

“Mental health problems of children of working mothers and mothers who were housewives”

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Abstract

Introduction: We live in a modern and competitive society. So, it has been seen in recent years that women, in the course of time, have set feet in working outside of home gradually. In this scenario, working mothers face more obstacles in child rearing than mothers who were housewives for they have to play dual roles. Sometimes they have to leave their jobs for childrearing. Because it puts the healthy childhood at risk as the maternal affection is significant in early developmental years that impacts throughout the life of a person.

Aim of the study: The aim of this study was investigating the mental health problems of children of working mothers and mothers who were housewives.

Methods: This study was conducted in department of Psychiatry of Bangabandhu Sheikh Mujib Medical University, Prottoy medical clinic, university of Dhaka and residential areas of Mirpur, Muhammadpur, Mailbag, Mogbazar and Notunbazar in Dhaka city. The study period was from February, 2021 to August, 2022. It was a Quantitative study where 100 working mothers and 100 mothers who were housewives of different backgrounds were taken purposefully. Strength and Difficulty Questionnaire translated and validated by M. S. I. Mullik for Bangladeshi children was used to investigate the mental health problems of children of working mothers and mothers who were housewives.

Result: It was found that the number of children with mental health problems of housewives (32) was significantly higher than the children with mental health problems of working mother (17) in respect of hyperactivity disorder and the significance level was 6.08 (*P<.05). According to conduct problem the number were 30 and 24 respectively but the difference is not significant and the level is 0.913 (0.428). For the emotional disorders the number were also high in the children of housewives (34) than children of working mother (26) though not significant and the level is 1.947 (0.215). It also revealed that children of working mother (mean- 3.64, SD- 1.726) faced more peer problem than the children of housewives (mean- 2.84 and SD- 1.884). But the mean of children of working mother (6.83) was higher than children of housewives (5.20) in pro social behaviour and the significance level is 4.09* (*P<.01).

Conclusion: This study revealed that only hyperactivity disorder is significantly high in the children of working mother than the children of housewives. But children of working mother have better pro social behavior. The knowledge of the current study can be helpful for the mental health professionals as well as the mothers, so that they would make effective treatment and decision for their children.

Key words: Working mother, House-wives, Child rearing.

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I. Introduction

The impact of child mental health problem is serious and causes trouble in the society. More than 40% of population of Bangladesh is children⁴. Mental health problems of children can disrupt their daily life at home, at school or in the community. Without help, mental health problems can lead to dysfunction in mental process, school failure, social isolation, alcohol or other drug abuse, family discord, violence or even suicide. This causes distress in family as well as whole society. Working mothers refer to women who are mothers and who work outside the home for income and apart from working outside, they perform at home in raising their children. So they have to perform their roles as a service-holder as well as a home-maker⁵. Stress loads can be quite high amongst working mothers and these may often reflect in their relationships at home and child rearing. Some researches on impact of working and non-working mothers showed both positive and negative results⁶. In a study it has been found that the frequency of behavioral difficulties is higher among children of working mothers than the home-makers⁷. On the other hand, this ratio is more among children of home-makers than the working mothers⁶. In addition to this, another perspective has been found that working outside increases socialization and this process decreases the level of anxiety and ventilates the feeling of depression which are absent among non-working mothers⁸. In consideration to our context, at any condition, being mother by giving birth to children and raising them up is the most expected role in the society of Bangladesh. Being a mother is the only significant role for the women as well as for the family. Everyone prioritizes the family duties and responsibilities only rather than building up or focusing on career. This is relevant till today and mother's job reflects negatively on the child and their self-image also. There is a traditional perspective that mothers should be at home with young children. Many observers condemned working mothers as selfish, unnatural and even dangerous to their children and society⁹. In Bangladesh no research has been done to see whether mother's employment creates any mental health problems on their children or not. Moreover, the major stresses of being a working mother remain lack of time, and a feeling of guilt, due to perceived neglect of the parenting role. Sometimes they have to leave their jobs because of childrearing, though rewards are many, including personal benefits, financial rewards, and improved family life. So, this is a burning issue to know whether the children of working mothers are suffering from mental health problems more than children of mothers who were housewives. The objective of this study was to assess mental health problems of children of working mothers and mothers who were housewives and to see whether there was any difference between the children of working mothers and mothers who were housewives in respect of mental health problems.

Objectives

a) General objective:

- To investigate the mental health problems of children of working mothers and mothers who were housewives.

b) Specific Objectives:

- To compare the prevalence and severity of mental health problems in children of working mothers and mothers who were housewives.
- To investigate the impact of maternal employment on the mental health and well-being of children.
- To identify the factors that may influence the mental health of children of working mothers.

II. Methodology & Materials

This was a Quantitative study and was conducted in the Department of Psychiatry of Bangabandhu Sheikh Mujib Medical University (BSMMU), Shahbag, *Prottoy medical clinic, university of Dhaka and residential areas of Mirpur, Muhammadpur, Mailbag, Mogbazar and Notunbazar in Dhaka city*, Bangladesh during the period from February, 2021- August, 2022.

