

**WOMEN MENTAL HEALTH: INFLUENCE OF EMOTIONAL INTELLIGENCE  
AMONG VARIOUS SOCIOECONOMIC FACTORS**

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**Abstract**

Emotional intelligence and mental health are related and its determinants could help lead to a better understanding and to more appropriate and effective interventions. The present study is mainly aimed to examine the effect of emotional intelligence on mental health of women. In this regard, The data were collected randomly from 401 Women from different vicinities of East Godavari district in Andhra Pradesh. Two different measures were used for present study, namely; Mental health Inventory (Jagdish & Srivastava, 1983) and Emotional Intelligence (Nutan and Usha, 1999). The data were analyzed using relevant statistical techniques of Descriptive and t- test. The major findings are shown that older age group women significantly have more on perception of reality and environmental mastery of mental health when compared with below 40 years age women. Above 10<sup>th</sup> educated women significantly differed on autonomy dimension of mental health than low educated group. Non working women are self-confident, look for self acceptance and self-identity. Whereas working women able to take decisions easily even in difficult circumstances and continue any task for long time with autonomy. Low income women have shown significant results on group oriented attitude of mental health than higher income group women.

**KEY WORDS:** Mental Health, Emotional Intelligence and Socioeconomic and Women

**Introduction**

**Mental Health:** Mental Health is that “state of mind in which one is free to make use of his natural capacities in an effective and satisfying manner”. If we accept this definition we will most likely view mental health as a determinant of academic achievement. Holmastrom Reijo (1976) examined the results showing that women are mentally stronger than men. The parental relationship at home in childhood has a major bearing on mental health development this or her own abilities, can cope with the normal stresses of life, can work productively, fruitfully and is able to make a contribution to his/her community (The world health reports 2001). Mental health covers an elusive and diffuse field and the term in itself encompasses a multiplicity of meaning. Blanofield (1967) defined mental health as a composite of attitude towards oneself, ability to realize once potential through action, degree of independence from social influence and the ability to perceive realistically the world around. Ferguson (1965) stated that mental health is the ability to cope with one's environment in such a way that one's institutional drives are gratified. They considered that mental illness and mental health are two opposite ends of the continuum on which any individual can be placed depending on the soundness of his mind. There is a general agreement that two terms mental health and mental illness refer to behaviors which are interpersonal in nature and to mental illness is judged to be dysfunctional according to the norms of an observer.

**Women and Mental health :** Women's roles are rapidly changing with technological development and modernization. Therefore, it is necessary that women must be equipped to cope with the new demands and increase their awareness, resources and opportunities for effective participation in development and decision making. Thus, with this view in mind the present study is undertaken by the researcher to trace out the psychological problems faced by professional women to achieve more fulfilling balance between their work and family lives. Whether, family role is a help or hindrance for professional women. In the present study all efforts has been made to adopt a systematic approach and scientific method, so that results are objective, reliable and meaningful. The method and procedures employed by the investigator have been discussed.

**Emotional Intelligence:** Emotional Intelligence is a relatively recent behavioral model, rising to prominence with Daniel Goleman's (1995) book called 'Emotional Intelligence'. When psychologists began to write and think about intelligence, they focused on cognitive aspects, such as memory and problem solving. However, there were researchers who recognized early on that the non-cognitive aspects were also important. David Wechsler defined intelligence as “The aggregate or global capacity of the individual to act purposefully, to think relatively and to deal effectively with his environment”. Be-

sides, the roots of Emotional Intelligence are available in social intelligence (Thorndike, 1920) and even in the definition of intelligence given by Wechsler (1958) who defined intelligence as "The aggregate or global capacity of the individual to act purposefully, to think rationally and to deal effectively with the environment". He pointed out that ability to be adaptive to different situations and coping with life situations successfully also includes in this definition.

