



**QUALITY OF LIFE AMONG WOMEN WORKING AS TEACHERS IN COLLEGES
AND WOMEN WORKING AS ASSISTANT TO MANAGERS AT
MULTINATIONAL COMPANIES**

Kavitha.A¹ & Mangala S M², Ph. D.

¹Research Scholar, Centre for Women Studies, University of Mysore, Mysore

²The Director, Centre for Women Studies, Manasagangotri, Mysore – 570 005

Abstract

The World Health Organization has defined quality of life as “an individual’s perception of their position in life in the context of the culture and value system in which they live and in relation to their goals, expectations, standards, and concerns. It is a broad ranging concept affected in a complex way by the person’s physical health, psychological state, level of independence, social relationships and their relationships to salient features of the environment”. In the present study quality of life is also assessed in terms of physical health, psychological, social and environmental variables. The aim of the study was to analyse the difference in different aspects of quality of life between women working as teachers in colleges and women working as assistant to managers at multinational companies. A between group design with purposive sampling was opted for the study. Thirty each of women working as teachers in colleges and women working as assistant to managers at multinational companies were considered for the study. Women aged between 30 to 50 years, working at least from past five years and married for at least past three years were considered for the study. Women who are single mothers/separated from husband/widows were not considered for the study. The sample were administered Quality Of Life Questionnaire (BREF, WHO). The responses were scored adequately and results analysed using t test to analyse the difference in quality of life between two groups. The results indicated that that there was significant difference in quality of life in some areas and not in some other areas. The results indicated that on physical health, psychological health, social relationship domain the teacher’s group has indicated significantly better health than women working as assistants to managers at multinational companies. On environmental domain there was no significant difference between both the groups indicating no significant difference related to the overall work environment. The results are discussed in detail also in reference with other studies and implications of the study are highlighted in background to problems faced by women in different occupations.

Key words: Quality Of Life, Women Working as Teachers in Colleges and Women Working as Assistant to Managers at Multinational Companies



Scholarly Research Journal's is licensed Based on a work at www.srjis.com

Introduction:

Traditionally, women in India were not supposed to work for gainful employment outside the home (Shanta Astige, 2006). With the advent of industrialisation and urbanisation the nature and character of work has undergone a radical change. The traditional picture of women is very different than what it is today. Women have played a key and largely unrecognized role in the rapid economic and social development worldwide. Women have been entering workforce in record numbers, over the last four decades (Kaila, 2005).

There are sharp differences of opinion about the changes taking place in the position of women in India. Some regard these changes as positive, profound and pervasive, they point to the increasing participation of women in public life and to the changes introduced in their legal status (Kapur, 1974, Mishra, 1933, Lalitha Devi, 1982). Others maintain that the position of women has changed very little and that Indian society continues, by and large, to be a male-dominated society (Beteille, 1975:61). Numerous studies have found that employed women compared with women who are not employed have better mental and physical health and greater satisfaction with their lives (Amatea & Fong, 1991; Baruch & Barnett, 1986; Grossman & Chester, 1990; Walker & Best, 1991).

According to Indian Journal of Psychiatry, the study on Rapid urbanization - Its impact on mental health: A South Asian perspective: reported that urbanization brings with it a unique set of advantages and disadvantages. Women are particularly vulnerable and they often disproportionately bear the burden of change associated with urbanization.

Bangalore is the capital of the Indian state of Karnataka. Bangalore is India's third most populous city. It is among the top 10 preferred entrepreneurial locations in the world ([http://economic times. India times.com/](http://economic.times.india.times.com/). 12 April 2012). It comes up with unique challenges to women in general and working women in specific. It has its impact on quality of women's life. In this background the major aim of the study was to understand if different occupations bring in different quality of life?

According to the Quality of Life Research Unit (2004), the quality of life is related to communities, families, and individual from a variety of population groups. The study of quality of life is an examination of factors that contribute to the goodness and well being of life, as well as people's happiness. It also explores the inter-relationships among these factors. Quality of life, as a concept, has various meanings and definitions. The World Health Organization defined quality of life as "an individual's perception of their position in life in the context of the culture and value system in which they live and in relation to their goals,

expectations, standards, and concerns. The 'Quality of life' is a broad ranging concept affected in a complex way by the person's physical health, psychological state, social relationships and their relationships to salient features of the environment".

