



African Journal of Biological Sciences



Effect of Male Migration on Mental Health of Women in Reproductive Age Group - A Descriptive Comparative Study

PhD scholar , Prof Bindu C G, Sri Balaji Vidyapeeth (Deemed to be University) puducherry Email: bindunaveen53@gmail.com, Contact: +919074061114
Dr. J.C. Helen shaji, Principal cum professor, Sri Sathaya College of Nursing, Sri Balaji Vidyapeeth (Deemed to be University), Chennai Campus.
Email: helenshaji@gmail.com, Contact : +919383880999, Orchid id : 0003-3006-2029

Abstract

Migration denotes any movement of groups of people from one locality to another and takes different forms. The objectives of this study were: (1) to determine the impact of migrant vs non migrant male partner on mental health of women of reproductive age group. (2) to determine the association between mental health with selected socio demographic variables of women of reproductive age group having migrant vs non migrant male partners. Methodology: Descriptive comparative research design was adopted to determine the effect of male migration on mental health of women of reproductive age group. A total of 76 women were surveyed using cluster sampling, with 38 women each having migrant and non-migrant male partners. Mental health was assessed using the DASS-10 questionnaire. Results indicated that 42.1% of women with migrant partners and 36.8% with non-migrant partners were aged 34-41 years, and a majority (63.2%) in both groups were graduates or above. Notably, 47.4% of women with migrant partners lived in nuclear families, compared to 68.4% in the non-migrant group. Among women with migrant partners, 10.5% experienced mild stress and mild anxiety, while 21.1% reported mild depression. Conversely, in the non-migrant group, 13.2% reported moderate stress, 5.3% severe anxiety, and 5.3% moderate depression. Statistically significant differences were found between groups in terms of depression ($p < 0.05$), but not for stress and anxiety ($p > 0.05$). Chi-square tests revealed significant associations between stress and religion, monthly family income ($p < 0.01$), anxiety and age, religion, residence, occupation, duration of married life ($p < 0.05$), and depression with religion, residence, and monthly family income ($p < 0.01$). Overall, male migration significantly impacts the mental health of women in the reproductive age group. The study suggests that empowering women could potentially mitigate these effects and enhance their overall well-being.

Keywords: Migration, Male partner, Women, Reproductive age group, mental health, stress, anxiety, depression

Article History

Volume 6, Issue 13, 2024

Received: 18 June 2024

Accepted: 02 July 2024

doi:10.48047/AFJBS.6.14.2024.124-130

Introduction

Migration refers to the movement of groups of people from one locality to another, encompassing various forms and complexities. Women's experiences within this migratory process are shaped by their societal and state-defined positions. Migration itself is diverse, categorized as 'permanent,' 'semi-permanent,' or 'temporary.' Temporary movements often involve individuals relocating for short periods, known as 'short duration,' 'seasonal,' or 'circulatory' migrants. Migration can also be classified as voluntary or forced, and legal or illegal, highlighting its multifaceted nature and the differing circumstances under which people relocate.

Along with international flows of capital, information, and technology, human migration is one of the major forces of change in the world. Approximately 244 million people live outside their country of birth. 2.6 million people migrate annually from less-developed to developed countries seeking employment, reuniting with family, or fleeing conflict and persecution as refugees and internally displaced persons (UN report). In most instances, migration is the motivation for a better today and tomorrow. Mass migration culture always shapes up an aspiring attitude among Indians too. Among five distinct streams of international migration, temporary labour is the predominant type of migration found in India, whereby millions of left behind families have remittances from foreign countries for a better living index¹.

Kerala, the Southern state of India, boasts of bulk of the migrants to Gulf. The Migration to the Persian Gulf from Kerala since 1970s has brought to the state an intense period of prosperity, sense of financial security and social change. Gulf migration and subsequent remittance has changed the entire fate of Kerala society². Among Indian states and union territories, Kerala is at the front in highest number of emigrants in west Asia. According to a study the number of emigrants living abroad in 2014 is estimated to be 2.4 million. Of this, 90% of the total number of the migrants are in the Gulf countries. It has so far influenced on the culture, cuisine and attire of all families in Kerala. Migration is affecting every facet of life in Kerala's economic, social, demographic, political and even religious outlook. 21 percent of households have at least one migrant in Kerala²

Research findings shows that good marriage not only keeps couple healthy, it can also prolong life by up to five years. Couples enjoying wedded bliss seem to have a lower risk of high blood pressure, heart disease, cancers, flu, Alzheimer's, depression and stress and when they do get ill they spend less time in hospital and recover more quickly³. In developing countries like India, usually rural to urban migration is the most dominant pattern of internal migration. Male migration provides economic relief to their families, left behind wives must

bear the burden of increasing responsibilities of managing their households, and meet social expectations, which leads to greater mental stress. Invariably they must look forward to help from others for outdoor and essential jobs³.

