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ABSTRACT

The present study attempted an empirical investigation to explore the anxiety and coping strategies of married women according to their family type and employment status in Chittagong city. A total of 100 respondents constituted the sample of the study. The Bengali version of Anxiety Scale developed by (Deeba and Begum 2004) and the Bengali version of Coping Scale adapted by Huque (2004) were used to measure anxiety and coping strategies of the respondents. Data were analyzed by using mean, standard deviation, two-way analysis of variance (ANOVA), Pearson Product Moment Correlation and frequency. The findings of the present study showed that family type has no significant effect on anxiety but employment status has significant effect on anxiety (F=4.773, df=1.96, p<0.5). Housewives expressed more anxiety than employed married women. Result also showed that employment status and family type have no significant effect on both problem-focused and emotion-focused coping. Anxiety was positively correlated with both problem-focused and emotion-focused coping. 47 participants were found mildly anxious, 16 were found moderately anxious, 7 were found severely anxious and 7 were found profoundly anxious.

Key Words: Anxiety, coping strategies.

INTRODUCTION

The roles and rights of women in our society are constantly questioned and for centuries women have struggled to find their place in the world. Women in third world countries like Bangladesh are dominated by a patrilineal and patriarchal kinship system, which enforces the social and economic dependence of women on men and prescribes the relative lower status of women (Ferdaush and Rahman 2011). Due to this lower status and negative gender stereotype women have to face many obstacles, stress, anxiety, depression, etc. However, married women experience more mental health problems than men and single women due to the stress of juggling many types of roles and responsibilities in their family (McGrath et al. 1990). Considering this fact the aim of the present study was to investigate anxiety and coping strategies of married women according to their family type and employment status.

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Anxiety is a reaction to a perceived threat and incapacity to cope with the situational challenge in a satisfactory way (Sarason 1978). According to Spielberger (1983), states of anxiety are characterized by subjective feelings of nervousness, worry, tension, or apprehension and by arousal of the autonomic nervous system (i.e., sweating, heart palpitation, muscle tension). Anxiety is a normal and acceptable facet of human emotion; however, when the level of anxiety becomes excessive, it disrupts normal living, and becomes a cause for concern.

Stress is an inevitable component of life due to increasing complexities and competitiveness in living standards. Any conscious effort by an individual to manage or overcome a stressful event is known as coping (Holahan and Moos 1987). Folkman et al. (1986) define coping as "the person's cognitive and behavioral efforts to manage the internal and external demands in the person-environment transaction". Lazarus and Folkman (1984) identified two types of coping: emotion-focused coping and problem-focused coping. Problem-focused coping involves trying to manage or alter stressors, it includes strategies such as decision-making and planning to resolve conflicts or to manage the problem (Love et al. 2004), while emotion-focused coping involves trying to regulate the emotional responses to stressors. Although people tend to use both forms of coping in most cases, problem-focused coping is more appropriate for problems in which a constructive solution can be found.

Traditionally, women in our society specially married women are recognized only for reproductive purposes and are encouraged to do only household works other than outside works. But now a days the number of employed women in our country is increasing. Economic pressure is the main factor for married women's employment. They opt to work in order to face future crisis or economic disaster. The adjustment problems resulting from women's employment or engagement in any work can be seen in two aspects- Level of adjustment at the working place, family and marital adjustment. Married women face a lot of problems at the working place. They also feel fatigue and monotony after coming back from the workplace. Moreover, after coming back they have to look after the household works and their children. The situation sometimes creates maladjustment among the women and lead to prolonged anxiety, frustration and anger, social and emotional distresses. It makes the women feel rejected, isolated, tense and make the situation unmanageable that affect various aspects of their lives. Within this tradition, coping is regarded as effective in solving problems and reducing anxiety and other psychological distress (Drageset 2012).