Samples

The sample of the present research consisted of 200 mothers, out of them 100 were working mothers and 100 were mothers who were housewives. The samples were collected by purposeful sampling technique. The age range of participants was between 19 to 55 years. Their educational qualifications were from primary to post graduation and they belonged to lower to upper social class with urban background. Both the groups were matched in terms of age, education, monthly family income, and children's age (4-16 years old).

Measures used

At first a demographic questionnaire was given to get the personal information of the participants like age, sex, educational qualification, socioeconomic status, etc. Then Bengali translated version of Strengths and Difficulties Questionnaire³ was administered. It is a widely accepted Questionnaire screening for mental health problems in Bangladeshi children. The Strengths and Difficulties Questionnaire (SDQ) is a small behavioral screening questionnaire. It has 25 items on psychological attributes, some positive and others negative. These 25

items are divided between 5 scales: 1) emotional problems (5 items) 2) conduct problems (5 items) 3) hyperactivity/inattention (5 items) 4) peer relationship problems (5 items) 5) prosocial behaviour (5 items). These 25 items are included in questionnaires for completion by the parents of 4-16 year old children¹⁰. The two-sided versions of the SDQ with the 25 items on strengths and difficulties on the front of the page and an impact supplement on the back. Impact supplement questions ask whether the respondent thinks the child has a problem, and if so, enquire further about chronicity, distress, social impairment, and burden to others. This provides useful additional information for clinicians and researchers with an interest in psychiatric caseness and the determinants of service use¹¹. The reliability and validity of the SDQ make it a applicable short measure of the adjustment and psychopathology of children and youth. The speculated five-factor structure (emotional, conduct, hyperactivity-inattention, peer, prosocial) was confirmed and the internalising and externalising scales were relatively 'uncontaminated' by one another. Reliability was generally acceptable, whether determined by internal consistency (mean Cronbach's alpha: 0.73), cross-informant correlation (mean: 0.34), or retest stability after 4-6 months (mean: 0.62). SDQ scores above the 90th centile speculated a substantially raised probability of independently diagnosed psychiatric disorders (mean odds ratio: 15.7 for parent scales, 15.2 for teacher scales, 6.2 for youth scales). Goodman R¹². The various version of the SDQ were translated into Bangla by MSI Mullick³, after clarifying possible ambiguities in the English with R. Goodman¹², who wrote the original version. Three psychiatrists, a psychologist, a general practitioner, a journalist and a teacher made independent back translation. There were few differences between the original and the seven back translations-discrepancies were resolved by panel discussion. Great care was taken into ensure that the translation was culturally sensitive and understood by all Bangla-speakers irrespective of their social and educational backgrounds³. MSI Mullick³ also examined the potential suitability of the Strengths and Difficulties Questionnaire(SDQ) for Bangladeshi children. SDQs were delivered to the parents and teachers of 261 Bangladeshi 4-16 year olds: 99 were taken from a psychiatric clinic and 162 were from the community. Self-report SDQs were finished by 11-16-year-old children from the clinic. Samples were assigned psychiatric diagnoses blind to their SDQ scores.He found that,SDQ scores distinguished well between community and clinic samples, and also between children with different psychiatric diagnoses in the clinic sample. A simple algorithm based on SDQ scores was used to speculate whether children had hyperkinesis, conduct disorders, emotional disorders or any psychiatric disorder-rates of predicted disorder varied markedly between clinic and community samples. It is a cheap and effective method for detecting child psychiatric problems for developing country like- Bangladesh.

Procedures

For this Quantitative study total 200 participants were selected. At first their written ethical consents have been taken. They were given assurance that their data would be kept confidential and those will be used for the research purpose only. After that the researchers asked to fill the demographic questionnaires to the participants and then the Bengali translated version of Strengths and Difficulties Questionnaire (SDQ) was given to them. By SDQ participants rated their children. The respondents were instructed to read the items of the scales attentively and were asked to give tick (√) marks in the appropriate answers. They were also requested not to omit any item in the questionnaire and informed that there was no right or wrong answer. Thus the data were collected and it took 5 to 10 minutes for each individual respondent and then those were analyzed. All data were collected approximately within one year (February, 2021- August, 2022).

III. Result

Table I Shows that *the number of children with mental health problems of housewives (32) was significantly higher than the children with mental health problems of working mother (17) in respect of hyperactivity disorder and the significance level was 6.08 (*P<.05). According to conduct problem the number were 30 and 24 respectively but the difference is not significant and the level is 0.913 (.0428). For the emotional disorders the number were also high in the children of housewives (34) than children of working mother (26) though not significant and the level is 1.947 (0.215).*

Table I: According to sub scale of SDQ, mental health problems of children of working mothers and house-wives.

