Development of strategy for lowering post COVID-19 impact on working women health

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Abstract---A questionnaire evaluating subjective level of work anxiety as well as physical wellness through the earlier years was accomplished through 400 women in Karnataka. Overall health was split up right into two types: physical as well as other psychological problems. Samples, coordinated for age as well as marital status, were determined: women in high-paying status who are married (N = 190) and women in low-paying status and as well are single (N = 210). Participants responded a Post-Covid-19 survey (PC19). The hypothesis of a positive association amongst job stress as well as marital status was terminated. The forecasted association organized for psychological distress. Subjective anxiety, PC19 score, as well as life fulfillment consisted of 42% of the deviation and job anxiety consisted of 58% of the deviation. Consequently, PC19 a pertaining to job anxiety as well as mental distress, their efforts was impartial of each other. The variants of stress accomplished in professional functioning as an educational professors, teachers, managerial, as well as, clerical jobs are observed much higher that includes psychological health related problems which were led to medical challenges just like diabetes, heart diseases as well as, thyroid dysfunction.

Keywords---women stress, health issues, psychological health, physical health.

Introduction

Women working outside the home have been the focus of considerable attention in the last decade as a growing segment of our labor force. One gap commonly recognized by researchers is the void in our understanding of the working woman's experience of stress [1, 2]. With some notable exceptions, little is known regarding the stressors encountered, symptoms exhibited, and organizational efforts to help manage stress. The importance of this line of investigation is...
highlighted by the growing percentage of women in the work force \[3,4\]. The problem addressed herein deals with work stress, which has been defined as the general, patterned, unconscious mobilization of the individual’s energy when confronted with any work demand. Within the overarching theme of work stress, in this study, the three specific stressors of concern are politics, lack of career progress, and work/home conflicts. The relationship between these stressors and health outcomes is of central importance \[5\]. Two health outcomes are also examined in this study: job satisfaction, a psychological health indicator, and distress symptoms, a psycho physiological indicator. Finally, there are organizational provisions designed to help women cope with stress at work. Flexible work hours, staff support, and formal planning activities are a few such provisions. This study included a constellation of organizational resources, and examined the role of these resources in the relationship between working women’s stressors and health outcomes \[6\].

Unequal distribution of and access to resources such as power, education, income, goods, and services influence social inequalities in health between countries and between groups of people within countries. In adult life, many of the social determinants of health are connected to working life. Both employment conditions and adverse work environments contribute to social inequalities in health, and these conditions are unequally distributed across occupational classes and women and men in working populations. Labor markets are clearly segregated by gender meaning that women and men usually work in different industrial sectors with different types of work environments. More women than men have a low occupational class and the share of work stress is usually higher in women’s jobs. Yet, our knowledge of associations of work related factors and the risk of stroke is fairly limited \[7\].

Traditionally, women have been looked upon as nurturers and caregivers and assigned all roles related to maintaining and managing a family. Men perceive themselves as breadwinners and society also expects them to perform work roles to earn and support the family. However, the nature of work-force has been changing and the percentage of men as wage earners and women as housewives has been rapidly declining. In urban India, the percentage of dual-earner couples is gradually increasing and for most women and men today, their work environment and the family have become the two important institutions in life. Changes in the workforce are accompanied by changes in values, creating a new emphasis on the balance between work-life and family life \[8\].

**Literature Review**

Job strain is defined as high job demands combined with low job control. Psychological job demands and job control, the components of job strain, were assessed using Karasek’s Job Content Questionnaire. Psychological job demands are measured with five items, and job control with nine items. We calculated the mean score for each scale after applying reverse coding to make higher scores indicate stronger endorsement for experiencing job demands and job control \[9\]. Emotional mental disturbances occur more often in adult women due to the influence of the estrogen hormone. Working women tend to have more burdens than women who do not work. Mental emotional disturbance in women,
such as stress and anxiety, can interfere with their productivity and lead to depression [10]. Stress is a mental, emotional as well as a physiological response to perceived danger, which results in various physiological changes in the body, activating the sympathetic nervous system to get the body ready to fight flight or freeze. Stress is the underlying cause of many diseases. Stress can lead to not only mental but emotional as well as physiological distress. It is something most people; of any age, caste or creed, have experienced in life, from time to time, but chronic stress or being in a constant state of stress can result in a decline in the quality of life and overall well-being of an individual. It can affect ones performance in school or at job; it can negatively affect ones relationships and friendships and can also lead development of various psychosomatic diseases and chronic illnesses. Chronic stress also plays a major role in weakening the body’s immunity and can lead to degeneration of tissue, and autoimmune hypersensitivities, etc [11]. In today’s scenario many mental health problems are prevailing e.g. anxiety disorders, stress disorders, psychotic disorder. Many evidences exist that shows that “mindfulness has the positive results on the mental and physical well being conditions of a person”. Neuroscience also says that mindfulness also responsible for the changes in the structure and brain imaging which further improves in thoughts and feelings [12]. Crises can weigh heavily on individuals' mental health. COVID-19 is a crisis that has shaken humanity, plunging it into a great wave of fear, ambiguity and uncertainty, due to its novelty and rapid spread, as well as lethality. Mental health disparities between women and men have widened as a result of this pandemic. Stress factors have multiplied, especially among working women, making them more psychologically vulnerable than they were before this pandemic and easy prey to psychological distress. Also, the sweeping physiological effects of COVID-19 infections in 2020 and 2021, the psychosocial impacts of lockdowns, social distancing, and the associated disruptions to daily life have brought on a simultaneous mental health crisis, particularly among many working mothers who are disproportionately balancing childcare, virtual schooling, and employment vulnerability [13,14]. However, there are also studies underpinning our results that did not find any association of socio-demographic data with return to work, such as sex, [15, 16] age, [17] marital status [18] and education. The association between return to work and clinical parameters such as tumor status and metastases coincides with previous literature suggesting differing return to work rates depending on the stage of cancer [19].