Gupta and Indira (1993) investigated about anxiety and health problems in traditional and dual-career couples in India. They found that married women had significantly greater anxiety as compared to their male counterparts. A study of APA (2010) shows that, married women report higher levels of stress than single women, with one-third (33 percent) reporting that they have experienced a great deal of stress compared with one in five (22 percent) of single women. Cilli et al. (1997) did a comparative analysis

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of the psychological symptoms observed in the working women and housewives. They found that anxiety, phobia and psychosomatic symptoms were significantly higher in housewives than in working women. Irfan et al. (2012) investigated the effect of anxiety level on life satisfaction of working and non-working married women in India. From their investigation non-working married women were found to be high on anxiety level with poorly satisfied with their lives. But Aleem and Danish (2008) did another investigation about marital satisfaction and anxiety among single and dual career women and found that married employed women had more anxiety than unemployed. Khanom and Rahman (2004) studied on whether anxiety level of women varies as a function of their employment and education. They found that employed and unemployed women did not differ significantly regarding the level of their anxiety. Iqbal et al. (2004) investigated on the presence of anxiety in working and non-working married women of nuclear and extended family. They found that, non-working women living in nuclear family were more anxious as compared to living in joint family. But among the working ladies anxiety was more living in joint family as compared to ones living in nuclear families. A study by Aujla et al. (2004) on stress management techniques by working and non-working women showed that, working women were significantly more stressed due to psychological stressors than non-working women. Billings and Moos (1981) noticed gender differences in coping strategies. They found women tend to use more emotion-focused coping strategies than men and men tend to use more problem-focused coping strategies than women.

Harshpinder and Aujla (2001) investigated the different physical stress management techniques utilized by working and non-working women as coping strategies. Results showed that working women were making more use of writing dairy, standard furniture and high fiber diet as compared to non-working women. Killien and Brown (1987) investigated sources of stress and coping strategies of married women and reported that almost half of the working women did nothing at all in response to work stress. And other half were related to emotion-focused coping, such as seek social support, complained to co-worker and avoidance. Upamanyu (1997) explored the stress management techniques used by the unemployed married women in India. He found that, the sleep and relaxation, exercise, time management, diet and yoga are the best way adopted to cope with stress by women.

All most all over the world women, especially married women are deprived from their rights. They have to play a lot of important roles in our society. They have to perform different roles as wife, as mother, as sister, as daughter and as others. Moreover; married women who are engaged in jobs outside their home, have to perform additional duties as working women. Their employment is a kind of challenge for them because they have to maintain both their family and outside work. They face considerable conflict and stress in meeting the demand of the workplace and home. The multiple roles of both employed and unemployed married women and their inferior social position can lead to multiple stress and problems; such as, physiological, adjustment, social and various work related problems. These problems tends to create feeling of inferiority, uselessness or inability and lead to mental fatigue, low self esteem, anxiety, depression and other psychological stress

related illness. So, whether housewives or professionals married women have to face several difficulties in maintaining the role played by them. To overcome their stress they have to perform many defence oriented responses as coping strategies. The type of coping strategies (problem-focused and emotion-focused) they follow and their anxiety level may depend on how the individual appraises the stressful event, personality differences, environmental factors and their demographic factors. Among them some demographic factors like employment status and family type are important enough to study. In this regard there is very little literature in our country. The findings of the study may help the proper authority to provide appropriate intervention and counseling to those group who suffer from more anxiety and use more emotion-focused coping strategies than others. This will increase our understanding about anxiety and coping of married women in our society and help us by drawing the best potentialities of married women in domestic life as well as in the workforce.

To understand better the above mentioned situations of married women, the objectives of the present study were- (a) to investigate whether anxiety of married women varies according to family type and employment status; (b) to investigate whether coping strategies of married women varies according to family type and employment status and (c) to investigate whether there is any relation between anxiety and coping strategies.

MATERIALS AND METHODS

The target population of the present study was married women of Chittagong city. 100 married female respondents were selected purposively as study participants from different areas of Chittagong city. Among them 50 (50%) were employed and 50 (50%) were unemployed. Each group again consisted of 25 from nuclear family and 25 from extended family.

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The following instruments were used in the present study:

Demographic and personal information questionnaire

A demographic and personal information questionnaire was used to collect data about participant's age, education, occupation, family type etc.

