

Depression and Life Satisfaction among Married & Unmarried Women

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Abstract: *The main objective of the present study is to examine the depression and life satisfaction among married and unmarried women. A sample of 60 women (30 married & 30 unmarried) was drawn randomly from the population. Beck Depression Inventory-II by Aron T Beck and Life Satisfaction Scale by Dr. Q.G. Alam & Dr. Ramji Srivastava were used for data collection. Data was collected by face interview method. Mean, standard deviation and 't' test were the statistics calculated. The results indicate that there is significant difference regarding depression and life satisfaction between married and unmarried woman. Results revealed that unmarried women have higher depression in compare to married women. On life satisfaction scale unmarried women have higher life satisfaction in compare to married women.*

Keywords: *Depression, Life Satisfaction, Married women and Unmarried women.*

I. INTRODUCTION

Depression is a common mental disorder that presents with depressed mood, loss of interest or pleasure, decreased energy, feelings of guilt or low self-worth, disturbed sleep or appetite, and poor concentration. Moreover, depression often comes with symptoms of anxiety. These problems can become chronic or recurrent and lead to substantial impairments in an individual's ability to take care of his or her everyday responsibilities. At its worst, depression can lead to suicide. Almost 1 million lives are lost yearly due to suicide, which translates to 3000 suicide deaths every day. For every person who completes a suicide, 20 or more may attempt to end his or her life (WHO, 2012) [1]. While depression is the leading cause of disability for both males and females, the burden of depression is 50% higher for females than males. In fact, depression is the leading cause of disease burden for women in both high-income and low- and middle-income countries (WHO, 2008) [2]. Research in developing countries suggests that maternal depression may be a risk factor for poor growth in young children (Rahman et al, 2008) [3]. While the global burden of depression poses a substantial public health challenge, both at the social and economic levels as well as the clinical level, there are a number of well-defined and evidence based strategies that can effectively address or combat this burden. For common mental disorders such as depression being managed in primary care settings, the key interventions are treatment with generic antidepressant drugs and brief psychotherapy. Economic analysis has indicated that treating depression in primary care is feasible, affordable and cost-effective.

In conclusion it can be said that it Depression is a mental disorder that is pervasive in the world and affects us all. Unlike many large scale international problems, a solution for depression is at hand. Efficacious and cost-effective treatments are available to improve the health and the lives of the millions of people around the world suffering from depression. On an individual, community and national level, it is time to educate ourselves about depression and support those who are suffering from this mental disorder. There are several forms of depressive disorders. The most common are major depressive disorder and dysthymic disorder.

Life satisfaction is often considered a desirable goal in and of itself stemming from the Aristotelian ethical model, eudaimonism, (from eudaimonia, the Greek word for happiness) where correct actions lead to individual well-being with happiness representing the supreme good (Beutell, 2006) [4]. In a more modern context well-being is believed to be inherent to features such as social relationships, health, work related conditions, personal welfare, liberty, moral values and personality traits. The last decade, however, has seen an increase in cross-cultural studies in which perceptions of national characteristics (e.g. societal, political and economical ones) also received more attention. Unfortunately these kinds of studies usually classifying cultures as individualistic or collectivistic have focused merely on comparing countries and have commonly attributed observed disparities to the cultures prevalent in the countries. Some of these differences, however, may have been the result of regional variation within countries rather than the result of cultural discrepancies between countries (Kashima, Kokubo, Kashima, Boxall, Yamaguchi & Macrae, 2004) [5]. Since psychological well-being is related to performance ratings beyond the effect of composite job satisfaction (Wright & Cropanzano, 2000) [6]. The influence of work related conditions (employment status, the type of employment contract and job satisfaction) on life satisfaction will be studied more extensively. Research concerned with the relationship

between the type of employment contract and life satisfaction has frequently yielded contradictory results. Whereas some scholars argue that measures for psychological well-being have shown insignificant differences or poorer results for permanent employees others suggest that employment contracts with limited duration may constitute an additional source of insecurity and precariousness. Job satisfaction expected to be related to life satisfaction because of the time spent at work by full-time employees and also because for most people, work is a central life activity (Rode, 2004) [7] may operate as an intervening variable in the relationship between the type of employment contract and life satisfaction, thereby being responsible for the inconsistent findings. Gaining greater insight in the multi-faceted relationship between works related conditions and life satisfaction is therefore important and might have major implications for an organization's HRM policies, especially for those of organizations that have to cope with an increasingly competitive environment.

II. OBJECTIVES OF THE STUDY

The main objective of the present study is to determine the depression and life satisfaction among married and unmarried women.

III. HYPOTHESIS OF THE STUDY

There is no significant difference in depression among married and unmarried women.

There is no significant difference in life satisfaction among married and unmarried women.

IV. RESEARCH METHODOLOGY

1.1 Sample

The sample consisted of 60 women (30 married women and 30 unmarried women) from Ghaziabad city. Age range of married women was 26- 50 years and age range of unmarried women was 20-37 years.