**Relation between Emotional intelligence and mental health :** Most of the studied documented that there is strong relation between mental health and emotional intelligence. Sanjeev (2015) studied the emotional competence of the science Pre-service teachers of 120 as a predictor of their mental health. Results indicated that Pre-service teachers of science belonging to general and reserved categories were found significantly different in their mental health. The poor score of mental health of Pre-service teachers belonging to reserved category indicates their weakness in qualities like self-confidence, self-acceptance, self-identity, self-realization, acceptance of others and adjustment in different situations. A study of Katarzyna (2016) investigated EI was negatively correlated with mental health. However, when unemployed persons with a low, average and high EI were compared, it turned out that participants with a low EI were characterized by a significantly worse condition of mental health than participants with an average or high EI. **Garima and Sushil Kumar (2010)** found emotional intelligence and self-efficacy are positively correlated with mental health. It also revealed that male students were better than female students in terms of mental health, emotional intelligence and self-efficacy. **Jafar et al (2010)** supported that is a significant relationship of emotional intelligence with mental health scales and sub-scales scores. In addition, this study revealed that mental health scales and sub-scales scores influences by emotional intelligence.

**Need of the study:** It can be said from the reviews of the literature with regards to the mental and emotional intelligence in various aspects like antecedents, outcomes, predictors of mental health and coping style have pointed out the following aspects need to investigate. It has relation between emotional intelligence and state of mental health. However, Very few studies were found to examine the influence of emotional intelligence on mental health of women. Very less studies carried together to examine the influence of emotional intelligence on mental health and copying styles among rural and urban women

## 2. METHOD

**Objectives of the study:** The main objective of the present study is to examine the effect of emotional intelligence on mental health among rural and urban women.

- To examine the influence of emotional intelligence on mental health among various demographical groups of age, education, occupation and income of women

### Hypothesis:

In order to realize the objectives of the study the following hypotheses have been formulated:

- **H1:** There will be no significant influence of emotional intelligence on mental health on age
- **H2:** There will be no significant influence of emotional intelligence on mental health on Educational Qualification
- **H3:** There will be no significant influence of emotional intelligence on mental health on occupation.
- **H4:** There will be no significant influence of emotional intelligence on mental health on Income

**Measures:** In the present study two different measures were used, namely Mental health Inventory (MHI) and Emotional Intelligence (EI),

**Mental Health Inventory:** In the present study, Mental Health Inventory (MHI) MHI developed by Jagdish & Srivastava (1983) was employed in the assessment of mental health. This inventory measures the positive aspects of mental health. This measure was used to study in various aspects. This assessment has 56 items, are rated on four point scale cover the six dimension of sound mental health: 1) Positive self evaluation; 2) Perception of reality; 3) Integration of personality; 4) Autonomy; 5) Group oriented attitudes; 6) Environmental mastery. The index of split-half reliability by odd-even method (Correlated by Spearman-Brown formula) was found to be .726 for the scale as a whole, and .75, .71, .72, .74 and .79 for its six scales respectively. It has six dimensions with 54 statements. Four alternative responses are given to each statement. The factors of mental health are positive self evaluation (PSE), Perception of reality (PR), Integration of personality (IOP), autonomy (AUT), Group Oriented Attitudes (GOA) and Environmental Mastery (EM).

**Emotional Intelligence Questionnaire :** The Schutte Emotional intelligence scale is standardized by Nutan Kumar Thingujam and Usha Ram (1999) in Indian context which is used for present study. It has seven dimensions with contains 33 items; are namely; 1) appraisal of emotions in the self, 2) appraisal of emotions in the other, 3) emotional expression, 4) emotional regulation of self 5) emotional regulation of others, 6) utilization of emotions in problem solving and 7) uncategorized. The reliability coefficient is found with an alpha coefficient 0.89. The obtained reliable coefficient (fe) 0.83, also seems to be nearly equal, indicating that the test is reliable enough.

**Sample and procedure:** The study was conducted from women, both rural and urban areas of East Godavari district, Andhra Pradesh, India. The data were collected randomly from 401 Women from different vicinities of East Godavari district in Andhra Pradesh. In this sample, it consists of 200 women from rural area and 201 from urban locality. The particulars of age, marital status, locality, occupation, annual income, family particulars other particulars are included.

