



Navigating The Dual Burden: Social and Mental Health Challenges Among Educated Working Women

Shweta Pandey, PhD Research Scholar, SunRise University

Dr. Mohit Soni, Assistant Professor, Department of Education, SunRise University

Abstract

Due to the dual responsibilities of home and work management, it can be difficult for working mothers to meet and maintain balance. While men have not contributed equally to household chores, women are working to share the financial burden that was previously shared by both genders. The majority of the time, the well-being of working mothers is neglected in order to balance and manage both roles. As a result, the study focuses on the present mental and physical health of working mothers.

The purpose of the structured questionnaire was to achieve the study's goals. 160 above responses were gathered from working mothers who are employed in private, government, and semi-government organizations out of the 200 mothers who were contacted. Optional sources were likewise used to figure out the hole and different point of view of the review.

The review is directed in the age gathering of 31-40 years, 29% from the age gathering of 41-50. Around 64.1% of the functioning ladies were utilized in confidential associations, 17.9% were essential for government association. The remaining 2.6 percent worked in jobs classified as "other miscellaneous." Some of the questions in the questionnaire about physical health show that over half of working mothers have low energy and don't get enough sleep, and 42% of working mothers have health problems after childbirth.

It's important to create a positive work and home environment. The assistance of coworkers, friends, and family members is essential. The procedures of work from home, flexi time, childcare offices can help keep up with the balance between fun and serious activities for working moms. In order to raise better citizens and provide mothers with a healthier environment, society must improve.

INTRODUCTION

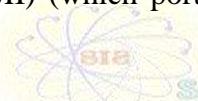
A married woman's first child is a beautiful time in her life. In addition to the joy that comes with motherhood, it also comes with a lot of challenges. Particularly in today's environment, where the majority of women are employed, they must maintain and balance their roles as mothers and employees. Adapting to the climate at work environment, contending and fulfilling the needs in the family becomes trying for a mother.

Women's health is an important factor that needs to be taken care of both at work and at home so that they can balance both well and produce their best work; She will be able to perform her responsibilities at work more effectively, and she will be able to raise and care for the child in the best way possible so that she will raise a responsible member of society.

According to the findings of a survey that was carried out in the United Kingdom, eighty percent of employed women suffer from one or more health issues, particularly those related to stress and anxiety. In a country like India, women are expected to take care of the household chores, regardless of whether or not they work. Bianchi, Milkie, Sayer, and Robinson's research, explains despite the fact that the job of ladies in everyday exercises is shared by men, still it has been seen that by and large the moms assume a greater part in the nurturing of their youngsters. The mental and physical strain that comes from trying to maintain a healthy work-life balance increases.

Report from the National Family Health Survey (NFHS), as mentioned in Sharma N.'s (2022) article; demonstrates that women are more at risk for weight gain than men for the health parameters of increasing malnutrition and issues like anemia. Additionally, it demonstrates that rural women face more health-related issues than urban women. A few facts about the women's health were presented in the article.

The NFHS (Public Family Wellbeing Overview)- 5, (somewhere in the range of 2019 and 2021) uncovered that the Weight List (BMI) (which portrays the load with regards to the



level of the individual) is underneath typical for 18.7% of the ladies in correlation with 16.2% of the men. Assuming we look at the information from the last study being directed in NFHS-4, we can track down that BMI beneath typical for ladies has diminished from 22.9 to 18.7, BMI for men has likewise seen a downfall from 20.2% in last review to 16.2% in the current review. According to the results of the survey, women in rural areas had a lower BMI than women in urban areas. Anaemia was found in 57% of women between the ages of 15 and 49, while it was found in 25% of men in the same age group. This demonstrates the health issues women face. Even the World Health Organization (WHO) reported that 29.9% of women between the ages of 15 and 49 worldwide had anemia in 2019.

LITERATURE REVIEW

In addition to taking care of their responsibilities as mothers, working mothers need to prioritize their professional lives. Nowadays, both spouses of a married couple are required to work in order to satisfy their materialistic desires and meet their financial obligations.

