

## **GENERAL WELL-BEING AND QUALITY OF LIFE AMONG WOMEN**

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### **Abstract:**

Aim of the present study was to assess the general well-being and quality of life among women. It was hypothesized that -  $H_{01}$ . There will be no significant difference in General Well-Being among home makers and working women.

$H_{02}$ . There will be no significant difference in quality of life among home makers and working women.  $H_3$ . There will be a significant relationship between general well-being and quality of life among working women. Data was collected from 160 women (80 home makers and 80 working women) between the age of 20 to 45 years were involved in the present study. Statistical analysis such as mean, standard deviation, 't' test and correlation were applied to test the hypotheses. Findings reveal that there is no significant difference in psychological morbidity among hostel students.

**Key Words:** General well-being and Quality of life

### **Introduction:**

#### **General Well-Being**

Preoccupation with psychological ill health seems to have given a way to understand psychological well-being towards the end of the 20th century. Good physical health does not necessarily mean the psychological well-being.

General well-being is defined as the subjective feeling of contentment, happiness, satisfaction with the life's experience and of one's role in the world of work, sense of achievement, utility, belongingness, dissatisfaction or worry etc., It is difficult to evaluate these objectively. Hence, emphasis is on the subjective well-being. Many attempts have been made in the past to measure the positive mental health.

In 1970, Dr. H. Dupuy, a psychology advisor, division of health examination statistics, USA, developed a general well-being schedule. The original scale has 25 items on a 6 point scale, measuring several aspects of adjustment indicating the quality of life, mental health status etc., Dr. Santhosh K. Verma and Ms. Amita Verma (1989) reconstructed this test to suit Indian conditions. The test is 20 items scale called PGI General Well-Being Scale. Thus, the scale is considered to be useful in a variety of research and applied settings.

#### **Quality of life**

Quality of life refers to an individual's overall well-being and satisfaction with their life circumstances. It encompasses various aspects of life, including physical health, mental health and emotional well-being, social relationships and overall fulfillment. Quality of life is a subjective measure and can vary from person to person based on their values, goals and personal circumstances.

The concept of Quality of life has gained significance in the fields such as health care, economics and social sciences as it provides a comprehensive understanding of individual's experiences and helps to guide the development of policies and interventions aimed at improved people's life.

Improving Quality of life involves addressing factors such as access to quality health care, education, employment opportunities having transportation and social support. It also encompasses promoting personal growth, autonomy and a sense of purpose in life.

Quality of life is not solely determined by material wealth or external factors such as person values, social connections and mental well-being. Thus, efforts to enhance quality of life often require a holistic approach that considers both external and internal factors affecting individual's lives.

**Aim:**

To assess the general well-being and quality of life among women.

**Objectives:**

1. To study the difference in the general well-being among Home Makers and Working Women.
2. To study the difference in the quality of life among Home Makers and Working Women.
3. To examine the relationship between the general well-being and the quality of life among women.

**Hypotheses**

Ho<sub>1</sub>. There will be no significant difference in General Well-Being among Home Makers and

Working Women.

Ho<sub>2</sub>. There will be no significant difference in Quality of Life among Home Makers and Working Women.

H<sub>3</sub>. There will be a significant relationship between General Well-Being and Quality of Life among Working Women.

**Variables**

**Independent Variable:** Women

1. Home Makers
2. Working Women)

**Dependent Variable:** 1. General Well-Being  
2. Quality of Life

**Research Design:**

Survey method with “between groups” design was adopted for the study.

**Sample**

A random purposive sampling technique was used. Data was collected from 160 home makers and working women between the age of 20 to 45 years.

**Tools**

**1. PGI General Well-Being Scale** developed by Dr. Santhosh K. Verma and Ms. Amita Verma (1989). It has 20 items. Reliability was found to be 0.98, while Test- retest reliability was estimated to be 0.91.

**2. Quality of Life:** To assess the teachers life another standardized scale is used in the present study called the quality of life scale. WHO QOL-BREF is an abbreviated generic Quality of Life Scale developed through the World Health Organization. The WHO QOL-BREF instrument comprises 26 items, which measure the following broad domains: physical health, psychological health, social relationships, and environment. This scale includes totally twenty six questions to assess teacher’s quality of life, health or other areas of teacher’s life. Subjects are asked to answer in the form of circling the given option which they feel is correct according to their life styles. This is a five point rating scale 1. Very poor, 2. Poor, 3. Neither poor nor good, 4. Good and the last 5. Very good.

