Assessment of depression and socio-economic status of tribal and non-tribal widowed and divorced working women

Dr. Meera Manjul

Abstract

This study attempted to investigate the direction and magnitude of the relationship of depression with socio-economic status in reference to widowed and divorced women. The total sample N=100 {widow=50 (25 tribal+25 non-tribal); divorced=50(25 tribal+25 non-tribal)} was given Socio-Economic Status Scale of Pareek and Trivedi (1964) and Beck’s Depression Inventory (1961). Correlation, regression and t-test were performed. The findings revealed that depression is negatively and significantly correlated with socio-economic status having differences between widow and divorced as well as tribal and non-tribal widow and divorced women.

Keywords: Socio-economic, tribal, non-tribal widowed, divorced working women

1. Introduction

Triclosan, Widowhood and divorcehood, in case of women, are humanitarian disaster. In normal circumstances, no women could wish to be widow or to have divorce. Both of these states results into separation from their husbands and in some cases this may be separation from their children also. In extreme cases, separation from their family is also result of death of husband or separation from their husbands. They fall into that arena where the things remain the same but meaning changes. While the children become single parent children, the connotation of ‘we’ changes to ‘I’ and so on. In such situations women becomes sole earner for their family and working, either skilled or unskilled become a compulsion for them. Therefore, working can be seen as a force leading the families of widow and divorced women.

Their life is a challenge to them either in home, office or in wider society in terms of health and socio-economic concerns. It is estimated that that widowhood and divorcehood are stress generating events that brings in depression, anxiety, mental health problems and other physical problems like heart diseases. While other problems have some clear symptoms, depression is a silent and slow in appearance. Its’ effects are many times taken for granted and women show such tendency of ignoring health problems for the sake of their family and avoiding unnecessary health checkups. In the societies like Indian, where the health awareness is low, and women is bound by cultural expectations, their health concerns, especially about depression is very serious and in case of widows and divorced women these are specific that needs to be given due consideration (Whiffen and Clark, 1997) [9].

Psychologist understands that the origin of depression lies in mental illness and it is a kind of mental disorder that refers to fractured correspondence with reality. This is manifested with psychosis retardation, poor performances and functioning that may be associated with feeling of melancholy feeling of apprehension, worthlessness and guilt. In addition, loss of appetite, sleep, sexual drive and loss of interest in pleasurable activities are characteristics of a depressed person who shows variety of behavioural changes. Depressed people show self-negation, lack of rational thinking and sometimes attempts suicides.

Generally, depression is understood to be an invisible disease. This being so because of its heterogeneous and non-specific signs and symptoms. It is considered that at one time are indicative of some other diseases in singularity or collectivity. However, some signs and symptoms, as agreed upon, are moods of sadness; lack of concentration/interest/motivation
in doing some work, miserable appearances, frozen responses, untidiness, and spontaneous speech is reduced. The depressed person tends to operate within a schema of self-depreciation and self-blame. Depressive disorders incorporate a spectrum of psychobiological dysfunction, which vary considerably in severity, frequency and duration. Thinkers like Feldman (1990) and others are of the view that societal changes are major cause of increasing depression among general population. Nandi et al (1975) have found in their studies on depression that socio-cultural factors like gender, income, sex etc. plays an important role in determining the depressing causes and level and the type of depression. Research has also shown that the severity of psychiatric impairment is negatively related to socio-economic status i.e.; lower the socio-economic status, the more extreme the maladaptive behavior. Given this position, the present study attempts to look into the depression with referene to the socio-economic status of working women and the correlation between depression and socio-economic status.