The women working as Anganvadi employees, teachers, pretty business and other unorganized groups were participated, covers mostly non working women being as house wives included in the sample. Data were collected over the period of 5 months. With regard to illiterate participants, researcher has instructed the purpose of the study to the concern persons and then all the items were answered by researcher based on their responses. Unfilled and missing data forms were not considered for the analysis. All the questionnaires were provided with Telugu translated version along with standard questionnaires for enabling the sample for making them to understand.

**Analysis of the data:** Thus, the total scores obtained by each of 401 women on all the variables were computed. The obtained numerical results were also administrated by graphical representation wherever necessary. All these statistical analysis was carried out using the SPSS statistical package 16 versions. Descriptive statistics were used to describe the data and

find the mean values. 't' test was used to examine the significant influence of emotional intelligence on mental health among rural and urban women.

### 3. RESULTS AND DISCUSSION

This section provides the results regarding the hypothesis related to examine the influence of emotional intelligence on mental health of various socio demographical of age, education, occupation and income groups of women.

**Table-1: AGE:** Significant differences of emotional intelligence on mental health in different age groups.

Dimension	AGE	N	Mean	SD	t- value
Positive Self Evaluation	Younger Group	216	21.60	4.89	
	Older Group	185	22.39	4.74	1.63
Perception of Reality	Younger Group	216	17.88	3.94	
	Older Group	185	19.12	6.28	2.39*
Integration of Personality	Younger Group	216	28.13	4.83	
	Older Group	185	27.57	4.53	1.19
Autonomy	Younger Group	216	13.50	2.75	
	Older Group	185	13.96	3.18	1.56
Group Oriented Attitudes	Younger Group	216	22.33	4.48	
	Older Group	185	23.02	4.58	1.53
Environmental Mastery	Younger Group	216	23.58	4.84	
	Older Group	185	24.45	4.92	2.08*

\*p≤.05 level, \*\*p≤.01 level

Table-1 provides the significant mean difference between Younger women and older women of emotional intelligence on mental health dimensions. The groups were divided on the basis of mean values, those are above average are made into older and below are considered as lower age group. It is found that the groups are statistically significant on perception of Reality and Environmental Mastery. Hence, the above null hypothesis is not accepted. It is observed from the results that the Older age group women were significantly influenced on perception of reality ( $t=2.39$ ,  $p\leq.05$ ) and environmental mastery ( $t=2.08$ ,  $p\leq.05$ ) dimensions of mental health. It means that older (above 40 years) women perceive free from need distortion, absence of excessive fantasy and a broad outlook of the world and also having an efficiency in meeting situational requirement, the ability to work and play, the ability to take responsibilities and capacity for adjustment when compared with below 40 years age women. However, it was disagreed with the present findings above results in relation to age group (Jafar et al (2010)).

**Table-2: Education:** Significant differences of emotional intelligence on mental health in different educated groups.

Dimensions	EDUCATION	N	Mean	SD	t- Value
Positive Self Evaluation	Low education	258	21.76	4.81	
	High education	38	22.45	4.91	0.82
Perception of Reality	Low education	258	18.67	5.76	
	High education	38	18.50	4.17	0.17
Integration of Personality	Low education	258	27.65	4.60	
	High education	38	29.00	4.00	1.72
Autonomy	Low education	258	13.42	2.85	
	High education	38	14.68	3.02	2.54*
Group Oriented Attitudes	Low education	258	22.53	3.64	
	High education	38	22.53	4.05	0.01
Environmental Mastery	Low education	258	23.74	5.06	
	High education	38	25.32	4.29	1.82

\*p≤.05 level, \*\*p≤.01 level

#### Education:

Table-2 exhibits the significant mean difference in between low and high educated women of emotional intelligence on mental health dimensions. It is observed that high educated women found significant result on ( $t=2.54$ ,  $p\leq.05$ ) dimension of mental health than low educated group. It explains that more educated women are independent and not depend on others and able to take quick decisions on any subjects, even in difficult situations. The present findings may be supported that the Mental Health is influenced by Emotional Intelligence in different grade students observed by Jafar and Alireza (2011). In this case with regard to education null hypothesis is not accepted.

**Table-3- Occupation:** Significant differences of emotional intelligence on mental health in working and non working women.

