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International Digital Organization for Scientific Research
IDOSR JOURNAL OF ARTS AND MANAGEMENT 2(3): 15-32, 2017.

ISSN: 2550-7974

Depression, Poverty, Social Support and Psychological Distress as Factors in Psychological Well-Being of Working Class Mothers.

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ABSTRACT

Objectives: This study investigated depression, poverty, social support and psychological distress as factors in psychological well-being of working mothers. **Methods:** Participants ($N = 626$, with age range between 25-45 years and M age of 34.56) of working mothers who were randomly selected from Ebonyi State, Nigeria, completed Beck's Depression Inventory (BDI), Social Support Scale (SSS), Kessler's Psychological Distress Scale (KPDS) and Ryff's Psychological Well-Being Scale (PWS) while poverty was elicited through demographic information of the participants. **Results:** The multiple regression statistical analysis indicated positive correlation of depression, poverty, social support and psychological distress on psychological well-being of working class mothers. **Conclusion:** The findings identified that depression, poverty, social support psychological distress are factors in psychological well-being of working class mothers. The findings imply that working class mothers should be assisted in reducing depression, poverty, psychological distress and strengthening their social support in order to increase their psychological well-being.

Keywords: Depression, Poverty, Social Support, Psychological Stress, Psychological Well-Being, Working Class Mothers.

INTRODUCTION

The working class mothers are married women with children employed for wages and salaries especially in governmental and non-governmental organizations [1]. Working class mothers have been related to depression, psychological distress, poor mental health, reduced psychological well-being, low social support, poor socio-economic status due to work demand [2]. However, in Nigeria the phenomenon of working class mothers and its

related variables have not been given adequate attention. Recently, a few studies have been done on the topic of depression, poverty, social support, psychological stress, and psychological well-being and working class mothers in a Nigerian sample [3]. The present study is an attempt to investigate depression, poverty, social support and psychological distress as factors in psychological well-being of working class mothers in a Nigerian sample. Working class mothers may be prone to depression, psychological distress, low socio-economic status (poverty) and low social support because they bear the double burden of housework and jobs outside the home. Because they have to work in two environments, one is the office environment and the other is home environment. Both are vastly different from one to another. Stress arising from working class mothers' results to depression, psychological distress, poor mental health, insomnia and hypertension and low psychological well-being [2]. Psychological well-being has been described as the cornerstone of emotionally, physical and mental health of individuals, also as a dynamic concept that includes subjective, social, and psychological study, depression dimensions as well as health-related behaviours [3]. In this study, depression is one of the major variables as subject of investigation. Depression is a normal and natural response to stressful event, whether work overload, job loss, loss of physical health, or relocation. Working class mother's stress and conflict at work contribute to depression. Symptoms of depression include feelings of sadness, hopelessness, helplessness, anxiety, irritability, agitation, fatigue, low energy, and a reduced activity level are common, and there is also withdrawal from social contact, loss of interest in previously enjoyed activities, and low job performance including sex. [4].

[5], examined the level of depression among working and non-working women, using 100 working and 98 non-working married women who were recruited through purposive sampling technique. Beck Depression Inventory (BDI) was used to assess the level of depression. The result showed that non-working women have more depression tendencies as compared to their working women counterparts. [2], investigated the relationship

between marital adjustment, stress and depression among working and non-working married women and found highly significant relationship between marital adjustment, depression and stress. In the same vain, [6] investigated the prevalence of depression in the postpartum period and its relationship with perceived stress and social support in first time mothers and fathers and found that perceived stress, social support, and partner's depression were significantly associated with depression.

Another interesting variable in this research is poverty, which described as lack of income and productive resources sufficient to ensure a sustainable livelihood without hunger and malnutrition, ill-health, limited or lack of access to education and other basic services, increased morbidity and mortality from illness, homelessness and inadequate housing, unsafe environment and social discrimination and exclusion [7]. There are two basic definitions of poverty in common use namely absolute poverty and relative poverty. Absolute poverty normally refers to a state in which income is insufficient to provide the basic needs required to sustain life, example feed and shelter children. Relative poverty refer to the wider implications of living in poverty, such as the inability to participate or contribute to society on an equal basis because of a lack of sufficient income. Relative poverty (often defined as falling below 50% or 60% of the national median household income). Absolute poverty is defined as falling below an objective external standard of the cost of meeting the most basic needs [8] & [9]. It has been widely documented that poverty is negatively associated with health and psychological well-being workers [10], [11] & [12]. Low-income working class mothers with young children are particularly at high risk for low psychological well-being. Mothers on welfare possess an increased risk for high depression and psychological distress because they experience stressors such as persistent welfare dependence and inadequate social support. Research suggests that poverty weakens a mother's ability to cope with new problems and stressors, as well as her ability to use various types of social support [13].

