



Health and Socio-Psychological Problems of Special Group Families

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ABSTRACT

The families with many variations, ranging from couples with or without children to single parent families and multigenerational families confront management problems of different nature. The single parent situation represents one of the most significant changes affecting the family system. The issue of the single parent family in the Indian context is complicated one, requiring investigation on various dimensions of the problems. So, the present study was undertaken to examine the problems faced by single parents (females) of Ludhiana and its effects on their behaviour. The study was conducted on purposively selected 120 females who were running their household alone themselves. A well structured questionnaire was administered to the respondents for collecting data. The results of the study revealed that 28.4 per cent of the respondents had weak health status and majority of the respondents (88.4%) suffered from stress and strain. In case of 33.4 per cent of respondents, at the time of illness, care was taken by their sons. About 81.7 per cent of the respondents reported lack of interest in social activities and 96.7 per cent of the respondents suffered from loneliness.

Key Words: Household, Management, Single parent, Social problems.

INTRODUCTION

A family is a basic unit of society, which passes through different stages of development. Management is a purposeful behaviour involved in the creation of resources to achieve family goals. Every change in the family brings change in the managerial behaviour. This change depends upon geographical setting, economical level, living conditions, rural-urban orientation and psycho-social factors. The level of living and the life styles are moulded by the family's managerial behaviour to a large extent (Balakrishnan, 1997). The families with many variations, ranging from couples with or without children to single parent families and multigenerational families confront management problems of different nature. The single parent situation represents one of the most significant changes affecting the family system. In recent years, the growth of single parent families has increased ten times as fast as two parent families and of all

single parent families, majority of the families are headed by women only. Further, increase in single parent families occurred when single parents took an independent living arrangement rather than living with their parental families or as part of another household. The single parent family is created in a number of ways, death of one parent, divorce, separation and desertion. In the mid twentieth century, most single parent families came about because of the death of a spouse. In the 1970s and 1980s, most single-parent families were the result of divorce. In the early 2000's, more and more single parent never married and was the primary contributors to single parent families in the world (Kotwal and Prabhakar, 2009).

The issue of the single parent family in the Indian context is complicated one, requiring investigation on various dimensions of the problems. An understanding of the position of women in society and family is most vital to the issue of families

headed by single mothers. Single mothers are more economically burdened and emotionally drained. It is observed that single parent either divorced or widowed or unmarried, face major adjustments in their lives. They have to play dual role and consequently are over stressed as compared to other families. It is hard to manage all household affairs and bear burden singly. The management problems faced by them increase manifold and managerial practices deviate from desired ones. So the present study was undertaken to examine the problems faced by single parents (females) of Ludhiana and the effects of problems on their behaviour.

MATERIALS AND METHODS

The study was conducted on 120 single parents (females) of Ludhiana, who were selected using snowball technique. A questionnaire was prepared to collect the requisite data from the selected respondents. The well-structured questionnaire was administered to the selected respondents and the respondents were made clear regarding the purpose of the study and were assured that the data would only be used for research work. The data were analysed using frequency and percentage.

RESULTS AND DISCUSSION

The results of the study revealed that the respondents were in the age group of 40-60 yr and were running their household alone.

Health Status of Respondents

Physical health of a person determines to a large extent the ability or capacity of doing work at home and outside (Kaur and Mehrotra 2002). Fig. 1 reveals that about 28.4 per cent of the respondent

reported weak health status whereas only 18.4 per cent had good health status. Similar results were reported by Kaur and Mehrotra (2002) in their study on single parent (females) families that maximum respondents had weak health status.

Problems faced by respondents

The data (Table 1) unveil the various problems which were faced by respondents and show that the general problems faced by the respondents were stress (88.4%) followed by blood pressure problems (81.7%), general weakness (46.7%), gastric trouble (36.7%), depression (31.7%) and headache (16.7%). Dave (2009) found that widows experience traumatic grief following the death of a spouse and that single mothers have higher incidence of major depression. Data regarding physical problems faced by respondents show that majority (81.7%) of the respondents faced problems while doing work due to uncomfortable working counters followed by 46.6 per cent of the respondents who had vision problems due to improper lighting at work, about 38 per cent of the respondents experienced knee pain, 33.4 per cent of the respondents had body ache and faced difficulty in replacing items. Nearly 23.4 per cent of the respondents had backache and difficulty in making frequent postural changes.

Among the social problems faced by the respondents, lack of interest was reported by majority (81.7%) followed by lack of participation due to health problems (23.4%), difference of opinion with the family members (10%) and neglected by family (6.7%). It has been observed that the absence of the male from home for long periods of time resulted in increasing responsibilities for women and many problems like tension, anxieties, pressures and conflicts. Regarding psychological problems, majority (96.7%) of the respondents suffered from loneliness followed by emotional imbalance which was faced by 85 percent of the respondents. Beside these psychological problems, other problems faced by the respondents were lack of proper respect (73.4%), low self-esteem (18.4%), temperament clashes with family members (10%),

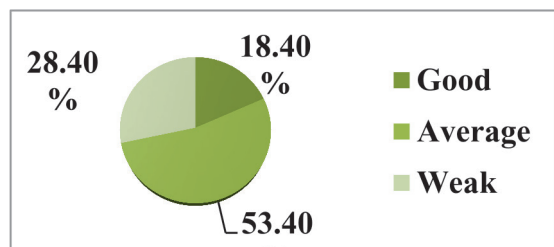


Fig. 1. Health Status of Respondents.