Research Methodology

The key objective of the proposed research is to identify the reasons for increasing stress levels in a post-covid-19 scenario where we analyzed that fear is one added factor besides former work-life balance challenges. Following hypotheses are tested for sample size of 400 which is calculated with Yaro Yamane’s strategy. The respondents selected for study are female University professionals, administrative and managerial experts as well as medical professionals from Karnataka State, India geographical location. Following hypotheses testing is conducted to validate the reasons for various diseases prone due to sires.

H0: Stress is not core reason for health degradation of working women.
H1: Stress is not core reason for health degradation of working women.
H0: Level of stress is not depends upon the marital status of women and job profile.
H1: Level of stress is depends upon the marital status of women and job profile.

As per sample size calculation, we identified the percentage of various diseases based on post covid-19 data accumulated from respondents.

Table 1: Health analysis for respondents

<table>
<thead>
<tr>
<th></th>
<th>Married Working Women (age &gt;40 years)</th>
<th>Single working women (age &lt;40 years)</th>
<th>Married non-working women (age &gt;40 years)</th>
<th>Single non-working women (age &lt;40 years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes</td>
<td>52</td>
<td>16</td>
<td>12</td>
<td>7</td>
</tr>
<tr>
<td>Thyroid</td>
<td>31</td>
<td>10</td>
<td>32</td>
<td>9</td>
</tr>
<tr>
<td>Heart Diseases</td>
<td>27</td>
<td>5</td>
<td>46</td>
<td>3</td>
</tr>
<tr>
<td>No Diseases</td>
<td>80</td>
<td>179</td>
<td>100</td>
<td>191</td>
</tr>
</tbody>
</table>

From above table 1 it is depicted that, married and working women facing more health issues in post-covid-19 scenario where as it is summarized that their stress levels are more in job and family balance front. Following flowchart represents the methodology applied for proposed research.

Fig. 1: Proposed Research Methodology

Specific to female gender, as per our pilot study females are more stressed with many elements as raising children, elderly care, professional achievements, fear of pandemic re-entry, fear about job uncertainty, divorce leading situations and all
these factors are directly causing mental distress which eventually leading to physical and mental health issues like diabetes, thyroid, heart diseases etc. The work from home culture and frequent lockdowns also impacted body muscle health and blood circulation which caused issues like varicose vein disease.

**Result and Discussion**

A hypothesis testing is conducted using respondent’s responses and IBM SPSS software. The reliability test was conducted for 10% of total sample size. As per reliability test, the stress level of women leads to numerous health issues.

H0: Stress is not core reason for health degradation of working women.
H1: Stress is not core reason for health degradation of working women.

<table>
<thead>
<tr>
<th></th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>1</td>
<td>2</td>
<td>2.011</td>
<td>1.156</td>
<td>0.007</td>
</tr>
<tr>
<td>Within Groups</td>
<td>99</td>
<td>398</td>
<td>1.147</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>400</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The result of the significant level is 0.007 hence the null hypothesis is rejected.

H0: Level of stress is not depends upon the marital status of women and job profile.
H1: Level of stress is depends upon the marital status of women and job profile.

<table>
<thead>
<tr>
<th></th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>5</td>
<td>4</td>
<td>2.712</td>
<td>1.019</td>
<td>0.003</td>
</tr>
<tr>
<td>Within Groups</td>
<td>95</td>
<td>396</td>
<td>1.178</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>400</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

The result of the significant level is 0.005 hence the null hypothesis is rejected.

As per hypothesis testing conducted, there is a need of managing stress levels of women. The working women facing more difficulties while managing household responsibilities as well as the professional routines. It is advised that work culture can be modified as a post-covid-19 scenario to manage and utilize the time for steady progress.

**Conclusion**

This paper reveals the many issues causing due to the work-life balance. Women must get the flexible work time and most importantly, meditation and yoga can boost the breathing pattern which can control the blood pressure and so many heart diseases can be prevented up to some extent. Apart from this many eating habits can be controlled by Ayurvedic recipes where Indian traditional food can be a subtle option which can prevent diabetes. The support from family is varying but that can be managed by responsibility modeling strategy. The future study can be in the direction of responsibility modeling which can lead to lower the stress level and improve the psychological and physical health.
References