[4] found poverty to be one of the life conditions associated with poor psychological well-being. A substantial amount of research documents the relationship between psychological well-being and poverty [14] , [15] & [3]. Other studies that revealed positive predication includes [16] & [17].

In another development, psychological distress is a remarkable discomforting, passionate state, experienced by a single person because of particular stress or requests that result in mischief, either provisional or changeless, to the individual will be utilized [18]. Psychological distress is characterized as the enthusiastic condition that one feels in light of needing to adapt to circumstances that are disquieting, dissatisfaction, or saw as unsafe or threatening [19]. Similarly the psychological distress is a general term that is used to describe unpleasant feelings or emotions that impact the level of functioning. It is a psychological discomfort that interferes with the activities of daily living. Psychological distress can result in negative views of the environment, others and the self. Sadness, anxiety, distraction, and symptoms of mental illness are manifestations of psychological distress [20] & [21]. The relationship between psychological distress and psychological well-being are complex as two contending theories have emerged in order to explain the underlying dynamics, such mirrored hypothesis, which suggested that the relationship between psychological well-being and psychological distress highly correlated with one another; as psychological distress worsens, psychological well-being is expected to decrease.

The theory of distinct hypotheses [22] aptly explains the relationship between psychological distress and psychological well-being. The distinct hypothesis offers the notion that psychological well-being and psychological distress only moderately correlated with one another; when psychological distress worsens (e.g., symptoms of depression, stress and anxiety are treated), psychological well-being does not necessarily decrease [23]. To date, researchers have reported findings supporting both the mirrored and distinct hypotheses which include [22] & [24].

[25] carried out study on psychological distress, depression, anxiety, stress, and exercise in Australian and New Zealand mothers using 3601 Australia and New Zealand mothers with at least one child under the age of 5 years. Self-reported short-form version Depression Anxiety Stress Scale was used for data collection. Results indicated that mothers had significantly poorer psychological well-being than the general Australian population. Similarly,[26] investigated the relationship of mindfulness with psychological well-being and psychological distress and assessed the role of self-regulation and autonomy as mediating variables and mechanisms of mindfulness and findthat mindfulness was negatively and highly correlated with psychological distress and was positively and highly correlated with psychological well-being.

Another interesting psychological and sociological variable in this research is social support. [27] defines social support as the presence or amount of social relationships, the perception of available assistance, and the receipt of assistance. Social support is a care resource that can be received from family, friends, colleagues, and healthcare personnel [21]. Social support can be divided into two categories: emotional support and instrumental support. Emotional support also includes appreciation for others, trust, and listening [5]. Instrumental support is behaviour that provides tangible assistance [27].

Theoretical Perspective

Job Demand-Control Theory [28] could best be used to lay the theoretical basis of this research study. The JDC model postulates that job strain results from the interaction between two dimensions of the work environment: psychological job demand and job control. Psychological demands traditionally referred to workload, operated mainly in terms of time pressure and role conflict [28].

The JDC theory suggests that individuals experiencing high demands paired with low control are more likely to experience psychological strain, work-related stress, and, in the long term, poor physical and mental health. The model was later extended to include a social dimension: social support. The JDC's model postulates that social support can

moderate the negative impact of job strain on worker's physical and mental health. This model suggests that the most at-risk group of poor physical and mental health are those workers who are exposed to job strain (high demands and low control) paired with low workplace support (a phenomenon referred to as iso-strain).

RATIONALE OF THE STUDY

The purpose of this research is to assess depression, poverty, social support and psychological distress as factors in psychological well-being of working class mothers in a Nigerian sample. Researches show that most of the working class mothers are dissatisfied with their job. They are depressed, poor and psychologically distressed and they cannot look after them very well as a result of work overload, family conflicting with job demand [29]. Due to these factors they feel depressed and psychologically distressed. The present study is sort to investigate which of the variables: depression, poverty, social support and psychological distress significantly correlate with psychological well-being of working class mothers in a Nigerian sample.

OBJECTIVES OF THE STUDY

1. To investigate depression as factor in psychological well-being of working class mothers.
2. To determine whether poverty is a factor in psychological well-being of working class mothers.
3. To assess psychological distress as a factor in psychological well-being of working class mothers
4. To establish whether social support is a factor in psychological well-being of working class mothers

RESEARCH QUESTIONS

1. To what extent does depression correlate with psychological well-being of working class mothers?

2. To what extent does poverty correlate with psychological well-being of working class mothers?
3. How far would psychological distress correlate with psychological well-being of working class mothers?
4. Does social support correlate with psychological well-being of workingclass mothers?

RESEARCH HYPOTHESES

In tandem with the afore-mentioned objectives and research questions, the following hypotheses were postulated and tested.

1. Depression will statistically significantly correlate with psychological well-being of working class mothers.
2. Poverty will statistically significantly correlate with psychological well-being of working class mothers
3. There will be statistically significant relationship between psychological distress and psychological well-being of working class mothers.
4. Social support will be statistically significantly correlated with psychological well-being of working class mothers.

METHOD

PARTICIPANTS

Six hundred and twenty six participants ($N = 626$, with age range between 25-55 years and M age of 36yrs) of working class mothers who were randomly selected from Abakaliki, Ebonyi and Izzi Local Government Areas of Ebonyi State, Nigeria. Participants included respondents with varying educational levels, that is, Primary (FSLC; $N = 100$), Secondary ($N = 146$), First degree ($N = 218$), and Masters ($N = 162$). All the participants volunteered to participate in the study.

INSTRUMENTS

PSYCHOLOGICAL WELL-BEING

Psychological well-being scale [4] was used to measure the dimensions of psychological well-being which includes; self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth. Its Cronbach's alpha was .63 for autonomy, .53 for environmental mastery, .78 for positive relations with others, .73 for self-acceptance, .66 for personal growth, and .74 for purpose in life. [29]reported a reliability co-efficient alpha of .84; [7] reported Cronbach's alpha of .70 using Nigerian samples.

Beck Depression Inventory

The BDI is designed to assess the severity of depression among the psychiatric patients as well as possible depression in normal population. The self-report questionnaire is rated on a four-point scale ranging from 0 (no symptom) to 3 (severe symptom). The BDI assessed 21 symptoms and attitudes of participant's. The BDI score was obtained by summing the ratings given by the interviewer for each of the 21 items. The overall depression scores range from 0 to 63 and normally divided into four categories. Scores of 0 to 9 were considered within the normal range or asymptomatic, scores of 10 to 15 indicate mild depression, scores of 16 to 23 indicate moderate depression and scores of 24 to 63 indicate extremely severe depression. The questionnaire is easily administered and takes about 5 - 10 minutes to complete. The BDI demonstrates high internal consistency, with alpha co-efficients of .86 and .81 for psychiatric and non-psychiatric populations respectively. In a revalidation study, [29] reported a reliability coefficient alpha of .81 in their study using Nigerian sample.

The Kessler Psychological Distress Scale

The scale consists of 10 questions on non-specific psychological distress and is about the level of stress, anxiety and depressive symptoms a person may have experienced in the most recent four-week period. The response categories for each of the 10-items are: 1. All of

the time, 2. Most of the time, 3. some of the time, 4. A little of the time, 5. none of the time. The sample item include: Did you feel tired out for no good reasons?, Did you feel nervous?, Did you feel so nervous that nothing could calm you down?.The values of the kappa and weighted kappa scores ranged from 0.42 to 0.74 which indicates that K10 is a moderately reliable instrument. Also with internal reliability of the scale was excellent (Cronbach's $\alpha = 0.89$). [5] reported a reliability coefficient alpha of .80 using Nigerian sample. [8] reported a reliability coefficient alpha of .70 in their study using Nigerian sample

SOCIAL SUPPORT

Social support was assessed using the Multi-dimensional Scale of Perceived Social Support developed by [19]. The scale is a 12-item instrument with three subscales of support from family with items like My family is willing to help me make decisions; friend with items like I can count on my friends when things go wrong; and significant others with items like There is a special person with whom I can share my joys and sorrows. There were 4 items per subscale. The scale was scored on a 7-point Likert scaling model ranging from 1 = very strongly disagree through 4 = neutral to 7 = very strongly agree. The Cronbach's alphas for the total scale range from .88 to .90 in the general population, with good test-retest reliability (.70). Moos (1990) reported the internal consistency and test-retest reliability to be satisfactory within a range of 0.56 to 0.89. [7] reported a reliability coefficient alpha of .80. Also [9] reported a coefficient alpha of .85 using Nigerian sample.

