would only be used for the purpose of the research study and that the information provided by participants would be confidential. As it's a time period when we are facing COVID-19 and it was difficult to collect the data via in-person mode, a detailed demographic form with K10 and Rosenberg Self-Esteem scale was developed through Google Forms and circulated among all participants. The directions were stated in clear detail above the form, which prevented any confusion or difficulty for the participants. The research participants' anonymity and confidentiality were appropriately preserved. Participants would be guaranteed that their information will remain private.

RESULTS

In this study out of 67 women, 47.8% were working and 52.2% were not working. Regarding psychological well-being 27% of women had severe psychological distress, 25% had moderate psychological distress, 30% were psychologically well and 18% had mild psychological distress

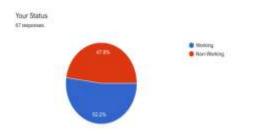
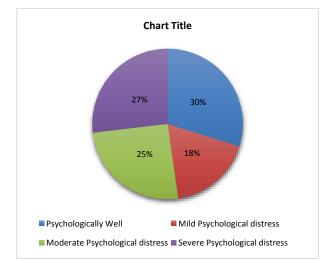


Figure 1: Indicates the percentage of total participants.





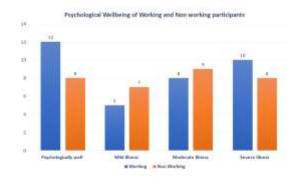


Figure 3: Differentiate between the Psychological well-being of working and non-working participants.

Table 1: Reliability	of the scales	via Cronhach's	Alnha test
	V OI LITE SCALES		

	Cronbach's	No of
	Alpha	Items
Kessler Psychological Distress Scale (K10)	0.919	10
Rosenberg Self-esteem Total Score	0.785	10

Table 2: indicates that there is a significant difference of K10 and selfesteem among working and non-working women.

Tools	Status	Correlation	Ν	Sig.	
Kessler Psychological Distress Scale (K10) Total score Vs Rosenberg Self-esteem	Non- working	418 [*]	32	.017	
Kessler Psychological Distress Scale (K10) Total score Vs Rosenberg Self-esteem	Working	495**	35	.003	
Kessler Psychological Distress Scale (K10) Total score Vs Rosenberg Self-esteem	Overall	456**	67	.000	
* Correlation is significant at the 0.05 level (2-tailed).					

** Correlation is significant at the 0.05 level (2-tailed).

	Non-working (N=32)		Working (N=35)		Mean Diff.	Sig.
	Mean	S. D.	Mean	S. D.	DIII.	_
Age	33.56	9.821	35.54	6.692	-1.98	0.33
Kessler Psychological Distress Scale (K10) Total score	25.97	8.303	24.94	8.921	1.03	0.63
Rosenberg Self- esteem Total Score	16.81	4.568	19.77	4.821	-2.96	0.01

From the above results, it was revealed that working women were having high self-esteem and low distress while non-working women had high distress along with low self-esteem.

DISCUSSION

The aim of this study was to examine the relationship between depression, anxiety, and self-esteem among working and nonworking married women of Sindh Province. The results revealed that the working women were having high self-esteem and low distress while non-working women had high distress along with low self-esteem. The results give us a clear picture of whether a working woman is having a job as well as household chores, but they are low in psychological distress and has high self-esteem. On the other hand, the non-working women had increased levels of anxiety and depression with low self-esteem. Hence it reflects that low self-esteem causes depression and anxiety. Our results are consistent with the various other studies ²⁹⁻³⁷.

It is suggested that future studies focus on pleasure in employing and un-employing women, as well as the influence of employing women's spouses, families, friends, and social support systems on anxiety and depression in employed and unemployed women. It's also a good idea to contrast the anxiety and despair of employed and unemployed women's husbands.

CONCLUSION

Self-esteem is a significant psychological factor that should be covered in the context of the self and in-depth research. According to research, low self-esteem can lead to mental health issues including depression, anxiety, guilt, and many other forms of mental anguish, while good self-esteem is crucial for personal relationships, creativity, and ultimately, academic and professional achievement as well as human development.

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