ABSTRACT: Present research was undertaken to study Occupational Stress among working women. The sample was consisted of 80 working women belonging to 40 teachers, 40 doctors from Ahmedabad City. The age range of participants was taken from 25 to 45 years. Occupational Stress Index by Srivastav & Singh (1984) was used for data collection. To test the null hypotheses t test was used. Results reveals that women working as Doctor do not significantly differ as compare to teacher on role over load, role ambiguity, role conflict. Women working as Doctor significantly differ as compare to teacher Group and political pressure, responsibilities for persons, under participation. Women working as Doctor do not significantly differ as compare to teacher poor peer relation, intrinsic, impoverishment. Women working as Doctor significantly differ as compare to teacher low status strenuous working condition, unprofitability.

KEYWORD: Occupational Stress, Working women

Introduction

The demand for women workers is on the increase everywhere in the world; India is not lagging behind in this. A number of legislations have been enacted in India as well as in other countries to protect the rights and privileges of women workers and accord their due status in the organizations where they are employed. In spite of all these legislative enactments conferring special privileges on women workers, women workers have their own stories to narrate, explaining the various problems with which they are confronted and the sufferings, exploitation, injustice, discrimination etc. to which they are subjected to. In India the situation is more serious and sordid. Indian women workers do not enjoy equal status in matters of payment of remuneration, assignment of tasks and conferring the privileges of promotion and opportunities for professional growth etc., when compared to their male colleagues. Apart from this discriminatory treatment at the workplace, they are also subjected to a variety of humiliation, insult and ill-treatment by their family members, neighbors, colleagues and other members of the society in which they are living. It is this pathetic state of affairs of the women workers that has motivated the present research worker to take up this research study.

With the beginning of 20th century, the women's movement in India had rapidly spread to every nook and corner, making definite efforts in the fields of education and health. Demands for equal status and political rights were made by various women's organizations. The credit for infusing such a great awakening among Indian women must go to great women like Annie Besant, an Irish lady born in 1847 and Margaret E. Cousins, another Irish lady born in 1978, who had devoted their lives to the cause of Indian freedom movement and equality of women with men in all spheres.

The constitution of India provides for equal rights and privileges for men and women. But the principles of equality enshrined in the constitution of India are far from reality. The persistent efforts by planners, social welfare agencies and women's organizations have failed to provide women their rightful place in the society.

Stress

Stress is a common human emotion. We all experience it at various times. The term stress has been used in various disciplines. Stress in engineering is known as “the ratio of the internal force brought into play when a substance is distorted to the area over which the force acts.” In medicine, stress is equated with the general sense of hardship.

In the words of Szilagyi and Wallace, “Stress is an internal experience that creates psychological or physiological imbalance within an individual and results from factors in the external environment, the organizations, or the individual.”

Sarason et al., (1978) define stress as a person’s
assessment of what he or she finds is asked from the environment. In short, stress as the discomforting responses of person in particular situations. “Stress is in harmonious fit between person and the environment, one in which the person's resources are taxed or exceed, forcing the person to struggle, usually in complex way and to cope with.”

Comish & Swindle (1994) defined occupational stress as, “It is a mental and physical condition which affects an individual's productivity, effectiveness, personal health and quality of work.”

Mohanraj (2013) This study is an overall effort to measure the relationship of socio economic factors and level of stress among higher secondary school teachers in Erode district and is mainly aimed to know the various economic and demographic attributes of the teachers.

Eres & Atanasoska (2011) conducted the study it was seen that Turkish teachers have mild stress levels and Macedonian teachers have moderate stress levels. There is a meaningful difference in the stress level points of Turkish and Macedonian teachers. Policy makers are advised to analyze the teacher training and assessment system with the assumption that personal and social characteristics and working conditions may have an effect on teacher stress.

Reddy & Anuradha (2013) Results shows that occupational stress, the researchers have suggested some measures which could prove beneficial to teachers in coping with stress are: improve self esteem, build self confidence, work on building emotional intelligence competencies, develop a good sense of humour, practice yoga and meditation, exercise regularly, foster a supportive friend circle, cultivate hobbies, develop effective communication skills, and seek professional help, if necessary.