Asadi, Azar, Vasudeva and Abdollahi (2012) examined the interrelationship between quality of life, hardiness, self-efficacy and self-esteem among working (professional and non-professional) and non-working married women and found that there was significant positive interrelationship between quality of life, hardiness, self-efficacy, and self-esteem in the whole sample, within the subgroups of professional and non-professional employed and unemployed women. Iran Asadi Sadeghi Azar, Maryam Heidari, Elahe Asadi Bidmeshki, Forugh Forghani and Nasrollah Basirani (2008) aimed to investigate the quality of life between employed and unemployed women. Results showed that Professional employed women were found to be significantly higher on quality of life, physical health, psychological health, social relationship, and environment than nonprofessional women. Non-professional employed women were found to be significantly lower on quality of life, social relationship, and environment than unemployed women. It was concluded that employment for women does not always ensure good quality of life. Status and level of works is important factor for creation the positive consequences of work in women.

Vanitha Srivastava (1978) under took a study of 'Employment of Educated Married Women in India'. The study has revealed that the working women differed from the non-working women with regard to fertility, family size and socialisation of children. However, the working women could not devote time and energy to the management of home and development of the children, compared to nonworking women. A study by Rout, Cooper and Kerslake(1997) examined whether working mothers and non-working mothers differed on measures of mental health, self-esteem, and mother role satisfaction. Results showed that the working mothers had better mental health and reported less depression than the non-working mothers. The most frequently reported source of stress for working mothers was not having enough time to do everything, whereas for non-working mothers lack of social life was a major stressor.

Though there were many studies on working and home maker's, there were not many studies related to the quality of life among women working in different professions and hence this study was attempted to understand the difference in urban background of Bangalore.

Methodology and procedure:

The aim of the study was to analyse the difference in different aspects of quality of life between women working as teachers in colleges and women working as assistant to managers at multinational companies. It was hypothesised that there would be no significant difference in quality of life between Women working as teachers in colleges and women working as assistant to managers at multinational companies. A between group design with purposive sampling was opted for the study. Thirty each of women working as teachers in colleges and women working as assistant to managers at multinational companies were considered for the study. Women between age group of Individuals aged between 30 to 50 years, working at least from past 05 years and married for at least past three years were considered for the study. Women who are single mothers/separated from husband/widows were not considered for the study. The sample were administered Quality Of Life Questionnaire (BREF, WHO). The responses were scored adequately and results analysed using appropriate statistical measure.

Tools:

WHO QOL BREF Instrument (WHO, 1998): The WHOQOL-BREF is an abbreviated 26 item version of the WHOQOL-BREF. The instrument comprises of four domains-physical health, psychological, social relationship and environment. The WHOQOL instruments place primary importance and the perceptions of the individual. WHOQOL-BREF has shown to display good discriminant validity, content validity, and test-retest reliability. Domain scores produced by the WHOQOL-BREF have been shown to correlate at around 0.9 with the WHOQOL-100 domain scores.

Analysis of results:

The result was analysed using t test to analyse the difference in quality of life between teachers in colleges and women working as assistant to managers at multinational companies. The quality of life was analysed under the domains of physical health, psychological, social relationships and environment.