Dimension	OCCUPATION	N	Mean	SD	t- Value
Positive Self Evaluation	Working	200	21.41	5.34	
	Non working	201	22.52	4.20	2.33*
Perception of Reality	Working	200	17.45	4.05	
	Non working	201	19.45	5.94	3.94**
Integration of Personality	Working	200	27.71	4.98	
	Non working	201	28.03	4.40	-0.69
Autonomy	Working	200	14.33	2.98	
	Non working	201	13.08	2.81	4.33**
Group Oriented Attitudes	Working	200	22.80	5.38	
	Non working	201	22.50	3.51	0.67
Environmental Mastery	Working	200	24.47	5.04	
	Non working	201	23.49	4.69	2.01*

\*p≤.05 level, \*\*p≤.01 level

**Occupation:**

Table-3 depicts the significant mean difference in between working and non working women of emotional intelligence on mental health dimensions. It can be said that non working women are significantly differed on positive self evaluation ( $t=2.33$ ,  $p\leq.05$ ) and perception of reality ( $t=3.94$ ,  $p\leq.01$ ) dimensions on mental health. With regards to working, women has significantly scored more on autonomy ( $t=4.33$ ,  $p\leq.01$ ) and environmental mastery ( $t=2.01$ ,  $p\leq.05$ ) dimension of mental health. Hence, null hypothesis is not accepted. It indicates that non working women are self-confident, look for self acceptance and self-identity and also have capabilities to face and accept realities of life. Whereas working women able to take decisions easily even in difficult circumstances and continue any task for long time with autonomy. Kiranben (2014) and Mankani & Yenagi (2012) observed in their study that working women have shown more difference on mental health score compared to non working women showing that they have shown better mental health compared to non working women.

**Table-4: Income:** Significant differences of emotional intelligence on mental health among different income groups

DIMENSION	INCOME	N	Mean	SD	t- value
Positive Self Evaluation	Low income	198	22.23	5.04	
	High income	203	21.70	4.61	1.09
Perception of Reality	Low income	198	18.67	6.33	
	High income	203	18.24	3.74	0.83
Integration of Personality	Low income	198	27.67	5.27	
	High income	203	28.06	4.06	0.85
Autonomy	Low income	198	13.67	3.01	
	High income	203	13.74	2.92	0.24
Group Oriented Attitudes	Low income	198	22.91	4.57	
	High income	203	22.39	4.49	2.16*
Environmental Mastery	Low income	198	24.28	4.63	
	High income	203	23.68	5.12	1.23

\*p≤.05 level, \*\*p≤.01 level

Table-4 shows the significant mean difference of emotional intelligence of women on mental health dimensions on different income group. It was found that low income women have shown significant results on group oriented attitude ( $t=2.16$ ,  $p\leq.05$ ) dimension of mental health than higher income group women. Therefore, null hypothesis is not accepted. These findings indicated that women may follow group oriented attitude like ability to work with more affection and attachment on others and also find the recreation in community.

**Summary and Conclusion:**The present study is mainly aimed to examine the effect of emotional intelligence on mental health among rural and urban women. In this regard, two different measures were used for present study, namely; Mental health Inventory (MHI) developed by Jagdish & Srivastava (1983) and Emotional Intelligence (EI) scale, standardized by Nutan Kumar and Usha Ram (1999), it has 33 items with seven dimensions. The data were collected randomly from 401 Women from different vicinities of East Godavari district, Andhra Pradesh.

**Major finding of the study:** Major findings in Section 1 have shown the significant differences of emotional intelligence on mental health in rural and urban women are provide below

- ☑ Older age group women significantly have more on perception of reality and environmental mastery of mental health when compared with below 40 years age women.
- ☑ Above 10<sup>th</sup> educated women significantly differed on autonomy dimension of mental health than low educated group.
- ☑ Non working women are self-confident, look for self acceptance and self-identity. Whereas working women able to take decisions easily even in difficult circumstances and continue any task for long time with autonomy.
- ☑ Low income women have shown significant results on group oriented attitude of mental health than higher income group women.

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