

Mental Health and Marital Adjustment among Working and Non-Working Mothers with Preschool Children

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The purpose of this research was to compare mental health as well as marital adjustment of unemployed and employed mothers with preschool-aged children. Sixty participants (30 non-working and working) with a mean age of 35.8 years have been chosen from Manipur through consecutive sampling for the study. Data was gathered using Mental Health Inventory, established by Jagadish and Srivastava, and MAQ (Marital Adjustment Questionnaire), established by Pramod Kumar and Kanchana Rohatgi. SD, Mean, as well as t-tests, have been used for data analysis and hypothesis testing. The Pearson Correlation Coefficient was utilized to examine the relationship between both groups' marital adjustment as well as mental health. Data analysis was done using SPSS-25.0 Version software. Results revealed that there is a significant difference between working and non-working mothers in their mental health but no significant difference in marital adjustment. Also, there is no significant correlation between mental health and marital adjustment among working and non-working mothers of Manipur.

Keywords: Mental health, Marital Adjustment, working, non-working mothers

For centuries, Indian society has been deeply rooted in a patriarchal framework, where rigid gender norms have reigned supreme, often confining women to the private realm of the household, limiting their access to the public sphere and the world beyond (Agnihotri, 2010). However, in recent decades, there has been a gradual yet significant shift in the role and status of Indian women. In the Indian context, including the northeastern states, women traditionally assumed the role of homemakers. However, in recent decades, factors such as education, heightened awareness, societal shifts, and rising living costs have prompted more women to pursue careers. Due to the long history of women from lower social classes working for pay in India, there has been a noticeable increase in several women occupying various types of jobs in bustling areas of main Indian cities. Nonetheless, the complete scenario is more intricate, with various complex factors

influencing the evolution of women's status in the Indian workforce over time. The evolving demands appear to significantly impact mental health of both employed as well as unemployed women.

The World Health Organization recognizes the importance of mental health as a component of overall health (Srivastava, 2016). The World Health Organization defines mental health as "a state of well-being in which the individual recognizes his or her abilities, can manage the typical stresses of life, can work productively and fruitfully, and can contribute to his or her community" (Srivastava, 2023). The complexity of mental health is highlighted by this broad definition, which includes both the absence of mental disease and the presence of positive functioning and well-being (Keyes, 2013) (Devi et al., 2018). Mental health is the ability to adequately adjust to one's environment on the level of reality, both

socially and emotionally. In other words, it is the ability to face and accept life's reality (Bhatia 1982).

Mentally healthy individuals exhibit several forms of balance, harmony, and inner relatedness. In today's fast-paced and demanding lifestyle, the delicate equilibrium between personal and professional aspects is being disrupted, adversely impacting individuals' ability to adjust (Jes & Majini, 2023). Strong mental health enables a woman to manage a range of household responsibilities, better understand and try to solve issues, make plans for the future, and adapt to other people. Over past 20 years, there has been a lot of interest in relationship among depression as well as women. As more women join the workforce, they face pressure from competing expectations and multiple roles, in addition to aspects of the workplace that are similar to those experienced by men (Nelson and Burke, 2000; Chang, 2000).

The demands of women's personal and professional lives might present a distinct set of difficulties. Striking a balance between family responsibilities, professional goals, and social expectations can lead to a dynamic environment where stress permeates daily life. To create a more encouraging and fairer workplace, it is essential to recognize and address the unique stressors that working women encounter (Meera, 2019). Stressors can still have an impact on unemployed women, even though they may spend more time parenting their kids. The difficulties could include social expectations regarding traditional gender roles, financial worries, or feelings of loneliness. Non-working mothers might face pressures related to the perception of their role as primarily centred around the home, potentially leading to a different form of stress (Uddin, 2021).

"The state in which there is an overall feeling in husband and wife of happiness, satisfaction with their marriage and with each other" is what Thomas (1977) defines as marital adjustment. When couple gets married, they typically have high expectations of one another. While familial and occupational concerns have historically been important, societal transformations within these institutions have rendered them more prominent for adults in numerous cultures. Marriage functions as a societal safety net, ensuring the existence and prosperity of society by providing security for various needs and concerns. Because more women are working in the workplace these days, number of female employees has elevated. Although it helps families by providing a second source of income, it also has some detrimental effects on a couple's marital life. Due to shared responsibilities for family care, finances, and child rearing, it causes a high degree of maladjustment in the relationship.

