



Social and emotional well-being of rural mothers of Jorhat district

■ Krishna Baruah*, Jinamoni Saikia and Bondipa Dutta

Department of Human Development and Family Studies, College of Community Science, Assam Agricultural University, Jorhat (Assam) India

(Email : kiki_barua@yahoo.co.in)

ARTICLE INFO :

Received : 27.06.2019

Revised : 02.11.2019

Accepted : 19.11.2019

KEY WORDS :

Well-being, Rural mothers

HOW TO CITE THIS ARTICLE :

Baruah, Krishna, Saikia, Jinamoni and Dutta, Bondipa (2019). Social and emotional well-being of rural mothers of Jorhat district. *Adv. Res. J. Soc. Sci.*, **10** (2): 43-46, DOI: 10.15740/HAS/ARJSS/10.2/43-46. Copyright © 2019 : Hind Agri-Horticultural Society

*Author for correspondence

ABSTRACT

The present study social and emotional well-being of rural mothers of Jorhat district was carried out in Jorhat district of Assam with an objective to assess the social and emotional well-being of the respondents and to find out the correlation between social and emotional well-being if any. Eleven villages were selected purposively from Jorhat district of Assam for the study. The study was conducted among 325 young rural mothers having children below 6 years of age. The findings revealed that 53.23 per cent respondents possessed good level of emotional health while in case of social health 48 per cent of respondents possessed the same.

INTRODUCTION

Well-being is used as a positive ecological concept that encompasses developmental stages across the life course, integrating physical, cognitive and socio-emotional functions and also having a subjective dimension in the sense of satisfaction associated with fulfilling one's potential (Pollard and Davidson, 2001). According to World Health Organization view point, social well-being is an important dimension of health along with physical and mental aspects. It plays an effective role in improving

the quality of life, social efficacy and social performance. Social well-being is an important factor which demonstrates the circumstance and functioning of the society (Salehi *et al.*, 2017). The term "social well-being" means individual's (group's) satisfaction with one's own social status, welfare, living standard and life quality. Social well-being reflects an individual's general satisfaction with the environment, activities he/she is involved in and possessions (Ivankina and Ivanova, 2016).

Social and emotional well-being is a multifaceted concept encompassing both individual capacities and

social competencies. It refers to the way a person thinks and feels about themselves and others. It includes being able to adapt and deal with daily challenges (resilience and coping skills) while leading a fulfilling life. Hence, there is an emphasis on the behavioural and emotional strengths of individual, as well as how they respond to adversity (Jeba and Premraj, 2012). The world health organization has concluded that emotional well-being is fundamental to our quality of life. It enables us to experience life as meaningful and is an essential component of social cohesion, peace and stability in the living environment (WHO, 2005). Emotional well-being is a crosscutting concern that touches many aspects of our daily lives and has an impact across the lifespan. The world federation for Mental Health (WHO, 2010) defines emotional well-being as “a form of subjective well-being, when individuals feel that they are coping, fairly in control of their lives able to face challenges and take on responsibility”

To be happy and productive one must possess a good emotional as well as social health and not merely absence of any physical illness. A person’s emotional and social health is one of the main cursors in determining his or her psychological well-being. People with high psychological well-being report feeling happy, capable, well-supported and satisfied with life. At the most basic level, psychological well-being is quite similar to other terms that refer to positive mental states such as happiness, satisfaction etc.

Objectives:

- To assess the social well-being of the rural mothers
- To assess the emotional well-being of the rural mothers
- To find out the correlation between social well-being and emotional well-being of rural mothers if any

MATERIAL AND METHODS

The present study was conducted in the eleven operational villages of All India Coordinated Research Project on Home Science. These eleven villages were selected from Teok administrative block of Jorhat district of Assam, which had been selected by KVK, Jorhat. A total of 325 young mothers having children below 6 years were selected purposively from those selected villages for the study. The data was collected to assess the social

and emotional well-being by interviewing the respondents individually at their home. Necessary additional information was collected from respondents through informal discussion. Observation was also made during the time of data collection. After collection of data, raw data was categorized, coded and tabulated for statistical computation.

Tools used for the study:

Two different questionnaires were used to collect the data.

To collect the background information and to assess their socio-economic status, socio-economic status tool developed by Aggrawal *et al.* (2005) was used. This tool consisted of 22 questions. Depending upon the scores on socio-economic status the data was categorized as very poor, poor, lower middle, upper middle, high and upper high.

A well-being assessment scale developed by McKinley Health Centre at the University of Illinois (2005) was adopted and used to collect the required information.

OBSERVATIONS AND ANALYSIS

Majority of the respondents (69.85%) belonged to lower middle socio-economic status followed by upper middle and poor categories where none of the respondents belong to very poor category and upper high category of socio-economic status (Table 1).

Data (Table 2) showed that majority (85.84%) of respondents always maintained a good relation with their family members and similarly 76.92 per cent were also open, honest and get along with other people. Though, they maintained a good relationship with others but only 30.77 per cent respondents were accessible to a loving and responsible relationship. Similarly, 37.84 per cent respondents participated in a wide variety of social activities and enjoyed being with different types of people. Data also showed that more than half of the respondents (54.77%) considered the impact of their words before they speak whereas very meager per cent of respondents rarely thought about their words before they speak. It is noteworthy that a large number (37.23%) of respondents had someone close with whom they could share their private feelings.