Test -retest reliability was estimated to be 0.82 by administering it to a group of 50 students over an interval of 4 weeks. Content validity was ensured through the method of selection and classification of items.

**Procedure**

After consulting the respective participants, a brief note of information was given about the study. Their consent was taken to be a part of the study and questionnaires were administered.

**Statistical Analysis**

Mean, Standard deviation and ‘t’ test are applied and the results are analyzed to find out the levels of significance between the two groups.

*Table 1 – indicating test of significance in General Well-Being among Home Makers and Working Women*

Ho<sub>1</sub>. There will be no significant difference in General Well-Being among Home Makers and

Working Women

	Home Makers (80)	Working Women (80)	t	df	P
	Mean/ S D	Mean/ S D			
<b>General Well-Being</b>	13.35 (3.81)	13.38 (4.57)	0.04	158	0.97

Table 1 shows the significant difference between hoe makers and working women. The mean value of home makers is 13.35 and the working women is 13.38. There is no significant difference between the two groups in general well-being. Therefore the hypothesis which states there will be no significant difference in general well-being among home makers and working women is retained.

Ho<sub>2</sub>. There will be no significant difference in Quality of Life among Home Makers and Working Women.

Table 2 – indicating test of significance in Quality of Life among Home Makers and Working Women

Sub Scales	Home Makers (80)	Working Women (80)	t	df	P
	Mean/ S D	Mean/ S D			
Quality of Life	3.91 (1.01)	4.28 (3.46)	0.89	158	0.37
Health	3.73 (1.10)	3.90 (0.77)	1.16	158	0.25
Physical	24.34 (4.98)	26.61 (4.28)	3.09	158	0.00**
Psychological	20.99 (3.85)	22.19 (3.63)	2.03	158	0.04*
Social	11.06 (2.22)	10.49 (2.13)	1.67	158	0.09*
Environment	27.28 (5.09)	29.20 (3.79)	2.71	158	0.00**
Total	91.75 (13.39)	97.48 (15.27)	2.52	158	0.01*

\*

Significant at 0.05 level

\*\* Significant at 0.01 level

Table 2 shows that there is a significant difference between the two groups in quality of life. Two sub scales i.e., quality of life and health does not show significant difference. However, physical (0.00\*\*) and environment (0.00\*\*) has the difference at 99% and the remaining two areas i.e., psychological (0.04\*) and vocational (0.09\*) area has the difference at 95%. On the whole there is a significant difference between the two groups (0.01\*) at 95%. Hence, the hypothesis “There will be no significant difference in Quality of Life among Home Makers and Working Women” is rejected.

H<sub>3</sub>. There will be a significant relationship between General Well-Being and Quality of Life among Working Women.

Table 3– indicating significant relationship between General Well-Being and Quality of Life among Home Makers and Working Women

	General Well-Being
Quality of Life	.076
Health	.212**
Physical	.213**
Psychological	.190*
Social	.087
Environment	.241**
Total	.286**

\*

Correlation is significant at the 0.05 level. \*\* Correlation is significant at the 0.01 level.

Table 3 shows the relationship between general well-being and quality of life. All the sub scales of quality of life scale shows a positive relationship with general well-being. Sub scale quality of life (0.076) and social (0.087) area does not show significant relationship with general well-being. Health (0.212\*\*), physical (0.213\*\*) and environment (0.241\*\*) has a high correlation with general well-being at 99%. Psychological area (0.190\*), has significant relationship with general well-being at 95%. On the whole there is 99% of correlation between quality of life and general well-being. Hence, the hypothesis which states that there is a significant relationship between General Well-Being and Quality of Life among Working Women is retained.

### Conclusions

1. There is be no significant difference in general well-being among home makers and working women.
2. There is no significant difference in Quality of Life among Home Makers and Working Women.
3. There is a significant relationship between General Well-Being and Quality of Life among Working Women.

### Limitations

1. Studies may be conducted taking demographical factors as independent variable.
2. Comparative study may be conducted between urban and rural areas.
3. Specific working sample was not considered.

### References:

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