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Anxiety Scale

To measure the anxiety of the respondents, Anxiety Scale developed by Deeba and Begum (2004) was used. The scale consists of 36 items and it is a Likert type scale. All the items of the scale are positive. There are five alternatives for each question. The scoring of

items is 0 for Never Occurs, 1 for Mildly Occurs, 2 for Moderately Occurs, 3 for Severely Occurs and 4 for Profoundly Occurs. Total anxiety score of any individual was obtained from the sum total of scores of all the 36 items. The scale scores range from 0 to 144. Larger total score indicates higher anxiety. There are four levels of severity norm; namely- mild (27-54), moderate (55-66), severe (67-77) and profound (78- above). The cut-off score for screening an individual as anxious or non-anxious of the scale is 47.5. The split-half reliability (r= 0.91), Cronbach-alpha reliability (0.94) and the test-retest reliability (r=0.68) indicate that the scale has a good reliability. The scale has also good content validity, criterion-related validity (r= 0.31 to r= 0.62) and construct validity (r= 0.39 to r= 0.78).

Coping Scale

The Bengali version of Coping Scale adapted by Huque (2000) originally developed by Folkman and Lazarus (1980) was used to measure coping behavior of the respondents. The scale is a 22 items self report 4-point Likert type measure of coping strategies. The response options are "I usually don't do this at all" (1), "I usually do this sometimes" (2), "I do this most of the time" (3) and "I do this always" (4). The scale consists of total 11 subscales which are broadly classified in two coping strategies- PFC (problem-focused coping) and EFC (emotion-focused coping). Total items of PFC are 12 and the highest and lowest score for PFC is 48 and 12 respectively. Total items of EFC are 10 and the highest and lowest score for EFC is 40 and 10 respectively. The highest score for PFC or EFC indicates the better problem focused or emotion focused coping strategies of a particular respondent. Reliability of the translated version of the coping scale was reported to be highly significant (r=0.86, <0.01) and the test-retest reliability of the Bengali version of each of the subscales was reported to be significant.

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Cross-sectional survey research design was followed for conducting the present study.

Procedure

For collecting relevant data from the participants, employed and unemployed married women who came from nuclear and extended family were requested to help. Respondents were told that the sole purpose of the investigation was academic and their response would be kept confidential. Before administration of the questionnaire necessary rapport was established with respondents. Then the Anxiety Scale and Coping Scale were administered to respondents and requested a silent reading at the instruction provided with the scale before starting to answer. All possible clarifications were made to the problems if faced by the respondents. There was no time limit for the respondents to answer all the items of the scale. After completing of their tasks the answered questionnaires were collected from them and they were given thanks for their sincere co-operation.

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RESULTS AND DISCUSSION

Data were analyzed by using mean, standard deviation, two-way analysis of variance (ANOVA), Pearson Product Moment Correlation and frequency. All statistical analyses were carried out using the statistical program SPSS version 16.0 for windows.

TABLE 1: DESCRIPTIVE STATISTICS OF ANXIETY ACCORDING TO FAMILY TYPE AND EMPLOYMENT STATUS.

Employment status				
Family type	Employed	Unemployed	Total	
Nuclear	M = 36.00	M = 49.96-	M = 41.48	
	SD = 18.08	SD = 29.87	SD = 25.05	
Extended	M = 43.76	M = 53.20	M = 48.48	
	SD = 17.90	SD = 25.31	SD = 22.21	
Total	M = 39.88	M = 50.08		
	SD = 18.23	SD = 27.57		

Table 1 shows that mean anxiety score of married women from nuclear family was lower (M= 41.48, SD= 25.05) than extended family (M=48.48, SD=22.21). Mean anxiety score of employed women was lower (M=39.88, SD=18.23) than unemployed women (M=50.08, SD=27.57). To determine whether the differences observed between the means in Table 1 were statistically significant, two-way analysis of variance (ANOVA) was computed.

TABLE 2: SUMMARY OF THE ANALYSIS OF VARIANCE OF ANXIETY ACCORDING TO FAMILY TYPE AND EMPLOYMENT STATUS.

Source of variance	df	SS	MS	F	Sig.(p-value)
Family type	1	1225.00	1225.00	2.248	.137
Employment	simple in	2601.00	2601.00	4.773	.031
Family type *Employment	1	14.44	14.44	0.26	.871
Error	96	52317.52	52317.52		
Corrected total	100	258478.00	544.947	tent-un	

Table 2 shows that family type has no significant effect on anxiety but employment status has significant effect on anxiety (F=4.773, df=1.96, p<0.5). It indicates anxiety vary as a function of employment status. Unemployed married women showed significant greater anxiety than employed married women. The result shows no significant interaction effect between family type and employment status.