PROCEDURE

The researchers and their research assistants established rapport through a letter of identification concerning the purpose of the research to the participants. Six hundred and thirty six (636) questionnaires were distributed using convenient sampling technique. The participants were fully informed that they were not under any obligation to participate and that they had the right to withdraw at any point they felt inclined to discontinue with the exercise. It was explained to on the participants that there were no right or wrong answers

and they were encouraged to be honest in their responses. Six hundred and thirty six (636) questionnaire were distributed and returned while 10 were discarded due to incomplete filling. The remaining 626 copies of the questionnaire were used for statistical analysis.

DESIGN AND STATISTICS

The design of this study involved a cross-sectional survey design. Multiple regression analysis was deployed for data analysis using computer software (SPSS, Version, 20.00)

RESULTS

Table 1: Showing the Mean and Standard Deviation of Depression, Poverty, Psychological Distress and Social Support as Predictors of Psychological Well-being of Working Class Mothers.

| Variables | Mean | Standard Deviation |
|--------------------------|-------|-----------------------|
| Psychological well-being | 53.11 | 16.70 |
| Depression | 28.34 | 5.62 |
| Poverty | 17.63 | 4.60 |
| Psychological distress | 26.04 | 5.03 |
| Social Support | 15.26 | 3.56 |

Note: N = 626

Table 1 shows that participants who are depressed had the greatest mean and standard deviation of (M=28.34, SD =5.62) on psychological well-being of working class mothers while psychologically distressed participants reported mean score and standard deviation on psychological well-being of working class mothers, (M= 26.04, SD= 5.03), followed by poverty which had mean score and standard deviation of (M= 17.63, SD=4.60) on psychological well-being of working class mother. The output of the analyses also revealed

that participants social support had the lowest mean and standard deviation on psychological well-being of working class mothers ($M=15.26$, $SD=3.56$).

Table 2: Shows ANOVA Summary on Depression, Poverty, Psychological Distress and Social Support as Predictors of Psychological Well-being of Working Class Mothers.

| Model | SS | df | MS | F | Sign |
|------------|-----------|-----|----------|--------|-------|
| Regression | 47439.777 | 2 | 18293.18 | 110.50 | 0.000 |
| Residual | 87136.810 | 616 | 918.5 | | |
| Total | 144576.59 | 624 | | | |

- Predictors: (Constant), depression, poverty, psychological distress and social support.
- Dependent Variable: Psychological well-being. Table 2 revealed that depression, poverty, psychological distress and social support as factors affecting psychological well-being of working class mothers ($R=0.51$, $R^2=0.40$, Adjusted $R^2=0.36$, $F(2,616)=110.50$, $P<0.000$).

Table 3: Shows the Hierarchical Regression Analysis for Variables of Depression, Poverty, Psychological Distress and Social Support as Factors in Psychological Well-being of Working Class Mother

| Variable | B | β | T | Sign | SD. Error |
|------------------------|------|---------|-------|-------|-----------|
| Depression | 3.47 | 0.81 | 15.02 | 0.000 | 0.41 |
| Poverty | 1.44 | 0.70 | 9.12 | 0.000 | 0.38 |
| Psychological Distress | 2.72 | 0.79 | 13.10 | 0.000 | 0.21 |
| Social Support | 0.40 | 0.10 | 5.18 | 0.000 | 0.17 |
| . | | | | | |

$r=0.51$; $r^2=0.40$; adjusted $r^2=0.36$. $F(2, 616)=110.50$, $P<0.000$

The results in table 3 show that depression significantly correlates with psychological well-being of working class mothers ($\beta = .81$, $t = 15.02$, $P < .000$). Also, Poverty significantly correlates with psychological well-being of working class mothers ($\beta = .70$, $t = 9.12$, $P < .000$). The result also revealed that psychological distress has a positive significant correlation with psychological well-being of working class mothers ($\beta = .79$, $t = 13.10$, $P < .000$). The result indicated that social support has a positive significant correlation with psychological well-being of working class mothers ($\beta = .10$, $t = 5.18$, $P < .000$).