Jeyaraj (2013) Result concluded that Aided school teachers have more occupational stress levels than Government school teachers. There is a meaningful difference in the stress level points of Government and Aided Higher Secondary Teachers. Results also showed that teachers who reported greater stress were less satisfied with teaching, reported greater frequency of absences and a greater number of total days absent, were more likely to leave teaching (career intention), and less likely to take up a teaching career again (career commitment).

Wharton & Erickson (1995) investigated that performance of family emotion work had negative consequences for women's job-related well being. Arthur,

Achilles and Shirley (1981) have found that job satisfaction was significantly inversely related to both role-ambiguity and role-conflict.

**Statement of Problem**

In the present research, main aim is to study Occupational Stress of working women. The exact problem of the present research is as under: “Occupational Stress among working women”.

**Objectives**

The main objectives of the present study were as under:

To study and compare Occupational Stress sub scales score role over-load of women working as doctor and teacher.

To study and compare Occupational Stress sub scales score role ambiguity of women working as doctor and teacher.

To study and compare Occupational Stress sub scales score role conflict of women working as doctor and teacher.

To study and compare Occupational Stress sub scales score group and political pressures of women working as doctor and teacher.

To study and compare Occupational Stress sub scales score responsibility for persons working as doctor and teacher.

To study and compare Occupational Stress sub scales score impoverishment of women working as doctor and teacher.

To study and compare Occupational Stress sub scales score profit ability of women working as doctor and teacher.

**Hypothesis**

H0: There will be no significant difference between women working as doctor and teacher on Occupational Stress sub scales score i.e., role over-load, role ambiguity, role conflict, group and political pressures, responsibility for persons, under participation, powerlessness, poor peer relations, intrinsic impoverishment, low status strenuous working conditions, and unprofitability.

H1: There will be significant difference between women working as doctor and teacher on Occupational Stress sub scales score i.e., role over-load, role ambiguity, role conflict, group and political pressures, responsibility for persons, under participation, powerlessness, poor peer relations, intrinsic impoverishment, low status strenuous working conditions, and unprofitability.

**Sample**

For this research work an incidental purposive sampling technique was used for the selection of the participants.

The sample was consisted of 80 working women belonging to
Variables

Independent Variable
Occupation (Doctor And Teacher)

Dependent Variable
Score of 12 sub scales of occupational

Tools

Occupational Stress Index by Srivastav & Singh (1984):
The Occupational Stress index purpose to measure the extent of stress these employees perceive arising from various constitute and conditions of their job. However, stress researchers have developed the scales which measure the stress arising exclusively from job roles (Rizzo, et al 1970). The tool may conveniently be administered to the employees of every level operating in context of industries or other non-production organizations. But it would prove more suitable for the employees of supervisory level and above.

The scale consists of 46 items, each to be rated on the five-point scale. Out of 46 items 28 are ‘true-keyed’ and rest 18 are false-keyed’. The items relate to almost all relevant components of the job life which cause stress in some way or the other, such as, role over-load, role ambiguity, role conflict, group and political pressures, responsibilities for persons, under participation, powerlessness, poor peer relations, intrinsic, impoverishment, low status strenuous working conditions, and unprofitability.

The following table gives an account of the items constituting various sub-scales of the O.S.I. along with their indices of internal consistency.

<table>
<thead>
<tr>
<th>Sub scale of occupational stress</th>
<th>Score of 12 sub scales of occupational stress</th>
</tr>
</thead>
</table>

Reliability:
The reliability index ascertainment by split half (odd-even) method and Cranach’s alpha-coefficient for the scale as a whole were found to be .935 and .90, respectively. The reliability indices of the 12 sub-scales were also computed on the (split half) method. The following Table records the obtained indices.

Validity:
The validity of the O.S.I. was determined by computing coefficients of correlation between the scales on the O.S.I. and the various measures of job attitudes and job behavior. The employee’s scores on the O.S.I. is likely to positively correlate with the scores on the measures of such work-manifest attitudinal and motivational and personality variables which have proves lowering or moderating the level of occupational. The coefficients of correlation between the scores on the O.S.I.

Scoring:
Since the questionnair consists of both true keyed and false-keyed items two different patterns of scoring have to be adopted for two types of items. The responses given to two categories of items for true-keyed 1,2,3,4,5 and for false Keyed 5,4,3,2,1 to the categories of responses.

Procedure
After establishing the rapport each subject was given Occupational Stress Index. All the instructions were strictly followed, which were given by the authors of the test ended with an expression of thanks to the subjects for their cooperation. After completion of data collection scoring of the test will be done by the scoring key of test.