TABLE 3: DESCRIPTIVE STATISTICS OF PROBLEM-FOCUSED COPING ACCORDING TO FAMILY TYPE AND EMPLOYMENT STATUS.

	I	Employment status	
Family type	Employed	Unemployed	Total
Nuclear	M = 26.64	M = 29.56	M = 28.10
	SD = 4.24	SD = 5.90	SD = 5.29
Extended	M = 29.12	M = 28.64	M = 28.88
	SD = 4.98	SD = 4.47	SD = 4.69
Total	M = 27.88	M = 29.10	
	SD = 4.74	SD = 5.20	

Table 3 shows that mean problem-focused coping score of married women from nuclear family was 28.10 (SD=5.29) and from extended family was 28.88 (SD=4.69). Mean problem focused-coping score of employed women was 27.88 (SD=4.74) and unemployment women was 29.10 (SD=5.20). To investigate the main and interaction effect of family type and employment status on problem-focused coping, two-way analysis of variance (ANOVA) was computed.

TABLE 4: SUMMARY OF THE ANALYSIS OF VARIANCE OF PROBLEM-FOCUSED COPING ACCORDING TO FAMILY TYPE AND EMPLOYMENT STATUS.

Source of variance	df	SS (medicin	MS	F	Sig.(p-value)
Family type	1	15.210	15.210	.623	0.432
Employment	1 -	37.210	37.210	1.524	0.220
Family type *Employment	1	72.250	72.250	2,959	0.089
Егтог	96	2344.320	24.420		
Corrected total	99	2468.990	ro establish it.		

Table 4 shows that family type and employment status have no significant effect on problem-focused coping. It indicates problem-focused coping does not vary as a function of family type and employment status. The result also shows no significant interaction effect between family type and employment status.

TABLE 5: DESCRIPTIVE STATISTICS OF EMOTION-FOCUSED COPING ACCORDING TO FAMILY TYPE AND EMPLOYMENT STATUS.

	Employn	nent status	
Family type	Employed	Unemployed	Total
Nuclear	M = 23.40	M = 23.72	M = 23.56
	SD = 4.40	SD = 6.59	SD = 5.55
Extended	M = 24.12	M = 25.80	M = 24.96
	SD = 4.57	SD = 3.93	SD = 4.30
Total	M = 23.76	M = 24.76	
	SD = 4.46	SD = 5.47	

Table 5 shows that mean emotion-focused coping score of married women from nuclear family was 23.56 (SD=5.55) and from extended family was 24.96 (SD=4.30). Mean emotion-focused coping score of employed women was 23.76 (SD=4.46) and unemployment women was 24.76 (SD=5.47). To investigate the main and interaction effect of family type and employment on emotion-focused coping, two-way analysis of variance (ANOVA) was computed.

Table 6: SUMMARY OF THE ANALYSIS OF VARIANCE OF EMOTION-FOCUSED COPING ACCORDING TO FAMILY TYPE AND EMPLOYMENT STATUS.

Source of variance	df	SS	MS	F	Sig.(p-value)
Family type	1	49.00	49.00	1.973	0.163
Employment	1	25.00	25.00	1.007	0.318
Family type *Employment	11,210	11056	11.56	0.466	0.497
Error USCE AND OF	01.96	2383.680	24.83		monryolymo
Corrected total	075 100	61324.00		tuguayolo	familie (spo *Ente

Table 6 shows that family type and employment status have no significant effect on emotion-focused coping. It indicates emotion focused coping does not vary as a function of family type and employment status. The result also shows no significant interaction effect between family type and employment status.

TABLE 7: RELATION BETWEEN ANXIETY AND COPING STRATEGIES.

Correlation of anxiety with	DENERGIBLE THE REAL ANDIE	Significant level (α)
Problem-focused coping	0.32	0.01 (two-tailed)
Emotion-focused coping	0.28	0.01 (two-tailed)

Table 7 shows that the correlation coefficient of anxiety with Problem-focused coping was 0.32 and the correlation coefficient of anxiety with emotion-focused coping was 0.28.