According to Grolnick et al. (1994), the family environment is a learning environment that has a significant impact on the child. An environment can be harmful and infectious. By establishing strong bonds, modeling positive behaviors, encouraging a healthy lifestyle, and facilitating effective communication, the family environment can be a potent source of support for development of women who do not work.

In the field of gender studies, there has been a lot of interest in the connection among psychological health, marital adjustment, and work status. Prior studies on the connection among wife employment and stress, life satisfaction, and marital adjustment have yielded mixed findings; some indicate a negative relationship, while others report a positive one.

Working women have been found to experience high levels of stress, poor marital adjustment, as well as low life satisfaction in

some studies, while unemployed women have been found to experience similar levels of stress, poor marital adjustment, as well as low life satisfaction in other research. According to Suri and Singh's research, employed and unemployed women's psychological states and marital adjustment differ significantly (Bufquin et al., 2021). According to Sharma, R. A. (2019), working women are more independent, natural, as well as healthy than unemployed women, while unemployed women are more reliant and compulsive.

Research indicates that married women who are not employed exhibit superior marital adjustment compared to their employed counterparts. This indicates that working women are unable to entirely concentrate on their families and meet the needs of their members. Conversely, married women who are not employed have increased availability for domestic responsibilities and experience fulfilling marital lives. Research on mental health of employed as well as unemployed women has shown that employed married women struggle to adapt to their married lives because they have multiple responsibilities at once. Women who are not employed also face significant obstacles from both family members and friends, which can lead to severe depression.

P. V. Lewkan's book, *Mental Hygiene in Public Health*, defines a mentally healthy person as one who is content with their life, coexists harmoniously with their neighbors, nurtures their children into healthy adults, and possesses the vitality to contribute positively to society after fulfilling these fundamental duties. An individual with sound mental health can adapt to their environment as well as strive for personal, familial, and societal enhancement. Adjustment is the primary attribute of mental health. The more successfully an individual adjusts, the better their mental health will be. There will be more conflict and less adjustment if mental health

is worse. In terms of marital adjustment, we could define it as a condition in which a husband as well as wife feel generally content and happy in their union.

Birth, marriage, career, and death are significant turning points in everyone's life, but particularly for women. Regarding marriage as an institution, we can state that it significantly alters the lives of all people, but particularly those of women. They must undergo numerous transformations. After marriage, women must shoulder the weight of two roles. They have a responsibility to take equal care of their parents-in-law as well as their biological parents. Serving as a stabilizing influence and addressing all domestic matters with exceptional maturity necessitates considerable mental effort from women. Happiness, well-being, and mental and physical health are all impacted by marital quality. Stress and depression are two health issues that are predicted by poor marital quality and can further impair social and personal life quality. Even one spouse's mental health affects the other spouse's health and the quality of their relationship.

In Manipur, research on mental health and its relationship with marital adjustment is still in the embryonic phase. Currently, no research has been conducted on the marital adjustment of employed and unemployed mothers with preschool-aged children in the state of Manipur. As a result of industrialization and globalization, women are stepping out of their traditional roles and working in a variety of sectors, involving academia, business, the public and private sectors, industrial or organizational units, and many more. The constant demands of their employment and the tensions between work and home life have made working women more susceptible to a variety of mental health problems. Even women who do not work always have to be on the lookout to meet their family members' needs and wants. Their mental health is impacted since they

frequently repress their impulses and receive little recognition for the love and devotion they give to their family members. The present research compares marital adjustment and mental health of employed as well as unemployed mothers in Manipur who have preschool-aged children.

Objectives

- To compare overall mental health among non-working and working mothers with preschool children.
- To compare marital adjustment between non-working and working mothers with preschool children.
- To find correlation among marital adjustment and mental health.

Hypotheses

- There is significant difference between working and non-working mothers on mental health.
- There is significant difference between working and non-working mothers on marital adjustment.
- There is correlation between mental health and marital adjustment.