Results and discussion:

Table 1: Showing the demographic details of the sample:

Sl	Demographic	Range	Freque	Percenta
1	Age	31-35	10	33.33
		36-40	13	43.33
		41-45	5	16.67
		46-50	2	06.67

2	Length of service (In Yrs)	6-10	15	50.00
		11-15	11	36.67
		16-20	4	13.33
3	Educational qualification	P. G	25	83.33
		P. G +	5	16.67
4	No of years in marriage	6-10	16	53.33
		11-15	12	40.00
		16-20	2	06.67
5	Income (In Rupees)	35 000- 75 000	25	83.33
		76 & above 1	5	16.67
		1	21	70.00
6	No. of children	2	8	26.67
		< 2	1	03.33

Table one show the demographic details of the sample. It shows the number of individuals in terms of frequency and percentage of individuals belonging to different categories of demographic aspects. Related to age 33 percentage of individuals belonged to range of 31-35 years, 43 percentage to range of 36-40 years and 16 percentage to range of 46-50 years. In the same manner 50 percentage of individuals had 6-10 years as their service, 36 percentage with 11-15 years of service and only 13 percentage with 16-20 years of experience. 83 percentage had post graduation as their highest degree and 16 percentage of individuals were qualified with additional degree to post graduation. Regarding number of years of marriage 53 percentage were married for 6-10 years, 40 percentage married for 11-15 years and only 6 percentage were married for 16-20 years. Of the sample 70 percentage had only one child, 26 percentage had two children and three percent had more than 2 children.

Table 2 shows the Mean, Standard score and Interpretation on different domains for teachers in colleges and women working as assistant to managers at multinational companies. The standard scores for different domains of physical health, psychological health, social relationship and environmental domain for teachers are 44, 44, 50 and 31 respectively. The standard scores for women working in multinational companies are 25, 31, 25 and 31 respectively. The standard scores indicate that overall the physical health, psychological health, social relationship of teachers and women working in multinational companies being average and below average respectively. The standard scores on environmental domain indicate that the perceived environment is overall below average for both the groups of teachers and women working at multinational companies. Overall on all domain of quality of life is the quality is below average for women working in multinational companies. But the

quality of life is average in the domains of physical health, psychological aspect and social relationships; but below average in the domain of environmental condition for teachers.

Table 2: Showing Mean, Standard score and Interpretation on different domains for teachers in colleges and women working as assistant to managers at multinational companies:

Domain	Groups	Mean	Standard score	Interpretation
Physical health	Teachers	18.2	44	Average
	Multinational	13.3	25	Below
Psychological	Teachers	15.4	44	Average
	Multinational	13.0	31	Below
Social Relationship	Teachers	9.93	50	Average
	Multinational	5.50	25	Below
Environment	Teachers	17.1	31	Below
	Multinational	18.0	31	Below

Table 3: Showing the Mean, SD and ‘t’ Ratio on different domains of quality of life for teachers in colleges and women working as assistant to managers at multinational companies:

Domain	Groups	Mean	Standard deviation	t values
Physical health	Teachers	18.27	2.99	6.23**
	Multinational	13.30	3.17	
Psychological	Teachers	15.40	3.42	2.73*
	Multinational	13.03	3.30	
Social Relationship	Teachers	9.93	2.05	9.76**
	Multinational	5.50	1.41	
Environment	Teachers	17.13	3.38	1.04
	Multinational	18.03	3.30	

P>/* 0.05; P>/**0.01 (Significant at 0.05 and 0.01 level)

Table 3 shows the Mean, SD and ‘t’ Ratio on different domains of quality of life for teachers in colleges and women working as assistant to managers at multinational companies. The mean scores on different domains of physical health, psychological health, social relationship and environmental domain for teachers group are 18.27, 15.40, 9.93 and 17.13 respectively. In the same way the mean scores on different domains for women working at multinational companies was 13.30, 13.03, 5.50 and 18.08 respectively. The mean values and t ratio on the different domains indicates the following: On physical health (t = 6.23; Significant P < .01), psychological health (t = 2.73; Significant P < .05), social relationship domain (t = 9.76;

Significant $P < .01$) the teacher's group has indicated significantly better health than women working in MNC. On environmental domain ($t = 1.04$; Not Significant) there was no significant difference between both the groups indicating no significant difference related to the overall work environment. The analysis indicates that there was a significant difference in quality of life for the domains of physical health, psychological health and social relationship hence the null hypothesis is not accepted. Whereas the analysis also indicates that there was no significant difference in quality of life for the domains of environment and hence the null hypothesis is accepted.