Statistical analysis
To find out the significant difference between two groups on scores of various dimensions of occupational stress index t test was used.

Result & Discussion
As seen in 1.1 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension A role over load with the t test. The t ratio of women working a Doctor and Teacher on role over load is 1.87, which is not significant. It means women working as Doctor do not significantly differ as compare to teacher on role over load. It can be seen in mean score also. The mean score of women working a Doctor is 17.33 (SD 2.77) and mean score of Teacher is 18.48 (SD 2.73).

As seen in 1.1 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension A role over load with the t test. The t ratio of women working a Doctor and Teacher on role over load is 1.87, which is not significant. It means women working as Doctor do not significantly differ as compare to teacher on role over load. It can be seen in mean score also. The mean score of women working a Doctor is 17.33 (SD 2.77) and mean score of Teacher is 18.48 (SD 2.73).

As seen in 1.3 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension C role conflict with the t test. The t ratio of women working a Doctor and Teacher on role conflict is 0.86, which is not significant. It means women working as Doctor do not significantly differ as compare to teacher on role conflict. It can be seen in mean score also. The mean score of women working a Doctor is 16.05 (SD 3.08) and mean score of Teacher is 16.63 (SD 2.92).

As seen in 1.3 of 2nd column, an attempt is made to find out the difference between women working as a Doctor
Table 1 Results of various dimensions of occupational stress (Teacher & Doctor) of working women.

<table>
<thead>
<tr>
<th>Participants</th>
<th>Stress Dimensions</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>T</th>
<th>Levels of Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctor</td>
<td>A-Role Overload</td>
<td>40</td>
<td>17.33</td>
<td>17.33</td>
<td>1.87</td>
<td>NS</td>
</tr>
<tr>
<td>Teacher</td>
<td></td>
<td>40</td>
<td>18.48</td>
<td>18.48</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor</td>
<td>B-Role Ambiguity</td>
<td>40</td>
<td>17.13</td>
<td>2.84</td>
<td>1.43</td>
<td>NS</td>
</tr>
<tr>
<td>Teacher</td>
<td></td>
<td>40</td>
<td>16.28</td>
<td>2.45</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor</td>
<td>C-Role Conflict</td>
<td>40</td>
<td>16.05</td>
<td>3.08</td>
<td>0.86</td>
<td>NS</td>
</tr>
<tr>
<td>Teacher</td>
<td></td>
<td>40</td>
<td>16.63</td>
<td>2.92</td>
<td>2.92</td>
<td></td>
</tr>
<tr>
<td>Doctor</td>
<td>D-Group and Political Pressure</td>
<td>40</td>
<td>13.68</td>
<td>2.66</td>
<td>2.82</td>
<td>0.01</td>
</tr>
<tr>
<td>Teacher</td>
<td></td>
<td>40</td>
<td>16.10</td>
<td>3.49</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor</td>
<td>E-Responsibilities For Persons</td>
<td>40</td>
<td>13.33</td>
<td>2.62</td>
<td>4.02</td>
<td>0.01</td>
</tr>
<tr>
<td>Teacher</td>
<td>F-Under Participation</td>
<td>40</td>
<td>12.80</td>
<td>2.16</td>
<td>3.60</td>
<td>0.01</td>
</tr>
<tr>
<td>Doctor</td>
<td>G-Powerlessness</td>
<td>40</td>
<td>9.30</td>
<td>2.47</td>
<td>4.68</td>
<td>0.01</td>
</tr>
<tr>
<td>Teacher</td>
<td>H-Poor Peer Relation</td>
<td>40</td>
<td>11.98</td>
<td>2.64</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor</td>
<td>I-Intrinsic</td>
<td>40</td>
<td>11.23</td>
<td>2.66</td>
<td>0.80</td>
<td>NS</td>
</tr>
<tr>
<td>Teacher</td>
<td>J-Impoverishment</td>
<td>40</td>
<td>11.75</td>
<td>2.81</td>
<td>1.03</td>
<td>NS</td>
</tr>
<tr>
<td>Doctor</td>
<td>K-Low Status Strenuous</td>
<td>40</td>
<td>11.13</td>
<td>2.63</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teacher</td>
<td>L-Unprofitability</td>
<td>40</td>
<td>10.23</td>
<td>2.37</td>
<td>1.09</td>
<td>NS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>40</td>
<td>10.78</td>
<td>2.14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor</td>
<td></td>
<td>40</td>
<td>11.58</td>
<td>2.90</td>
<td>5.08</td>
<td>0.01</td>
</tr>
<tr>
<td>Teacher</td>
<td></td>
<td>40</td>
<td>8.78</td>
<td>1.94</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor</td>
<td></td>
<td>40</td>
<td>6.83</td>
<td>2.39</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teacher</td>
<td></td>
<td>40</td>
<td>7.33</td>
<td>2.40</td>
<td>0.93</td>
<td>NS</td>
</tr>
</tbody>
</table>