Sharma P., Shekhawat K., and Menaria P. (2022) talked about how important it is for women to be financially independent and how they need to find a way to balance both their roles as mothers and their financial independence. The review zeroed in on the personal satisfaction, solidness and social help, and its effect on the emotional well-being of the functioning ladies. The review uncovered that even monetary autonomy is a significant viewpoint for ladies.

According to studies, women's psychological health is affected by the shifts in the role conflict they experience after childbirth due to the shifts in their role perception. Stress, anxiety, and low self-esteem are some common side effects of the same thing; all of these things have an impact on mental health. Managing one's mental health becomes difficult when there is a lack of time to fulfill various roles. The concentrate by Dugan, A. G., and Barnes-Farrell, J. L. (2020) was to survey the gamble of pressure among working moms as they not just contribute towards their paid jobs in associations yet additionally have a second shift of family responsibility. The working mother's time and energy are drained and depleted in order to fulfill the requirements of both shifts, which causes stress. In light of limited resources, the study demonstrated that self-care must balance mental and physical health care. It is surprising to note that a Nielsen study revealed in a 2021 article that the majority of fathers in India still believe that it is the mothers' role and responsibility to care for their children. Even though we have been talking about gender equality in carrying out responsibilities, we are aware that in India and a few other countries, it is believed that the sole responsibility of the female is to care for the household and raise children. We can't say that the situation hasn't changed; fathers today probably spend more time and effort at home than they did a few decades ago, but mothers continue to shoulder the majority of the burden. According to studies, women's health has deteriorated since Covid-19. In this present circumstance, level of pressure expanded by a few times, the trepidation and nervousness of wellbeing concerns: sanitization, social distance, safety measures to maintain safety on one end, and balancing work at home and work at the office with no outside assistance. A moderately vigorous physical activity can lessen the negative effects of stress on working mothers' quality of life and their maternal relationships (Limbers, C. A., McCollum, C., & Greenwood, E.; 2020).

OBJECTIVE OF THE STUDY

- To comprehend the effects that women face as a result of juggling motherhood and work.
- To figure out the effect on mental and actual soundness of working moms after maternity.

According to a number of recent studies, as well as articles, research papers, and other publications, it is abundantly clear that as an increasing number of women continue to focus on their careers and adjust to the dual roles and responsibilities that come with motherhood, their health is becoming an alarming concern that has an impact not only on them but also on their families and society as a whole. As a result, the goal of this study is to learn how working mothers' mental and physical health are affected after giving birth.



RESEARCH METHODOLOGY

In the urban area of Jaipur, 168 working mothers who are employed in some capacity, including private, government, semi-government, and so on, were the subjects of the study. Despite being approached with 200 participants, only 168 working women responded. To collect the data, a structured questionnaire was developed and distributed to participants online so that they could complete it on their own. In the event that the participants lacked the necessary education and were unable to complete the form on their own, the data was gathered by asking them these questions and having them complete the form. The data were gathered through the use of convenience sampling.

RESULTS

The greater part of the information in the review i.e 59% were of the age gathering of 31-40, 29% from the age gathering of 41-50, 7% were of the age gathering of 19-30 and 5% of the respondents were in the age gathering of 51-60 years. Working women who had completed their graduation were represented in 37% of the data, and approximately 49% of working women had even completed their post-graduation. The majority of these less educated working women were employed as miscellaneous workers, domestic help, or workers in an organization, according to the questions we asked them and the responses they provided on the questionnaire. Private businesses employed 64.1% of working women, while government agencies employed 17.9%. 2.6% had semi-government occupations and rest 15.4% were representatives in various positions (who were generally utilized by an outsider in different associations).

84% of the functioning moms had their functioning long stretches of over 5 hours. Only 16% of workers worked more than five hours per week. Working mothers are put under a lot of stress because they have to work such long hours, have to do the housework, and take care of their children. 2.4% of the women were divorced, while 97.6% of the women were married. For the divorced person female, dealing with the double liability alongside the inner strife and dealing with all the obligation without anyone else turns out to be considerably more troublesome.

According to the study, 58% of working women had only one child, 40% had two children, and 2% had more than two. It is clear that more than 50% of women planned for one child, and that it is difficult for working mothers to handle the responsibilities of motherhood. The study found that 29% of working mothers had children under the age of 4. 39% of parents had children over the age of 8 and 32% had children between the ages of 4 and 8.

According to the findings, working mothers face a lot of physical and mental stress, which makes it clear that depression can be a major issue for them. The study shows that 42% of working women experience depression more frequently, 38% experience depression frequently, and 15% experience depression occasionally.

41% believe they frequently perform in a similar manner for office work, 24% believe the same for household work, 19% believe it occasionally with respect to office, and 32% believe they perform in a similar manner for household work; 38% believe they are able to perform office work most frequently in the same manner as before childbirth; 2 percent assert that they are unable to perform at work in the same way they did prior to childbirth, and 11 percent state the same for household duties. The pressure to meet deadlines and deliver on both fronts increases as the number of responsibilities increases.

36% of working women believe they can freely share their emotions with friends most of the time, 31% share it frequently, 17% share it occasionally, and 16% do not share it. The role that friends play in providing mental comfort is crucial. It is critical that working mothers express their emotions because doing so helps relieve mental tension and anxiety to some extent.

The majority of women, or 70%, do not receive the necessary support from their families, despite the fact that women's work increases with childbirth. 14% of women receive support



occasionally, 11% receive support frequently, and only 5% receive support most frequently. In Indian culture, it is as yet the ones who need to deal with all the family work and furthermore deal with kids for example their schooling, food, essential necessities, in any event, when a youngster falls wiped out, moms are supposed to be near and deal with the youngster.

After giving birth, the amount of household work increases dramatically, and mothers are expected to manage it. This puts a lot of pressure on them, and it's possible that the other members don't share the responsibility, making them feel overworked. 79% of working mothers are confident when meeting new people, 12% are confident frequently, and 8% are confident occasionally.

As a result, the study demonstrates that working mothers are subjected to stress, anxiety, and depression as a result of work and family pressures, yet they neglect their physical and mental health. Even though working mothers' conditions are improving in India, they are still not receiving adequate care and support, which hurts them. Working mothers are more likely to suffer from mental health issues because mental health issues are rarely discussed or addressed. Additionally, the WHO study reveals that 25% of women with mental disorders do not even seek mental health care.

The covid-19 situation had a negative impact on people's physical and mental health in the years 2020 and 2021, particularly working mothers. According to the study by Kirwin, M. A., and Ettinger, A. K. (2022), lockdown, social isolation, and adapting to various other challenges in day-to-day life, such as taking care of a child and employment difficulties, all contributed to mental health disorders. Even though there are difficulties, proper measures like going to the doctor, doing exercises, and getting help with the day-to-day work are not taken properly.

Getting the kid this world, is one delightful stage for wedded ladies. With such a beautiful stage comes the challenge of providing the child with the necessary upbringing, which is the most crucial responsibility of a mother.

According to the previous system, women in India were responsible for taking care of the home and the needs of the family, while men were responsible primarily for earning a living. However, the current scenario indicates that females have begun earning money. As one job is added to her, however the obligation of the home, not yet shared similarly for her.

Working moms frequently feel the responsibility of not being capable to give her chance to nurturing or not having the option to give the best in proficient job, so it the obligation of individuals around to assist her with conquering such sort of responsibility. Because of the shared responsibilities, she can even make time for her own personal care and engage in mental and physical exercise, both of which can improve her health. She gains courage and strength from the support of her husband and extended family, which can also improve communication and foster a warm relationship with her husband and other family members.

Such sort of helpful climate achieves a solid improvement of the youngster. People must be empathetic, compassionate, and understanding of working mothers, whether at home, at work, or in society, and work toward creating a better environment for her, society, the nation, and the world as a whole.

REFERENCES

1. Keeney, J., Boyd, E.M., Sinha, R., Westring, A.F. and Ryan, A.M. (2013), "From "work-family" to "work-life": broadening our conceptualization and measurement", *Journal of Vocational Behavior*, Vol. 82 No. 3, pp. 221-237, doi: 10.1016/j.jvb.2013.01.005.
2. Kirwin, M. A., & Ettinger, A. K. (2022). Working mothers during COVID-19: a cross-sectional study on mental health status and associations with the receipt of employment benefits. *BMC Public Health*, 22(1), 1-15.
3. Lakshminarayanan, S., & Savarimuthu, A. (2022). Work-Family Conflict-An



4. Exploratory Study of the Dependents Child's Age on Working Mothers. Lakshminarayanan, S., & Savarimuthu, A. (2013). Work-Family Conflict-An exploratory study of the dependents child's age on working mothers. *Review of Integrative Business & Economics Research*, 2(1), 449-470.
5. Madipelli, S., Sarma, V.V. and Chinnappaiah, Y. (2013), "Factors causing work life imbalance among working women-a study on school teachers", *Indian Journal of Industrial Relations*, Vol. 48 No. 4, pp. 621-633, available at: www.jstor.org/stable/23509819 8.
6. Netemeyer RG, Boles JS, McMurrian R (1996). Development and Validation of Work – Family Conflict and Family – Work Conflict Scales. *J. Appl. Psychol.*, 81(4): 400-410.
7. Panigrahi, A., Padhy, A. P., & Panigrahi, M. (2014). Mental health status among married working women residing in Bhubaneswar City, India: a psychosocial survey. *BioMed research international*, 2014.
8. Sharma, N.R., A. Yadava and A. Yadava (2001). Mental health of women in relation to job stress. *Journal of Personality and Clinical Studies*, 17(1), 41–44.
9. Sharma P, Shekhawat K, Menaria P, Financial independence and maternal mental health- A right balance. *Southeast Asian Journal of Health Professional* 2022;5(1):4-7.
10. Warshaw, C. (1989). Limitations of the medical model in the care of battered women. *Gender and Society*, 3, 506-517.
11. Webster, J., Sweett, S., & Stolz, T. A. (1994). Domestic violence in pregnancy. A prevalence study. *Medical Journal of Australia*, 161, 466-470.
12. Weine, S. M., Becker, D. F., & McGlashan, T. (1995). Psychiatric consequences of 'ethnic cleansing': clinical assessments and trauma testimonies of new resettled Bosnian refugees. *American Journal of Psychiatry*, 152, 532-542.
13. Weston, R. (1996). Experience of health and health related lifestyle patterns. In P. M. McDonald (Ed.), *Australian Living Standards Study: Box Hill report* (pp. 293-366).
14. Melbourne: Australian Institute of Family Studies. Whitehead, M., Judge, K., Hunter, D. J., Maxwell, R., & Scheuer, M. A. (1993). Tackling inequalities in health: the Australian experience. *British Medical Journal*, 306, 783-7
15. Yeo, H. M., & Yeo, W. W. (1993). Repeat deliberate self harm: A link with childhood sexual abuse? *Archives of Emergency Medicine*, 10, 161-166.
16. Yoder, R. (1989). Are people willing and able to pay for health services? *Social Science and Medicine*, 29 (1), 34-42.
17. Ziebland, S., Thorogood, M., Yudkin, P., Jones, L., & Coulter, A. (1998). Lack of willpower or lack of wherewithal? 'Internal' and 'external' barriers to changing diet and exercise in a three year follow up of participants in a health check. *Social Science and Medicine*, 46, 461-465.
18. Zunzunegui, M. V., Beland, F., Llacer, A., & Leon, V. (1998). Gender differences in depressive symptoms among Spanish