TABLE 8: THE FREQUENCY OF THE RESPONDENTS ACCORDING TO SEVERITY NORM OF ANXIETY SCALE.

N	Mild	Moderate	Severe	Profound
100	47	16	no ca 7 america	. 7

Considering the severity norm of the anxiety scale, table 8 shows that 47 participants were found mildly anxious, 16 were found moderately anxious, 7 were found severely anxious and 7 were found profoundly anxious. Considering the cut-off score for screening norm (47.5) of anxiety scale, 40 married women were found as anxious. Among them 24 were unemployed and 16 were employed women.

The first objective of the present study was to investigate whether anxiety of married women varies according to family type and employment status. Result showed that family type had no significant effect but employment status had significant effect on anxiety (F=4.773, df=1, 96, p<0.5). It indicates anxiety vary as a function of employment status. Unemployed married women showed significant greater anxiety (M=50.08, SD=27.57) than employed married women (M=39.88, SD=18.23). The reasons of anxiety in non-working women could be their familial and social status, low control at home, low education and their involvement only at home in monotonous roles (Irfan et al. 2012). Housewives in our society have more household responsibilities, face domestic conflicts, abusive relationships, and enjoy less privilege, less rights, less social and economic freedom. They lack the ability to escape their captors due to social and cultural pressures and rarely get an opportunity for dissipating their stress. Compared to the working women their social environment is limited. Their husbands are the only ones to appreciate their intense efforts they make for their homes. A woman with children, husband and other family members with no help from others and no money for the most costly labor-saving devices, simply cannot organize her necessary duties so that she will have leisure for pleasure and activities outside the daily routine. The working women, however, have the chance of being appreciated by the society and behave independently and earn money. Large numbers of unemployed married women work hard at home not by their choice as compared to the employed married women. This reflects their lower motivation and confidence which in terms in turn is indicator of low life satisfaction and higher level of anxiety. But married employed women have opportunities for personal relationships and social support within their work group and contact outside professions and thus may have greater satisfactions with both housework and paid work and have lower anxiety than unemployed women (Igbal et al. 2004).

Traditional role theories suggest that women who are trying to maintain several roles would be expected to experience negative stressful feelings (Mukhopadhay 1996). In contrast, more recent theories suggest that individuals may profit from enacting multiple roles. Performing several roles may increase individual's privileges and resources in their

social environment, assist in establishing social and economic status and security and enhance feelings of self-wealth.

The second objective of the study was to investigate whether coping strategies of married women varies according to family type and employment status. Result showed that family type and employment status had no significant effect on both problem-focused coping and emotion-focused coping. It can be concluded that both the categories adopted the coping strategies in similar pattern.

The third objective of the study was to investigate whether there is any relation between anxiety and coping strategies and the result showed that there were significant positive correlations among anxiety, problem-focused coping and emotion-focused coping strategies. The correlation coefficients of anxiety with problem-focused coping and emotion-focused coping were 0.32 and 0.28 respectively. That means, high anxiety increases both problem-focused coping and emotion-focused coping strategies of the respondents.

Further results showed that considering the severity norm of the anxiety scale, 47 participants were found mildly anxious, 16 were found moderately anxious, 7 were found severely anxious and 7 were found profoundly anxious. Considering the cut-off score for screening norm (47.5) of anxiety scale, 40 married women were found as anxious. Among them 24 were unemployed and 16 were employed women. There is a need to support all married women specially non-working married women in order to increase women's chances to learn, to develop self efficacy and self assistance, to built social network and open access to informational, instrumental and emotional support to avoid the risk of developing anxiety. They should be supported morally and socially to spare some time for their entertainment and pleasurable activities outside homes to distract the monotony of routine work. Moreover, in our society unemployed married women are less educated than employed women. Less educated women cannot adequately solve their problems and manage their stress because of less information about their problematic and stressful issues. Proper education and counseling can provide effective coping mechanisms in various ways. Support from the family, friends and organization can be useful in reducing stress, protecting health and enhancing quality of life of married women in our society.

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