As seen in 1.5 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension E responsibilities for persons with the t test. The t ratio of women working a Doctor and Teacher on responsibilities for persons is 4.02, which is significant at 0.01 level. It means women working as Doctor significantly differ as compare to teacher responsibilities for persons. It can be seen in mean score also. The mean score of women working a Doctor is 16.10 (SD 3.49) and mean score of Teacher is 13.33 (SD 2.62).

As seen in 1.6 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension F under participation with the t test. The t ratio of women working a Doctor and Teacher on under participation is 3.60, which is significant at 0.01 level. It means women working as Doctor significantly differ as compare to teacher under participation. It can be seen in mean score also. The mean score of women
working a Doctor is 14.78 (SD 2.72) and mean score of Teacher is 12.80 (SD 2.16).

As seen in 1.7 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension G powerlessness with the t test. The t ratio of women working a Doctor and Teacher on powerlessness is 4.68, which is significant at 0.01 level. It means women working as Doctor significantly differ as compare to teacher under participation. It can be seen in mean score also. The mean score of women working a Doctor is 9.30 (SD 2.47) and mean score of Teacher is 11.98 (SD 2.64).

As seen in 1.8 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension H poor peer relation with the t test. The t ratio of women working a Doctor and Teacher on poor peer relation is 0.80, which is not significant. It means women working as Doctor do not significantly differ as compare to teacher poor peer relation. It can be seen in mean score also. The mean score of women working a Doctor is 11.23 (SD 2.66) and mean score of Teacher is 11.70 (SD 2.62).

As seen in 1.9 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension I intrinsic with the t test. The t ratio of women working a Doctor and Teacher on intrinsic is 1.03, which is not significant. It means women working as Doctor do not significantly differ as compare to teacher intrinsic. It can be seen in mean score also. The mean score of women working a Doctor is 11.75 (SD 2.81) and mean score of Teacher is 11.13 (SD 2.63).

As seen in 1.10 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension J impoverishment with the t test. The t ratio of women working a Doctor and Teacher on impoverishment is 1.09, which is not significant. It means women working as Doctor do not significantly differ as compare to teacher impoverishment. It can be seen in mean score also. The mean score of women working a Doctor is 10.23 (SD 2.37) and mean score of Teacher is 10.78 (SD 2.14).

As seen in 1.11 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension K low status strenuous working condition with the t test. The t ratio of women working a Doctor and Teacher on low status strenuous working condition is 5.08, which significant at 0.01 level. It means women working as Doctor significantly differ as compare to teacher low status strenuous working condition. It can be seen in mean score also. The mean score of women working a Doctor is 15.58 (SD 2.90) and mean score of Teacher is 8.78 (SD 1.94).

As seen in 1.12 of 2nd column, an attempt is made to find out the difference between women working as a Doctor and Teacher on occupational stress dimension L unprofitability with the t test. The t ratio of women working a Doctor and Teacher on unprofitability is 0.93, which is not significant. It means women working as Doctor do not significantly differ as compare to teacher unprofitability. It can be seen in mean score also. The mean score of women working a Doctor is 6.83 (SD 2.39) and mean score of Teacher is 7.33 (SD 2.40).

Conclusion

Women working as Doctor do not significantly differ as compare to teacher on role over load, role ambiguity, role conflict. Women working as Doctor significantly differ as compare to teacher Group and political pressure, responsibilities for persons, under participation. Women working as Doctor do not significantly differ as compare to teacher poor peer relation, intrinsic, impoverishment. Women working as Doctor significantly differ as compare to teacher low status strenuous working condition, unprofitability.

Reference:


