

Quality of Life of Hindu and Muslim Females – An Investigation

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ABSTRACT

To investigate the effects of community, residential area and employment on quality of life of females ‘Quality of Life Scale’ constructed and standardised by **Sharma and Nasreen (2014)** and a self-made ‘Personal Information Inventory’ were administered on a sample of 200 married females (100 Hindu and 100 Muslim) residing in rural and urban areas of Saran district of Bihar. The age range of married females was from 30 to 50 years. Comparison of scores on quality of life of different groups and sub-groups revealed that Hindu females enjoy better quality of life than Muslim females. Urban females enjoy better quality of life than rural females irrespective of community. Employed females enjoy better quality of life than unemployed females irrespective of community.

Keywords: Quality of life, Females, Hindu, Muslim, Residential area, Employment.

INTRODUCTION

Women have been generally subjected to oppression and suppression through the ages which has resulted in their subordination through the history irrespective of socio-economic, demographic and religious differences. The inferior status assigned to women is a result of social evaluation of her biological activities of child bearing and child rearing as the only one appropriate to her which can be fulfillment in her life. These stereotypes are formed on these bases which became part of cultural tradition and justified and validated their inferior status which accounted for their dependency, degradation and discrimination (**Naeem, 2005**).

Women constitute approximately half of the world population. In spite of this they are placed at different disadvantageous positions on account of gender differences. They have been victims of violence, exploitation and discrimination. Even today women are relegated to second class status which makes them more vulnerable to abuse and less able to protect themselves from discriminations. History has evidences that women have been regarded as the properties of men (**Giri, 2006**).

The modern age is the age of transformation in the status of women all over the world. History reveals that women have struggled towards new freedom and identities. This age has witnessed a surge of consciousness, proliferation of women’s organizations and global conferences and the movement of millions of women towards the process of modernization (**Billson, et al. 2005**). Index of modernization of any society is the position of its women vis-à-vis men, the more balanced the opportunity structure for men and women, the large the role women have in society and consequently the higher their status. In a developing society it is essential that both men and women play equal and

important roles in the developmental efforts. Improvement in inferior status of women, therefore, is necessary for modernization and development (**Chaturvedi, 2003**).

Improvement in status of women is possible only when there is improvement in their quality of life. Quality of life is the interaction between the condition of life and personal values and personal satisfaction with life. It is the individual perception of his status in life in the context of his culture and community and concerns about mental health and personal beliefs. World Health Organization (WHO) describes the quality of life as an individual's perception of his/her own situation in life in the context of culture, the patterns of values in which he lives, and the extent or incompatibility of this with his goals, expectations and interests for mental health, independence and social relationship. Freud believes that quality of life denotes a sense of pleasure and happiness with relief of pain. This is a fundamental goal of human behaviour. Humanistic school of psychologists emphasizes on the existence of good environment for better quality of life. Positive psychologist **Seligman (2002)** views quality of life, satisfaction and happiness important for meaningful life. Considering all the above psychological views quality of life can be defined as the process of integration of the physiological and psychological aspects to form the strongest indicator of attention to the level of comfort, stability and tranquility in the arms of others with satisfaction and well-being developed in different areas of life. **Schalock (2004)** has mentioned eight dimensions of quality of life. These are :-

- The Emotional Quality of Life:- It includes a sense of security, spiritual aspects, happiness, self-concept and satisfaction or conviction.
- Relation between People: - This includes intimate friendship, emotional aspects, family relations, interaction and social support.
- Environmental Quality of Life: - This includes the physical situation, and factors of social security, working conditions, property and social and economic status.
- Personal Upgrading: - This includes the level of education, personal skills and level of achievement.
- Physical Quality of Life: -This includes health status, nutrition, motor activity, health care, health insurance, free time and daily activities.
- Self-determinants: -This includes independence, ability to choose, self-direction, goals and values.
- Social Interaction: -This includes social acceptance, social status, characteristics of the practical environment, integration, social participation and volunteer activity.
- Rights: -This includes privacy, the right to vote, the performance of duties and right to property.

It is clear from above explanations that quality of life manifests different dimensions and the status of the individual on these dimensions determines his/her quality of life. The importance of quality of life has increased in recent years because all the countries of the world are striving for improving the quality of life of their citizens. Consequently there are being conducted different research studies to explore causal factors of better or poor quality of life of individuals. In the field of psychology also there have been carried out different studies on quality of life (**Bonsaksen and Lerdal, 2012; Danner et al, 2001; Moudjahid and Abdarrazak, 2019**). But these studies have not taken into account studies of quality of life of Hindu and Muslim females in the context of their residential area and employment. So, the objective of the research work is to compare quality of life of Hindu and Muslim females in the context of their residential area and employment.

In the light of above objectives the following hypotheses were formulated :-

1. There will be significant difference between Hindu and Muslim females on Quality of life.
2. There will be significant difference between rural and urban groups on Quality of life.
3. There will be significant difference between employed and unemployed groups on quality of life.

METHOD

SAMPLE: - The study was conducted on a sample of 200 married females (100 Hindu and 100 Muslim) residing in rural and urban areas of Saran district of Bihar. The age range of married females was from 30 to 50 years. Out of 200 females 85 females were employed and 115 females were unemployed; 100 females were from rural areas and 100 females from urban areas.

TESTS USED: - Hindi version of ‘Quality of Life Scale’ constructed and standardised by Sharma and Nasreen (2014) was used to measure quality of life of subjects. A Self-made ‘Personal Information Inventory’ was also used which sought personal information from subjects.

STATISTICAL ANALYSIS :- To test the effects of community, residential area and employment on quality of life of females quality of life scores of Hindu and Muslim; rural and urban; and, employed and unemployed sub-groups were calculated separately. Means, S.Ds. and ‘t’-ratios were computed separately in the light of independent variables.

RESULTS AND DISCUSSION

On comparing quality of life scores of Hindu and Muslim groups it is found that Hindu subjects are significantly higher on quality of life than Muslim subjects. The mean quality of life score of Hindu group is 86.65 while that of Muslim group is 78.24 (Table- 1). The obtained ‘t’ ratio is 5.555. This ‘t’ ratio is significant at 0.01 level. Higher score denotes higher and better quality of life whereas lower score denotes lower or poor quality of life. Hindu group has obtained significantly higher mean score than Muslim group. So, Hindu group enjoys better quality of life than Muslim group and this group is significantly higher on quality of life than the Muslim group. Quality of life also indicates satisfaction with life. **Parvin (2022)** reported Hindu females significantly higher than Muslim females on life satisfaction. This indicates that better quality of life of Hindu females has made them more satisfied with their lives. Indirectly this investigation supports her finding.

Table–1 Showing Means, S.Ds. and ‘t’ ratios of Quality of Life Scores – Hindu and Muslim Groups

Groups	N	Means	S.Ds.	df	‘t’ ratios	Level of Sign.
Muslim	100	78.24	10.25	198	5.555	0.01
Hindu	100	86.65	11.14			

On comparing quality of life scores of rural and urban groups it is found that urban subjects enjoy significantly better quality of life than rural subjects irrespective of community. The mean quality

of life score of urban group is 85.52 while that of rural group is 79.37 (Table- 2). The obtained ‘t’ ratio is 4.021. This ‘t’ ratio is significant at 0.01 level. The comparison of rural and urban groups separately in Hindu and Muslim communities also proves that rural urban differences exist despite of variation of community. The mean quality of life scores of Muslim-R, Muslim-U, Hindu-R and Hindu-U sub-groups are 74.87, 81.61, 83.88 and 89.42 respectively. The obtained ‘t’ ratios for Muslim-R x Muslim-U and Hindu-R x Hindu-U compared sub-groups are 3.417 and 2.733 respectively. Both ‘t’ ratios are significant at 0.01 level and in both comparisons higher mean score has been shared by urban group. Higher score denotes better quality of life whereas lower score denotes poor quality of life. Urban group has obtained significantly higher mean score than rural group. So, urban group enjoys significantly better quality of life than rural group. It appears that more social freedom and better amenities available in urban areas have contributed to better quality of life of urban females than their rural counterparts. **Kumar (2019)** reported urban females significantly higher on life satisfaction than rural females. Higher level of satisfaction with life might have also contributed to their better quality of life.

TABLE – 2
Showing Means, S.Ds. and ‘t’ ratios of Quality of Life Scores – Rural and Urban Groups

Groups	N	Means	S.Ds.	df	‘t’ ratios	Level of Sign.
M-Rural	50	74.87	9.45	98	3.417	0.01
M-Urban	50	81.61	10.26			
H-Rural	50	83.88	9.67	98	2.733	0.01
H-Urban	50	89.42	10.58			
Rural	100	79.37	10.15	198	4.021	0.01
Urban	100	85.52	11.44			

Employment of females has been found casting significant effect on their quality of life. It has been found that employed females enjoy significantly better quality of life than unemployed females irrespective of community. The mean quality of life score of employed group is 85.90 while that of unemployed group is 77.77 (Table- 3). The obtained ‘t’ ratio is 5.398. This ‘t’ ratio is significant at 0.01 level. The comparison of employed and unemployed groups separately in Hindu and Muslim communities also proves that employed/unemployed differences exist despite of variation of community. The mean quality of life scores of Muslim-Unemployed, Muslim-Employed, Hindu-Unemployed and Hindu-Employed sub-groups are 72.54, 82.04, 82.41 and 90.12 respectively. The obtained ‘t’ ratios for Muslim-Unemployed x Muslim-Employed and Hindu-Unemployed x Hindu-Employed compared sub-groups are 4.971 and 3.816 respectively. Both ‘t’ ratios are significant at 0.01 level and in both comparisons higher mean score has been shared by employed group. Higher score denotes better quality

of life whereas lower score denotes poor quality of life. Employed group has obtained significantly higher mean score than unemployed group. So, employed group enjoys significantly better quality of life than unemployed group. It appears that more social freedom and better access to amenities due to employment have contributed to better quality of life of employed females than their unemployed counterparts. Our findings support the findings of **Mirzaei, et al. (2014)** and **Kermansaravi, et al. (2012)** who reported better quality of life of employed females in comparison to housewives. Our finding do not support the finding of **Fardi, et al. (2016)** who did not find significant difference between employed and unemployed women on quality of life.

Table-3
Showing Means, S.Ds. and ‘t’ ratios of Quality of Life Scores – Employed and Unemployed Groups

Groups	N	Means	S.Ds.	df	‘t’ ratios	Level of Sign.
M-Unempld	40	72.54	8.98	98	4.971	0.01
M-Empld	60	82.04	9.91			
H-Unempld	45	82.41	9.44	98	3.816	0.01
H-Empld	55	90.12	10.75			
Unemployed	85	77.77	9.87	198	5.398	0.01
Employed	115	85.90	11.36			

The study has finally led to the following conclusions :-

- (1) Hindu females enjoy better quality of life than Muslim females.
- (2) Urban females enjoy better quality of life than rural females irrespective of community.
- (3) Employed females enjoy better quality of life than unemployed females irrespective of community.

REFERENCES

1. Billson, J.M. and Carolyn Fluehr – Lobban (2005) : ‘The Twentieth Century as a Transformative Time for Women’, in Female Well-being, New York, Zed Books Ltd. P- 3.
2. Bonsaksen, T. and Lerdal, A. (2012): ‘Relationships between Physical Activity, Symptoms and Quality of Life among Inpatients with Severe Mental Illness’, British Journal of Occupational Therapy, 75(2), 69-75.
3. Chaturvedi, A. (2003) : ‘Encyclopedia of Muslim Women’, New Delhi, Common Wealth Publishers, P- 2.

4. Danner, D.D., Snowdon, D.A., and Friesen, W.V. (2001) : ‘Positive Emotions in Early Life and Longevity: Findings from the Nun Study’, *Journal of Personality and Social Psychology*, 80, 804-813.
5. Fardi, T. Z., Ansari, N. N. and Isfahani, K.A. (2016) : ‘Comparison of Quality of Life in Working and Housewives of Alborz Province’, in *The Second International Congress on Community Empowerment in the Field of Counseling, Family and Islamic Education*, Tehran.
6. Giri, N. (2006) : ‘Laws, Institution and Women Right in India’, by Tapan Biswal, New Delhi, Viva Book Pvt. Ltd. P-301.
7. Kermansaravi, F., Montazeri, A. and Bayat, B. (2012) : ‘Quality of Life in Employed and Housewife Women: A Comparative Study’, *Payesh Health Monit*, 11(1), 111–116.
8. Kumar, R. (2019) : ‘Life Satisfaction of Women in relation to their Family Size’, *Behavioural Research Review*, 11(2), 6-9.
9. Mirzaei, H., Aghayari, T. and Katebi, M. (2014) : ‘A Study on Life Quality among Married Women in Family Institution’, *Sociol Soc Institutions*, 1(3), 71–93.
10. Moudjahid, A. and Abdarrazak, B. (2019): ‘Psychology of Quality of Life and its relation to Psychology’, *International Journal of Inspiration & Resilience Economy*, 3(2), 58-63.
11. Naeem, H. (2005) : ‘The Problem of Muslim Women in India Special Focus on Kashmiri Women’, in *Women and Gender Justice*, by Asghar Ali Engineer, New Delhi, Kalpaz Publishers, P-345.
12. Parvin, T. (2022) : ‘Life Satisfaction of Females in relation to their Religiosity and Some Background Factors’, Ph.D. Thesis in Psychology, J. P. University, Chapra.
13. Schalock, R.L. (2004): ‘The Concept of Quality of Life : What We Know and do not Know.’ *Journal of Intellectual Disability Research*, 48(3), 203-216.
14. Seligman, M. (2002): ‘Authentic Happiness Using the New positive Psychology to Realize Your Potential for Repeating Fulfillment’, New York, Free Press.
15. Sharma, S. and Nasreen, N. (2014): ‘Quality of Life Scale’, National Psychological Corporation, Agra.