Table I
Sample of married and unmarried women

Sr. No	Group	N	Σ
1	Married Women	30	60
2	Unmarried Women	30	

1.2 Tools used

1.1.1 Beck Depression Inventory-II (Aron T. Beck)

The *Beck Depression Inventory- Second Edition* (BDI-II) is a 21 item self report instrument for measuring the severity of depression of aged 13 years and older. Each item is rated on a 4-point scale ranging from 0 to 3. If examinee has made multiple endorsements for an item, the alternative with the highest rating is used. The maximum total score is 63. This inventory has test-retest reliability coefficient ranging from 0.74 to 0.83 on different time intervals and positively correlated with Hamilton depression rating scale with a person r of 0.71.

1.1.2 Life Satisfaction Scale (Dr. Q.G. Alam & Dr. Ramji Srivastava)

The life satisfaction scale comprises of sixty items related to six areas of life viz. health satisfaction, personal satisfaction, economic satisfaction, marital satisfaction and job satisfaction. The responses are to be given in Yes/No. Yes responses indicate satisfaction whereas No indicate dissatisfaction. There is no time limit yet it takes about 20 minutes to complete the test. It is a paper-pencil questionnaire which can be administered on an individual or a group of individuals. The scale has sixty items. Every item is to be responded either in Yes or No. There is no other alternative. Every 'Yes' response is assigned 1 mark and sum of marks is obtained for the scale. Test-retest reliability was computed after a lapse of 6 weeks. The obtained quotient was .84 and validity of the scale was obtained by correlating it with Saxena's Adjustment Inventory and Srivastava Adjustment Inventory. The quotient obtained was .74 and .84 respectively.

1.3 Procedure of Data Collection

Data collection was done using random sampling. Purpose of the study was made clear to the participants. The inventories were distributed to participants. The general instructions were given to participants to complete the inventories. Help was provided to the participants in case they found any of the items difficult to comprehend. The inventory was also translated in Hindi language. Data was collected by face to face interview method. Filled questionnaires were collected from participants for statistical analysis of data.

1.4 Statistical Analysis

In the present study Mean, S.D and t-test was applied for statistical analysis of data.

V. ANALYSIS AND RESULTS

The main objective of present study was examined of depression and life satisfaction among married and unmarried women. The 't' test method was used to analysis data. Results discussions of present study are as under:

Table I
Mean, SD and 't' value of depression among Married and Unmarried women

S. No.	Group	N	Mean	S.D.	t	Sig.
1	Married women	30	14.86	5.55	3.44	S
2	Unmarried women	30	20.13	6.27		

The t value is significant at 0.05 Level

The results from table II show that there is significant difference between married and unmarried woman for depression. The unmarried woman received higher mean score 20.13 as compared to the married woman 14.86. The standard deviation score of married woman received 5.55 and the unmarried woman received 6.27. So we can say that unmarried woman have higher depression than the married woman. The 't' value of depression is 3.44. There is significant difference between married and unmarried woman. It means hypothesis is rejected. In simple terms it can be concluded that depression of married woman is lesser than unmarried woman.

Table II
Mean, SD and 't' value of life satisfaction among Married and Unmarried women

S. No.	Group	N	Mean	S.D.	t	Sig.
1	Married women	30	36.76	5.49	5.81	S
2	Unmarried women	30	44.56	3.94		

The t value is significant at 0.05 Level

The results from table III show that there is significant difference between married and unmarried woman for life satisfaction. The unmarried woman received higher mean score 44.56 as compared to the married woman 36.76. The standard deviation score of married woman received 5.49 and the unmarried woman received 3.94. So we can say that unmarried woman have higher life satisfaction than the married woman. The 't' value of life satisfaction is 5.81. There is significant difference between married and unmarried woman. It means hypothesis is rejected. In simple terms it can be concluded that life satisfaction of married woman is lesser than unmarried woman.

VI. DISCUSSION AND CONCLUSION

The main conclusion emerged from the analysis of data is that there is a significant difference of depression of married and unmarried woman. In simple terms it can be concluded that depression of married woman is lower than unmarried woman. Life satisfaction of married women is higher than unmarried women. Ronald C. Kessler and Marilyn Essex (1982) [8] studied the association between marital status and depression. He found that married people have comparatively low depression rates because they are, for several reasons, emotionally less damaged by stressful experiences than are non married people. Ito Y., Sagara J. and Ikeda M. (2004) [9] investigated mental health of married people in relation to satisfaction in marital relationship, occupational life and household income. The association was strongest for those who were in child-rearing years. Satisfaction in workplace was as important as satisfaction in marital relationship for women who were employed full-time. Walker R., Isherwood L., Burton C., Kitwe-Magambo K. and Luszcz M. (2013) [10] found that marital satisfaction is important for health and well-being, although determinants of satisfaction among older couples are unclear. Much of the marital literature has focused on the role of the spouse, in isolation from satisfaction with broader social relationships.

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