DISCUSSION

The current study investigated depression, poverty, psychological distress and social support as factors in psychological well-being of working class mothers in a Nigerian sample. The outcome of statistical analysis revealed that depression was statistically correlated with psychological well-being of working class mothers. This study supports with the finding of [10] who carried out a study on mental health and depression among working and non-working women and found a significant difference in mental health and depression with respect to both working and non-working women on mental health and depression. Similarly [3] in a separate study on poverty, social support and psychological distress as predictors of psychological well-being of working mothers in a non-western culture and found a positive prediction of poverty, social support and psychological distress on psychological well-being of working mothers. Other researchers that supported this result include [8].

The results also revealed that poverty is a significant factor in the psychological well-being of working class mothers. The result conformed with the postulation of poverty as statistically significant correlate with psychological well-being of working class mothers. The findings of this study is in consonance with the work of [5] who found poverty to be one of the life conditions associated with poor psychological well-being. In the same vein Shek (2010) agrees that increase in poverty is associated with low psychological well-being

of working mothers. It is also consistent with the work of [7] who found that poverty is positively related to psychological well-being.

The results of the study equally revealed that psychological distress was positively correlated with psychological well-being of working class mothers. This result confirms the third hypothesis which stated that psychological distress would have statistically significant correlation with psychological well-being of working class mothers. The results agree with findings [31] who found that psychological distress predicted psychological well-being of working mothers. Also, [24] found a positive significant relationship between psychological distress and psychological well-being of working mothers. This finding is in line with several researches that have studied this relationship and found a significant positive relationship [18], [32], [33]; [34] [30],[35] and [36].

The result of the study also supports the fourth hypothesis which stated that social support statistically significantly correlate with psychological well-being of working class mothers. This finding is similar to that found by [37] who examined the relationship between marriage, social support, and psychological health among impoverished, rural mothers and found a positive relationship between social support and psychological well-being of mothers. Also [38] reported that social support is a stress reducer because it provides effective coping resources and helps people view events as less stressful than if they were handling the events in isolation. The researchers also found that social support is associated with well-being which might promote psychological health. Other researchers that supported positive prediction of social support on psychological well-being [39], [38] [40], [41] and [42].

CONCLUSION

The present study examined depression, poverty, psychological distress and social support as a factors in psychological well-being of working class mothers. The study found significant correlation between depression, poverty, psychological distress and social support on psychological well-being of working class mothers. In addition, it established

that depression and psychological distress are that most significant factors in psychological well-being of working class mothers closely and followed by poverty and social support.

IMPLICATIONS OF THE STUDY

The implications of the present research study include the following:

1. The findings of this research could be helpful to develop insight in our society about the critical issue of working class mother's depression and psychological distress challenges.
2. The findings could also contribute in taking some steps in managing working class mother's social support.
3. It will also help to improve the quality of life, and take positive steps to handle the issues of poverty in our society at large by both government and non-governmental organisations.

LIMITATIONS OF THE STUDY

Although the current study provided an important contribution to literature in the area of depression, poverty, psychological distress, social support, and psychological well-being, there are a number of limitations that need to be considered. First, it is important to note that this study involved only the questionnaire. The study from which the sample was drawn was not explicitly designed to investigate the experiences of mothers with various classifications of depression, poverty, psychological distress and social support; therefore only available variables could be used to examine the relationships between poverty, psychological distress, social support and psychological well-being of working class mothers. Specifically sources of depression, poverty, psychological well-being and social support, made it difficult to draw conclusions about how poverty, psychological distress and social support may have impacted on psychological well-being of working class mothers with error proof finality.

Another limitation is the number and ratio of working mothers levels of education. With a disproportionate population of mothers to minority mothers, this study did not provide an accurate report of how poverty, psychological distress and social support affect psychological well-being of working class mothers. Additionally, results cannot be generalized for minority working class mothers.

The study of other variables, such as change in socio-economic status, personality, locus of control addition of depression, poverty, psychological distress and social support, change in employment could give more insight into what is influencing the improvement of psychological well-being of working class mothers.

SUGGESTIONS FOR FURTHER STUDY

In the light of constraints encountered by this study, it is hoped that the underlisted suggestions would improve and strengthen further studies:

1. The participants should be enlarged and made robust enough so that the findings can be generalized strongly.
2. The data should be collected from other areas and sources in order to authenticate the findings of the research.
3. There should be more time frame for data collection

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