Health and Socio Physiological Problems

Table 1. Distribution of respondents according to problems faced by respondents.

Sr. No.	Types of Problem	Frequency	Percentage
I	General Problems		
1	Depression	38	31.7
2.	General weakness	56	46.7
3.	Stress	106	88.4
4.	Headache	20	16.7
5.	Blood pressure problems	98	81.7
6.	Gastric trouble	44	36.7
II	Physical Problems		
1.	Body ache	40	33.4
2.	Backache	28	23.4
3.	Knee pain	46	38.4
4.	Difficulty in making frequent postural changes	28	23.4
5.	Uncomfortable working counters	98	81.7
6.	Improper lighting to work	56	46.6
7.	Difficulty in replacing items	40	33.4
III	Social Problems		
1.	Difference of opinion with the family members	12	10.0
2.	Lack of participation due to health problems	28	23.4
3.	Neglected by family	8	6.7
4.	Lack of interest	98	81.70
IV	Psychological Problems		
1.	Loneliness	116	96.7
2.	Emotional imbalance	102	85.0
3.	Lack of proper respect	88	73.4
4.	Feeling of burden on family	8	6.7
5.	Feel neglected	8	6.7
6.	Temperament clashes with family members	12	10.0
7.	Old age worries	96	8.0
8.	Low self-esteem	22	18.4

Note: Multiple responses

old age worries (8%), feeling of burden on family and feeling of being neglected by 6.7 percent of the respondents. Similar results were reported by Sushma *et al* (2003) reported that for single elderly women, besides physical, financial and economic problems, poor upkeep, neglect, depression, insecurity gives rise to various socio-psychological problems. Loneliness is most burdensome for the

aged and especially for those who have nobody to live with.

Effects of Socio-Psychological problems on respondents

Pothen (1986) in a study found that most single women experienced frustration, an inferiority complex, loneliness and faced many negative social consequences such as poor relation with others

and negative attitude. The values (Fig. 2) indicate that about 86.7 per cent of the respondents got upset for minor issues. Around 76.7 per cent of the respondents sat in isolation knowingly. Other than these, 28.4 per cent of the respondents refused to take meals and 16.7 per cent did not participate in family discussions.

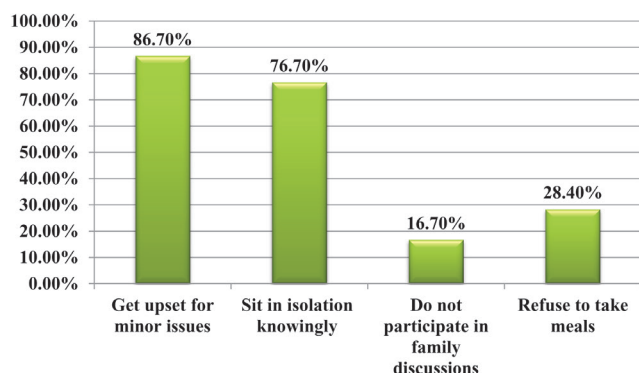


Fig. 2. Effects of socio-psychological problems on respondents.

Caretakers of respondents during illness

Sarah *et al* (2006) revealed that divorced women have a higher susceptibility to chronic illness, especially over a period of time compared with married women. About 33.4 and 26.6 per cent of the respondents were looked after by their son and daughter-in-law, respectively during their times of illness followed by other relatives (sister, mother-in-law, son-in-law) in about 21.6 per cent of the cases. For 11.6 per cent of the respondents their daughter cared for them and in 6.7 per cent of the cases, neighbours took care of the respondents (Fig 3).

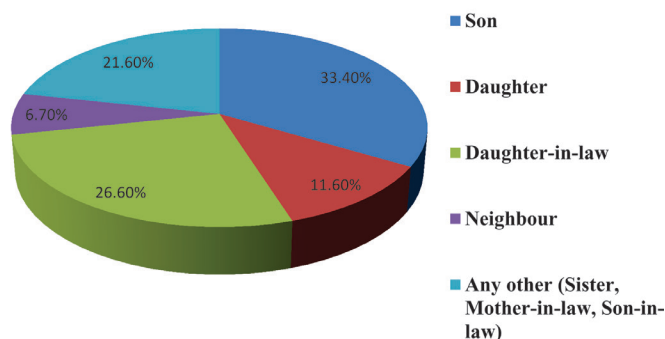


Fig. 3. Caretakers of respondents during illness.

CONCLUSION

Single women experience a greater number of stressful events such as loneliness, critical illnesses and problems with their own parents than do the married women. Indian single women have lower life satisfaction, negative mood, complain of less social support and are higher on psychological distress. Results showed that 28.4 per cent of the respondents had weak health status and majority of the respondents (88.4%) suffered from stress. About 81.7 per cent of the respondents reported lack of interest in social activities and 96.7 per cent of the respondents suffered from loneliness. In case of 33.4 per cent of respondents, at the time of illness, care was taken by their sons.

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