2. Material and Methods
This study has been carried out in Shimla city of Himachal Pradesh. This State is a hill State situated in the Western Himalayas. At present, the State of Himachal Pradesh comprises of 12 districts namely Bilaspur, Chamba, Hamirpur, Kangra, Kinnaur, Kullu, Lahaul & Spiti, Mandi, Shimla, Simrou, Solan and Una with Shimla is the Capital of the State. According to 2011 census, total population of the State is 68, 64, 602, 25.19% of which are scheduled castes and 5.71% are scheduled tribes. In total working population (main and marginal workers) 58.69% are males and 44.82% are females. Total number of workers in the State is 3559422 out of which 2043373 are males and 1516049 are females. In the year 2012 regular government employees were 1, 87, 419, and 11780 were part time employees, whereas 9979 were daily paid workers. Shimla being capital of the State has large number of working women, who came here from different part of the State. This State being hilly, the segments of widow and divorced women were further divided into tribal and non-tribal women. Total sample constitutes 100 women (50 widow+50 divorced women). These segments include 25 tribal and 25 non-tribal women to each. In view of the above, the main objective of the study was to assess depression among the tribal and non-tribal widowed and divorced women in Shimla. It was considered that socio-economic status of an individual plays a very important role in the life of an individual, it is found in most of the studies that very high or very low economic status of an individual leads to maladaptive behavior which may further leads to depression (Verma et al, 1980). Thus, it is presumed that depression would be significantly related with socio-economic status among tribal & non-tribal working single married women. Correlational design was used to study the relationship between depression, socio-economic status and coping style among working single married women on these variables. For collecting data, firstly socio-economic Status Scale of Pareek and Trivedi (1964) [5] has been used. In order to study the SES of the participants, SES scale was administered to the participants. There are 9 items consists in this scale. Out of the nine main items, the first four items are more or less related to the head of the family. Other items, five, six, seven and eight related to the family. Each item is scaled from the lowest to the highest-each sub-item representing a point on the scale. This also means that only one of the sub-items is to be checked for a particular respondent under each of the first seven items. On the other hand items 8 and 9 are additive in nature. Going further, for the assessment of depression, Hindi Version of Beck’s Depression Inventory (1961) has been used. The scale is used for measuring attitudes and symptoms associated with depression. It is a 21-items scale with the total score ranging from 0 to 63. The score of twenty-one questions will be added and the total score will be obtained. The highest score or each of the twenty-one questions is three; the highest possible total for the whole test is sixty-three. The lowest possible score for the whole test is zero.
After getting the list of participants who were randomly selected on the basis of age and education and who have given their consent to participate in the study, were contacted individually by the investigator and were assured that the information given by them would be kept confidential. After establishing a good rapport with the subjects, the tester ought to read instructions, while subjects do read them silently along with her. The subjects are asked to respond any one alternative of each item by marking a tick. They were again assured that the data so collected should only be used for academic purpose. The respondents of the study were given a brief overview of the concepts of depression and socio-economic status. The respondents, responded in a friendly way, took 15 to 20 minutes for filling up SES and BDI. The subjects preferred to be interviewed in the restaurants rather than in office or houses.

3. Result and Discussion
The aim of the study was to assess depression among tribal and non-tribal widow and divorced employed women in Shimla city. The focus of the study was to explore the effects of socio-economic status on depression. The results of the t-test analysis shows the significant difference between tribal and non-tribal participants ($n=50$) on their depression scores and revealed that the depression is high among non-tribal women is significantly poorer than the tribal population. Further, the results also indicate that depression is significantly higher among widow than the divorced participants both in case of tribal and non-tribal than the divorce tribal and non-tribal and as well the coping style is significantly better and effective in case of divorced tribal and non-tribal than the widow tribal and non-tribal. Firstly, inter-correlations among socio-economic status, and depression were computed. The result of the present study indicates that the depression of tribal and non-tribal, widow and divorced employed women whereas it is not significant ($r=+.114$) with socio-economic status. Further, the results show that in case of non-tribal participants ($N=50$) depression is not significant with socio-economic status ($r=-.016$). The depression score for tribal widows is also not significant ($r=.195$) with socio-economic status but in case of non-tribal widows, depression with socio-economic status ($r=-.321^*, p<.05$) it is negative and significant. The result in case of tribal divorced women, depression is significantly and negatively correlated with socio-economic status ($r=-.275^*, p<.05$) Result also showed that depression is not significant with socio-economic status ($r=+.136$). On the
basis of above discussion it is inferred that socio-economic status is negatively and significantly correlated with depression, in case of non-tribal widow and tribal divorced women. Meaning thereby depression is higher among those people whose socio-economic status is low. While with others, the socio-economic status is negatively correlated with depression but insignificant.

4. References