Method

Sample

For the purpose of gathering data based on availability, the sample comprises 30 employed and unemployed individuals from Manipur who have preschool-aged children among ages of 25 - 45. Since components to be included were based on employed and unemployed mothers, consecutive sampling technique will be used.

Tools used

Mental health inventory: A mental health inventory created by Jagdish and Srivastava (1983) has been utilized to evaluate mental health status of employed and unemployed women. Assessment evaluates an

individual's mental health across 6 dimensions: positive self-evaluation, environmental mastery, personality integration, perception of reality, autonomy, and group-oriented attitude. This four-point scale includes 54 statements with 4 possible answers: always, most of the time, sometimes, and never. Thirty-one of the 54 statements are negative, and 23 are affirmative. While negative statements are scored in reverse order, positive statements receive scores of 4, 3, 2, 1. Score varies from fifty-four to 216. Increased scores on Mental Health Inventory indicate enhanced mental health, and vice versa.

Marital Adjustment Questionnaire: Employed as well as unemployed women's marital adjustment has been assessed using Pramod Kumar and Kanchana Rohatgi's (1985) Marital Adjustment Questionnaire (MAQ). In its final form, MAQ has twenty-five highly discriminating "Yes-No" items, 22 of which are positive and 3 of which are negative. Three areas are examined by the questionnaire: sexual, social, and emotional. With the exception of items 4, 10, and 19, where the opposite is true, a "Yes" response receives a score of 1. The husband's or wife's marital adjustment score is determined by adding these values. Given that each response that contributes to marital adjustment is assigned a score, the husband or wife's marital adjustment would be higher if the total score were higher.

Procedure

All participants were contacted personally and given a briefing about the aim of the present investigation. Instructions were provided based on the questionnaire used. Participants were assured that their information would be kept confidential and used solely for research purposes. After the briefing, the scales were administered, and data were collected through a Google Form. A review of the literature was conducted to

draw points relevant to the current context. The sample was selected through consecutive sampling. All working and non-working mothers between the ages of 25 and 45 years, with pre-school children, were briefed and informed about the study. A Google Form was sent to them for completion, and their essential demographic details were recorded. Following data collection, the scores were entered into SPSS. For statistical procedures, data on socio-demographic variables, mental health status, marital adjustment, depression, anxiety, and stress were coded. Numerical codes were assigned for each category of a specific variable. Codes of 1, 2, 3, and 4 were assigned according to the range for each variable in the socio-demographic data. Similarly, codes 1, 2, 3, and 4 were assigned for the Mental Health Inventory, and codes 1 and 2 were assigned for the Marital Adjustment Inventory. The scores obtained by each respondent were calculated. The

total scores were further processed using SPSS, and suitable statistical tests were performed on each sample for the results. The level of significance was fixed at 0.05 ($p < 0.05$).

Data Analysis

Data analysis has been done using SPSS-25.0 Version software (IBM, Armony, NY) using standard statistical methods such as descriptive statistics for frequency, percentage, and correlation. Means of the two groups (non-working and working mothers) have been compared using independent sample t-tests once the data have been determined to be normal.

Ethical considerations

Participants were informed about the purpose and nature of the study. Informed consent was obtained. Participants had the right to refuse to participate in the study at any point in time. Confidentiality was maintained

Results

Table 1. Sociodemographic Characteristics of the Participants

Sample Characteristics	Non-working		Working		Full sample	
	N	%	N	%	N	%
Qualification						
10-12th passed	11	36.7	5	16.7	16	26.6
Graduate	8	26.7	11	36.7	19	31.7
Postgraduate- Ph.D.	11	36.6	14	46.6	25	41.6
Religion						
Hinduism	13	43.3	16	53.3	29	48.3
Christianity	12	40.0	10	33.3	22	36.7
Muslim	3	10.0	4	13.3	7	11.7
Others	2	6.7	-	-	2	3.3
No. of children						
1	16	53.3	19	63.3	35	58.3
2 and above	14	63.6	11	36.7	25	41.7

Note. N = 60 ($n = 30$ for each condition). Participants were on average 35.8 years old ($SD = 4.877$)

Table 2. Mean comparison of Working and Non-working mothers on the dimensions of Mental Health Inventory