To compare the present study results with the other related studies, it was found that none of the study was related to the present topic of comparing quality of life among different professional women. Studies have utilized quality of life scale and interview methods to study differences in quality of life between working and non working women and between women working in organized and unorganized sectors of works, but not specific to different professions of the organized sector that the women work for. Studies have also been conducted to understand the impact of urbanization on women's life style and burden but again not specific to Bangalore urban background and different professional women. Studies have indicated that employed women were found to be significantly higher on quality of life than nonprofessional women (Iran Asadi Sadeghi Azar, Maryam Heidari, Elahe Asadi Bidmeshki, Forugh Forghani and Nasrollah Basirani, 2008). Though the present study did not attempt to study the difference between working and non working women, it tried to find out if there was difference in quality of life between different working professional women. To compare one or two closely related studies it was found that one of the main objectives of the study conducted by Ramanamma (1979) was to assess the problems of employed women in Indian society and the significance of these problems for the society at large. The study was done in Poona city and its suburbs on a sample of 505 educated women from six different occupations. The study broadly indicated that changes were occurring in the educated and employed women. The present study focused on Bangalore urban working women in different professions and quality life of them. The present study also found that quality of life of urban women was not adequate in many domains. Another study by Lalithadevi (1982) conducted to find out if employment was significantly related to raising a woman's status in society. A sample of 300 working women and 100 non-working women was selected for the interview. The study concluded that employment did enhance women's status in many walks

of life. The present study also shows that the quality of life of urban professional women is better.

Conclusions and implications:

The aim of the study was to analyse the difference in different aspects of quality of life between women working as teachers in colleges and women working as assistant to managers at multinational companies. The results indicate that the quality of life in all domains is not above average or excellent for both teachers and women working in multinational companies. The quality of life in domains of physical health, psychological and social relationships are at average level and environment at below average level for teachers. The quality of life in all domains is at below average level for women working in multinational companies. In comparison to women working in multinational companies the teachers have significantly better physical health, psychologically adequate and adequate social relationships. Urbanisation and multiple demands on women could be one of the reasons for decline in quality of life. Role demand, role ambiguity, gender role expectation and male dominated societal practices could also be one of the reasons for decline in quality of life even among working women specially women working in multinational companies. Further research could help in understanding the reasons for poor quality of life among women working in different sectors.

References

- Amatea, E. S., & Fong, M. L. (1991). *The impact of role stressors and personal resources on the stress experience of professional women. Psychology of Women Quarterly, 15*, 419-430.
- Baruch, G. K., & Barnett, R. C. (1986). *Role quality, multiple role involvement, and psychological well-being in mid-life women. Journal of Personality and Social Psychology, 51*, 578-585.
- Beteille, (1975). *The Role and Status of Working women. In: Shanta B. Astige. (2006). Role and Status of Working women. Anmol Publications Pvt. Ltd. New Delhi, India.*
- Grossman, H. Y., & Chester, N. L. (Eds.). (1990). *The experience and meaning of work in women's lives. Hillsdale, NJ: Erlbaum.*
- Kaila, H. K. (2005). *Women, Work and Family, Rawat Publications.*
- Kapur Promilla. (1094). *The Changing Status of the Working Women in India, Vikas Publishing House, New Delhi.*
- Lalita Devi, U. (1982). *Status and Employment of Women in India, B. R. Publishing Corporation, Delhi.*
- Mishra Sangeeta. (1933). *Status of Women in Changing Urban Hindu Family.*
- Moore, H. A. (1985). *Job satisfaction and women's spheres of work. Sex roles, 13*, 663-678.
- Ramanamma, A. (1979). *Graduate Employed Women in an Urban Setting', Dastane and Dastane, Pune, India.*
- Shanta B. Astige. (2006). *Role and Status of Working women, Anmol Publications Pvt.Ltd. New Delhi, India.*
- Srivastava Vanita (1978) *'Employment of Educated Married Women in India, National Publishing House, New Delhi, India.*
- Walker, L. O., & Best, M. A. (1991). *Well-being of mothers with infant children: A preliminary comparison of employed women and homemakers. Women and Health, 17.*