Data (Table 3) showed that 46.15 per cent

respondents always found it easy to laugh about things that happen in their life. Majority (96.92 %) of respondents always avoid using substance as a means of helping them to forget their problems. It may be due to the fact that majority of the respondents considered that they had

someone to reveal their private feelings. Respondents (41.54 %) opined that they feel good about themselves and also they are flexible enough to adapt or adjust to change in a positive manner.

It can be highlighted from the results that (Table 4)

Categories of socio-economic status	No. of respondents	
	f	%
Upper high	0	0
High	5	1.54
Upper middle	57	17.54
Lower middle	227	69.85
Poor	36	11.07
Very poor	0	0

Sr. No.	Statements on social health	No. of respondents	
		f	%
1.	When I meet people, I feel good about the impression I make on them	155	47.69
2.	I am open, honest, and get along well with other people	250	76.92
3.	I participate in a wide variety of social activities and enjoy being with people who are different than me	123	37.84
4.	I get along well with the members of my family	279	85.84
5.	I am accessible to a loving and responsible relationship	100	30.77
6.	I have someone I can talk to about my private feelings	121	37.23
7.	I consider how what I say, might be perceived by others before I speak	178	54.77

Sr. No.	Statements on emotional health	No. of respondents	
		f	%
1.	I find it easy to laugh about things that happen in my life	150	46.15
2.	I avoid using substance as a means of helping me forget my problems	315	96.92
3.	When I am angry, I try to let others know in non-confrontational and non-hurtful ways	122	37.54
4.	I recognize when I am stressed and take steps to relax through exercise, quiet time, or other activities	69	21.23
5.	I feel good about myself and believe others like me for who I am	135	41.54
6.	I am flexible and adapt or adjust to change in a positive way	135	41.54

Area	Poor		Average		Good		Very good	
	f	%	f	%	f	%	f	%
Social health	1	0.31	63	19.38	105	32.31	156	48
Emotional health	2	0.62	74	22.77	173	53.23	76	23.38

Area	Average	Good	Very good
	(r)	(r)	(r)
Social and emotional health	0.39	0.15	-0.04
Overall		0.67	

48 per cent of respondents maintained a very good level of social health whereas a negligible per cent (0.31) of respondents had poor level of social health. It may be due to the fact that most of the respondents maintained a good and reciprocal relationship with their family members and other members of the society and which is also a major concern of rural folk of assamese society. The above result also showed that 53.23 per cent respondents' emotional health is good which was followed by 23.38 per cent respondents who had maintained a very good emotional health. Only 0.62 per cent of respondents seemed to have poor level of emotional health. It may be due to the fact that most of the respondents were from lower middle class families where they received good socio-emotional support from each other and get opportunity to channelize their feelings through social commitment at least at the time of crisis, need and when ever required.

The values (Table 5) between overall social and emotional health of rural mothers showed a significant positive correlation. It can be inferred from the results that higher the level of social health more will be the emotional well-being. This can be attributed to the fact that when a person is social, she or he got the chance to share their emotions very often with their close friends or relatives, which in turn helps them to maintain a good emotional health. Likewise, the respondents who are open to adjust and adapt to changes and perceive the things in a positive way are preferred by the family members, relatives, neighbors and social group as a whole, thus making them social with good social and emotional health.

Conclusion :

Person's emotional health and social health are important aspects of one's overall personality. Where these two aspects of health influence each other to a

great extent and contribute toward the psychological well-being of a person. Thus, to be happy and remain productive in the society psychological well-being with a balanced socio-emotional health matters.

REFERENCES

- Aggarwal, O.P., Bhasin, S.K., Sharma, A.K., Chhabra, P., Aggarwal, K. and Rajoura, O.P. (2005). A new instrument (Scale) for measuring the socio-economic status of a family : Preliminary study. *Indian J. Community Medicine*, **30** (4): 111-113.
- Australian Institute of Health and Welfare (2012). *Social and emotional wellbeing: Development of a Children's Headline Indicator*. Cat. No. PHE 158. Canberra.
- Ivankina, L. and Ivanova, V. (2016). Social wellbeing of elderly people (based on the survey results). *SHS Web of Conferences*, **28**: 01046.
- Jeba, J. and Premraj, F.C. (2012). Social and emotional wellbeing of adolescents. *J. Humanities & Social Sciences*, pp. 56-59.
- Pollard, E. L. and Davidson, L. D. (2001). *Foundations of Child Well-being*. Centre for Child Well being, U.S.A.
- Salehi, A., Marzban, M., Sourosh, M., Sharif, F., Nejabat, M. and Imanieh, M.H. (2017). Social well-being and related factors in students of school of nursing and midwifery. *Int. J. Community Based Nurs. Midwifery*, **5**(1): 82-90.
- WHO (World Health Organization) report. (2005, 2010).

WEBLIOGRAPHY

Wellbeing Assessment Tool, is adapted from that at the McKinley Health Centre at the University of Illinois (2005). at Urbana-Campaign 1109 S. Lincoln Ave. Urbana, 1161801 available at: http://www.mckinley.uiuc.edu/units/health_ed/health_education.htm.

★ ★ ★ ★ ★ of Excellence ★ ★ ★ ★ ★
10th Year