Variables	Non-working		Working		<i>t</i> (58)	<i>P</i>	<i>Cohen's d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
PSE	25.37	2.89	27.60	2.89	-2.99	.004	0.77
POR	21.10	2.06	21.27	1.70	-.34	.734	0.09
IOP	30.57	2.75	31.83	2.40	-1.90	.063	0.49
ATN	15.73	1.94	16.70	1.91	-1.94	.057	0.50
GOA	26.07	3.88	28.83	3.54	-2.88	.006	0.74
EVM	24.43	2.61	26.43	3.01	-2.75	.008	0.71
MHI(Total)	143.27	7.74	152.67	9.17	-4.29	0.00	1.11

Note. POR= Perception of Reality, IOP=Integration of Personality, ATN= Autonomy, EVM= Environmental Mastery, GOA= Group Oriented Attitude, MHI= Mental Health Inventory, PSE= Positive Self Evaluation

Table 2 reveals a significant difference between the average mental health among non-working mothers ($M=143.27$, $SD=7.74$) and working mothers ($M=152.67$, $SD= 9.17$); $t(58) = -4.288$, $p < 0.05$. The effect size is strong (Cohen's $d = 1.11$).

There is also a significant difference between the dimensions such as Positive Self-Evaluation among non-working mothers ($M=25.37$, $SD=2.89$) and working mothers

($M=27.60$, $SD=2.89$); $t(58) = -2.99$, $p = .004$ with the Cohen's d value 0.77, indicating moderate effect size, Group Oriented Attitude among non-working ($M=26.07$, $SD=3.88$) and working ($M=28.83$, $SD=3.54$); $t(58) = -2.882$, $p = .006$ with moderate effect size (Cohen's d value=0.74) and Environmental Mastery among non-working ($M=24.43$, $SD=2.61$) and working ($M=26.43$, $SD=3.01$); $t(58) = -2.478$, $p = .008$ with moderate effect size (Cohen's d value=0.71)

Table 3. Mean comparison of Non-working and Working mothers on Marital Adjustment Questionnaire

Variables	Non-working		Working		<i>t</i> (58)	<i>P</i>	<i>Cohen's d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
MAQ	19.37	2.09	19.50	1.89	-.26	.797	.07

Note. MAQ=Marital Adjustment Questionnaire

Table 3 reveals that there is no significant difference in marital adjustment between non-working ($M=19.37$, $SD=2.09$) and working mothers ($M=19.50$, $SD=1.89$); $t(58) = -.259$, $p = .797$. The effect size is weak (Cohen's $d = .07$)

Table 4. Means, standard deviations, and correlations

Variable	N	M	SD	1	2
MHI	60	147.97	9.66	-	.129
MAQ	60	19.43	1.98	.129	-

To evaluate the connection among marital adjustment and mental health, a Pearson correlation coefficient was calculated. The 2 variables do not significantly correlate, as shown in Table 4 ($r(58) = .13, p = .328$).

Discussion

The first objective was to compare the general mental health of employed and unemployed mothers with preschool-aged children. The independent sample t-test results showed significance at 0.05 level, with a numerical value of $t(58) = -4.288, p < 0.05$. Therefore, the hypothesis that mothers who are employed as well as unemployed mothers have significantly distinct mental health is considered to be correct. Results are consistent with similar research by Raut and Cooper (1997), which found significant differences in mental health among unemployed and employed outcomes, as well as the study conducted by R.V. Mankani (2012) on 90 employed and unemployed women, which found that employed women have healthier mental health than housewives. Similarly, the results corroborate the study conducted in Jammu, India, by Prabhjyot Kour (2020), which examined the stress and mental health of employed and unemployed women. Fifty unemployed and employed women made up the sample. Findings indicated that employed women experience less stress as well as have better mental health than unemployed women. A study comparing the mental health and occupational adjustment of professional or non-professional women was carried out in Punjab, India, by Sharma (2019). The results indicated that professional women outperformed non-

professional women in terms of mental health and occupational adaptation.

Research conducted by Mohammad Raza Tammanaeifar (2019) on mental health, as well as life satisfaction among employed as well as unemployed women in Iran where outcome indicated that working women have good mental health as well as greater life satisfaction compared to unemployed women and research conducted by Vaghela (2014) where mental health of employed as well as unemployed women in Ahmadabad, India has been compared where the result revealed that employed women have healthier mental health than unemployed women, also supports findings of present study.

