

## Impact Of Social Support On Perceived Health Promotion Among Working Women

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### ABSTRACT

*In the present modern world of work, health has become a significant issue for everyone, especially working women. Health influences one's work life. That is why the current study was conceived to see women's health as a function of social support because social support seems to be a crucial aspect that is likely to help promote health. In this regard, a sample group comprising N=98 was taken. A questionnaire (Multidimensional Scale of Perceived Social Support- MSPSS) measuring social support was used to assess the strength of social support. Similarly, the data regarding perceived health promotion was obtained through General health questionnaire (GHQ). The findings suggest that social support failed to influence perceived health promotion significantly.*

### Keywords:

*Social Support,  
Perceived Health  
Promotion,  
Working Women.*

## Introduction

The contemporary world has seen significant changes in the role of women. They have started working outside and contribute to the development of institutions. Society, however, continues to expect that women should continue to look after the family responsibilities besides working outside. These social expectancies pressurize them and pose extra stress on them, and may have health implications. The family and other support systems available might moderate the pressure. As defined by the World Health Organization (WHO), health is a "state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity".

Perceived health alludes to the view of an individual's well-being all in all, either by the individual or, on account of intermediary reaction, by the individual reacts. Health means not only the absence of ailment or injury but also physical, mental, and social well-being.

Social Support is related to how people assists individuals with adapting to distressing occasions. And also enhancing spiritual prosperity. Social support recognizes four kinds of help:

- **Emotional Support** is the contribution of sympathy, concern, friendship, love, trust, acknowledgment, closeness, consolation, or caring.
- **Tangible Support** is the arrangement of money related help, material merchandise, or administrations.
- **Informational Support** is the arrangement of information, direction, recommendations, or valuable data to somebody.
- **Companionship Support** is the kind of help that gives somebody a feeling of social belongings.

It is a fact that most women in less developed countries still shoulder burdensome physical workloads in the household and outside. Work affects women physically and mentally in many ways. Women can gain great satisfaction from their jobs, but they are exposed to hazards that can affect their health. The study highlights the significance of social support as a possible factor leading to positive health among working women and a need to train them in seeking social support-oriented practices and interventions to enhance their health.

Health isn't just about ailment and treatment but is a state of well-being free from physical, mental, and social stress. A women's health is intricately linked with the social environment in which she lives and works. When one studies women's health, one must consider not just her biological problems but the whole social process that gives rise to these problems.

These variables have been studied worldwide by various researchers in a different context, but very few studies on this context have been done in India. Thus, all these variables have been studied extensively. Still, in an Indian setting, we need some more research studies according to the need of the society considering cultural diversity as well as the availability of healthcare. Social relationships have a significant impact on health education and health behavior. There is no theory adequately explaining the link between social relationships and health. Closely related to health components of social relations are social integration, social network, and social support.

### **Objectives**

The significant and only objective of the present investigation was undertaken with the contention to investigate the influence of social support on perceived health promotion among

working women.

### **Hypothesis**

Given the objective of the present investigation, it was hypothesized that there would be no influence of Social Support on Perceived Health. This hypothesis was formulated for empirical testing.

### **Method**

The study was conducted on working women, and the sample size consists of N= 98. The purposive sampling technique was used to collect data from various job institutes individually with the help of multiple questionnaires. The purpose of the study has been explained to the working women, and oral informed consent was obtained from all participants before data collection. The questionnaires were given one by one, and was asked to read the instructions carefully before filling the questionnaires.

As per the research requirement, a General health questionnaire and Multidimensional Social support were used to collect data from the sample.



**General Health Questionnaire (GHQ)  
Goldberg & Hillier,1979**

The full GHQ consists of a 60-items test with a four-point scale for every reaction. The questionnaire exists in a few short forms: GHQ (30 things), GHQ (28-things), GHQ (12 items). The detailed Cronbach alpha coefficient for the GHQ ranges from 0.82 to 0.86. The questionnaire is considered reliable and has been converted into 38 unique dialects.

**Multidimensional Scale of Social Support  
(Zimet, Dahlem, Zimet & Farley,1988)**

Multidimensional Scale of Perceived Social Support in short (MSPSS) is a short research

questionnaire intended to quantify social support from 3 sources: Family, Friends, and Significant Other. The scale involved an aggregate of 12 items, with four things for each subscale and evaluated on a 7-point Likert-type scale, extending from 1 "very strongly disagree" to 7 "very strongly agree."

The data were collected in and around two months, and thus the information collected was analyzed through the non-parametric statistic, namely Kolmogorov Smirnov (KS) test, was run to see the differential influence of Social Support on Perceived Health Promotion.

**Results and Discussion**

Showing the differential influence of Social Support on Perceived Health Promotion:

Independent Variable	Class Interval	6 – 10	11 – 15	16 – 20	21 – 25	n
High Social Support	F	12	22	13	3	50
		0.24	0.68	0.94	1	
Low Social Support	F	7	27	13	1	48
		0.145	0.708	0.979	1	
D		0.095	0.028	0.039	0	

$$KS = 4 (D)^2 (n_1 * n_2) / n_1 + n_2$$

Where, D= 0.095, N<sub>1</sub> = 50, N<sub>2</sub> = 48

Therefore KS = 0.081

The above table shows that the obtained  $KS=0.881$  is statistically found highly insignificant, even at .05 level of confidence. Therefore, our null hypothesis that there will be no influence of Social Support on Perceived Health stands accepted.

The above pattern of results seems to be quite relevant because the present 21<sup>st</sup> Century women, especially working women, are quite confident in carrying out the job independently. Social Support failed to influence Perceived Health promotion significantly at par with their male counterparts. Therefore, women of the 21st century do not require any support from society concerning their health safety and work excellence. That's why, when a woman enters into a profession, and interactions with people increase her confidence, she becomes self-reliant. They are more focused on their work and don't expect any extrinsic verbal support. It is imperative to mention here that if working women face any health problem, they directly meet the doctor and seek their help to resolve their health problem. Seeking help from doctors does not come under the purview of social support because social support is the broad term that refers to help people through moral boosting, which is generally lip service given by society.

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