Suspected disorder	Number of problematic children (House-wife)	N	Number of problematic children (working mother)	N	Chi-square value
Hyperactivity	32	100	17	100	6.08* Significant difference
Conduct	30	100	24	100	0.913 (0.428) Not Significant
Emotional	34	100	25	100	1.947 (0.215) Not significant

*p<.05

Table II Shows that *children of working mother (mean- 3.64, SD- 1.726) faced more peer problem then the children of housewives (mean- 2.84 and SD- 1.884).*

Table II: Peer problem of two groups

Peer problems	Children of House-wife		Children of Working mother		t-value
	Mean	SD	Mean	SD	
	2.84	1.884	3.64	1.726	3.131* Significant

***P<.01**

Table III Shows that In accordance of pro social behavior number of children of working mother is significantly greater than children of housewives and the significant level is 4.09* (*P<.01)

Table III: Strength (Pro-social behavior) of two groups

Children of Working mother		Children of House-wife		t-value
Mean	SD	Mean	SD	
6.83	2.507	5.20	3.098	4.09* Significant

***P<.01**

Table IV shows that according to statement of working mother about their children not bad was 84 and bad was 16 and according to the housewife mother's not bad was 72 and bad was 28.

Table IV: Impact of mental health problems of two groups

Mother types	Not bad	Bad	Chi-square value
No of Children of Working mother	84	16	4.196* Significant
No. of Children of House-wife	72	28	

***P<.05**

IV. Discussion

In this study it was found that according to three suspected disorders (hyperactivity, conduct, emotional) the numbers of children of mothers who were housewives are higher than number of children of working mother. The difference is statistically significant in respect of suspected hyperactivity disorder. In a Saudi Arabian study, it was found that School boys whose mothers were mothers who were housewives had high prevalence of hyperactivity disorder compared to those whose mothers were working outside¹³. A study conducted in Pakistan showed that children of working mothers experience less emotional distress and more anger control as compared to the children of non-working mother. Previous research had found that children were not adversely affected by having working mother. It may be because women, who adapt well to work, also tend to have favorable psychological and emotional experiences while bearing a child¹⁴. Besides, the self-esteem of a working mother increases as an economic value is being added and at the same time it decreases the feeling of depression. It benefits the child developing positive self-image in children, they also have better academic achievement. The present research revealed that in respect of peer problems the mean score of children of working mother (3.64) is significantly higher than the mean score of children of mothers who were housewives (2.84). According to Child Research Net¹⁵, compared to full-time and the part-time working mothers, mothers who were housewives appear to be concerned more about teaching children to get along with friends. But according to the mean score of two groups both group are belonged to below cut off point that means both have no significant pear problems. One study revealed that adolescents whose mothers work outside of the home do not differ from youth of non working mother in regard to adjustment with others. In this research it was also revealed that children of working mother are more prosocial than children of mothers who were housewives. It may be because working

mother is economically and psychologically self-sufficient and maintain social relation as compare to non working mother and they spend most of their free time with their children that encourage their children to be prosocial. A research conducted in Pakistan showed that mother's employment has a positive influence on the psychological well-being of their children. From the present study we also found that the impact of mental health problems on children of mothers who were housewives (28) is significantly higher than the children of working mothers (16). This result is consisted with our main findings as we see that in respect of three suspected psychiatric disorders (i.e. hyperactivity, conduct, emotional) number of children of mothers who were housewives are higher than number of children of working mother. The psychologist Kashiwagi Keiko¹⁶ observed that mothers expressed frustration and anxiety over childrearing, by stating children are burdensome they state “I want to be free from children”, and that the ratio of negative feelings toward childrearing was actually higher if the mothers were full-time mothers who were housewives¹⁶. This sense of frustration among mothers who were housewives may affect their childrearing which create bad impact to the children. The limitation of this study was that the sample size was too small to get the exact picture and it did not represent the whole country. The illiterate people were excluded from the study. The number of working mothers of different professions were not equal. There were some external variables which might influence our result that could not minimize, like –number of children of both group were not equal, working hours of mother, mother's mental health, mothers' attitude and perception, family support system, professional status etc. In order to overcome the limitations, further research should be done including a greater number of representative samples. This would enable us to better understand of mental health problems of working mothers and mothers who were housewives.

Limitations of the study

The study may have a limited number of participants, which can affect the statistical power of the findings and limit their generalizability to the wider population. All the factors that can affect children's mental health, such as parenting styles, family dynamics, social support, or exposure to stressors. Specific types of mental health problems such as hyperactivity, conduct problems, peer problem, anxiety and depression were assessed and not consider other mental health issues that may affect children.

V. Conclusion

Present research revealed that mental health problems are more common in the children of mothers who were housewives than the children of working mother. On the other hand, most of the children of working mothers have strength (pro social behavior.) than the children of mothers who were housewives. From the findings we may say that mother employment may be less important factor for the development of childhood mental health problems. Moreover, it can be helpful for the child well-being. The reason for these findings could be that working mother tries harder to compensate for their absence. It seems to be quality not the quantity, of mothering that is important. So we may say that, it is the time to break the stigma that working mothers are dangerous to their children. So no more guilt, no more resign, think again and give your children quality of time.

Conflict of Interest

This research is fully self-funded and is not related to any organizational benefit.

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