This study indicates that several factors, involving extreme isolation and a great deal of mental pressure to raise children and maintain positive relationships with in-laws and their relatives, make non-working women's poor mental health worse than that of employed women. The lack of control over decision-making that comes with being financially dependent on their husbands or in-laws and spending a lot of time at home negatively impacts the mental health of non-working women. On the other hand, working women are financially independent and capable of making their own choices. This is crucial to keeping one's mental health in excellent shape. Furthermore, nobody still values the household responsibilities performed by housewives in the twenty-first century. It is still seen as one of their responsibilities. As a result, it causes a lot of stress and unhappiness among unemployed women. On occasion, unemployed women may become the target of their husbands' or in-laws' animosity and hostility, which may turn violent and negatively impact their mental well-being.

The second objective was to compare marital adjustment among working and non-working mothers with preschool children. The

mean scores of marital adjustments of non-working women and working women were 19.37 and 19.50 respectively with an S.D. of 2.09 and 1.89. The calculated t-value was -2.6 with df (58) which is insignificant at 0.05 and 0.01

level. This means there is no significant difference in the mean value and the marital adjustment of working and non-working women. Therefore, the hypothesis that there is a significant difference between working and non-working women in marital adjustment is rejected. The finding therefore indicates that there is no significant difference between working and nonworking women in terms of marital adjustment. The findings of this study are supported by Jamabo et. al. who found that there is no significant difference in marital adjustment between working and non-working women. Therefore, it can be concluded that both working and non-working women have equal and favourable marital adjustment because of mutual trust, improved understanding and sharing, and respect for one another. On the other hand, other contradictory results have indicated that working women have a difficult time adjusting. Some studies, for instance, hold the opinion that, in comparison to women who do not work, the lives of working women are perceived as difficult. Working women can still advance in their careers and are just as capable of handling all family chores as non-working women. Good marital adjustment is a joint responsibility of the husband and wife. Whether a wife's achievement is working or not, her marital adjustment will undoubtedly be better if her husband is encouraging, loving, caring, and most significantly, proud of it. The household structure in which working and non-working women reside may also have little bearing on how well they adjust to marriage. While working women may fully concentrate on their employment and have a better relationship with their spouses, non-working women are supported by their

in-laws in taking care of the home and children.

Lastly, the third objective was to find the correlation between mental health and marital adjustment. Table 4 reveals that there is no significant correlation between the two variables, $r(58) = .13, p = .328$. Hence the hypothesis that there will be a correlation between mental health and marital adjustment is rejected indicating that there is no significant correlation between mental health and marital adjustment. This finding contradicts a prior study conducted in Canada, which reported that marital adjustment was associated with mental health controlling for quality of relationships with relatives and friends (Whisman, Sheldon, & Goering, 2000) and also contradicts studies by Dehle and Weiss (1998) which found that lower initial marital quality predicted greater subsequent depression and also initially higher depression scores predicted greater declines in marital quality three months later. Anxiety disorder is associated with poorer marital quality (McLeod, 1994).

Limitations

- The size of the sample can be larger
- The study can include further analysis of the dimensions for detailed findings
- No random sampling may impact the generalizability of the findings

Implications

The research's conclusions could be beneficial in establishing various initiatives and regulations to raise awareness of multiple issues affecting women. The information obtained from the study may be useful to the policymakers to plan some positive aspects, particularly related to women's empowerment

Conclusion

Mental health of employed mothers differs significantly from that of unemployed

mothers. Nonetheless, there is no observable distinction among employed and unemployed mothers regarding marital adjustment. Mental health and marital adjustment do not significantly correlate. Therefore, the primary factors that contribute to employed and unemployed women adjusting to marriages equally and favorably are mutual trust, improved understanding and sharing, and respect for one another. Consequently, mutual understanding, trust, love, and respect can serve as the foundational elements of a successful and equitable marital adjustment for both employed and unemployed women. Both employed and unemployed women may discover that their familial structure aids in a more seamless transition to matrimony. They can adjust to marriage more easily if they live with their supportive and loving in-laws, who can also assist them with housework and child care.

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