A study done by Yagya Murti Bhurtyal found that left-behind wives were depressed 10.57 times greater odds for depression compared to the wives of non-migrants. Also, Multivariate analysis identified that significant contributing factors for depression were caste, education, own named property, household head's education and year of husband's migration⁴. Similarly, another literature "the consequences of husband's international migration on family left behind in Tamil Nadu depicted that wives' parenting stress level increased⁵. Hence the researcher felt to study the impact of Male migration on mental health of women in reproductive age group.

Aim and Objectives

Present study aimed to empirically evaluate the mental health of women in reproductive age group having migrant vs non migrant male partner.

The objectives were,

1. To determine the impact of migrant vs non migrant male partner on mental health of women of reproductive age group
2. To determine the association between mental health with selected socio demographic variables of women of reproductive age group having migrant vs non migrant male partners

Materials and Methods

Descriptive comparative research design was adopted to determine the effect of male migration on mental health of women of reproductive age group. The study population was all married women of reproductive age group in Kerala which is the southern state of India.

The present study conducted among A total of 76 women in reproductive age group with 38 women each having migrant and non-migrant male partners were selected by cluster sampling technique. The study included all the married women of reproductive age group those who are willing to participate and who has been married for 2 years or more whereas, women in reproductive age group having Mental disorders, widows, separated from husband, and who are divorced are excluded from the study.

Study was carried out after obtaining ethical clearance from the institutional ethical committee and willingness and informed consent was obtained from the study participants. Self-administered questionnaire (DASS-10) was used to collect mental health of women in reproductive age group. Scio-demographic proforma was used to collect baseline information

about the participants which included Age, Education, Place, male partner's place of work. Monthly family income, Number of children, Years of marriage, Partner migrated on, Details of Family Members. And mental health of women in reproductive age group was assessed using DASS-10 questionnaire (Depression, Anxiety and Stress Scale). Data analysis in terms of descriptive and inferential statistics were performed using SPSS v.20.

Results

Socio-demographic characteristics

The demographic data shows, nearly half (42.1%) of participants having migrant male partner and 36.8% in the participants having non-migrant male partner were in the age group of 34-41 years. Majority (63.2%) of participants in both groups were graduates and above. With regards to the religion, both the groups 36.8% of the subjects were Hindus. Majority (73.7%) of participants with migrant male partner and 57.9% participants with non-migrant male partner were residing in rural area. Nearly half (47.4%) of participants with migrant male partner, and 68.4% of the participants with non-migrant male partner were living in nuclear family. Regarding occupation of participants, with migrant male partner 26.3% and non- migrant male partner 36.8% were doing private job and 31.1% with migrant male partner and 21.1 % with non- migrant male partner were house wives. Majority (78.9%) of the participants with migrant male partners were having more than Rs 40000/ month and participants with non-migrant male partner more than half (52.6%) were having the monthly income of Rs 30001 – 40000. Majority (55.9% & 44.7%) of participants having migrant and non-migrant male partner having 2 children respectively. Above Half (52.6%) of the participants having migrant male partner, duration of married life were 12-15 years and 36.8% participants having non-migrant male partner it was more than 15 years. Regarding ownership of the house, majority (89.5% & 63.2%) of participants having migrant and non-migrant male partner were having own houses.

Dietary habits

Almost all participants of migrant and non-migrant male partners were non-vegetarian which was 100% and 94.7% respectively. Majority (89.5% & 81.6%) of women from migrant and non-migrant male partners takes 3 meals per day. Few (15.8%) participants having non-migrant male partner have the habit of regular exercise.

Migration status

Majority (78.9%) were migrated to middle east and about 42.1% were migrated before marriage. More than half (63.2%) of migrated male partners contact participants daily, and 52.6% of them have visited their spouse 1 year back

Mental health

Mental health of women in reproductive age group having migrant and non-migrant male partner was assessed in terms of stress, anxiety, and depression. Among women of reproductive age group having migrant male partner, 10.5% participants had mild stress and mild anxiety. Whereas, 21.1% had mild depression. Among women of reproductive age group having non-migrant male partner, 13.2% had moderate stress, 5.3% had severe anxiety, and 5.3% had moderate depression. Chi-square value and p-value shows both groups were similar and comparable in terms of stress and anxiety ($p>0.05$). But differed in terms of depression ($p<0.01$) (Figure 1).

Independent t-test was used to prove difference between both groups in terms of mental health. Result shows that, there is significant mean difference between women of reproductive age group having migrant and non-migrant male partner in terms of depression ($p<0.05$) and not significant in terms of stress and anxiety ($p>0.05$) (table 1).

Chi-square test was used to analyze association between stress, anxiety and depression with selected socio-demographic variables of women of reproductive age group. The result depicts that, there is significant association between stress with religion and monthly family income ($p<0.01$), anxiety with age, religion, residence, occupation, and duration of married life ($p<0.05$), and depression with religion, residence, and monthly family income ($p<0.01$).

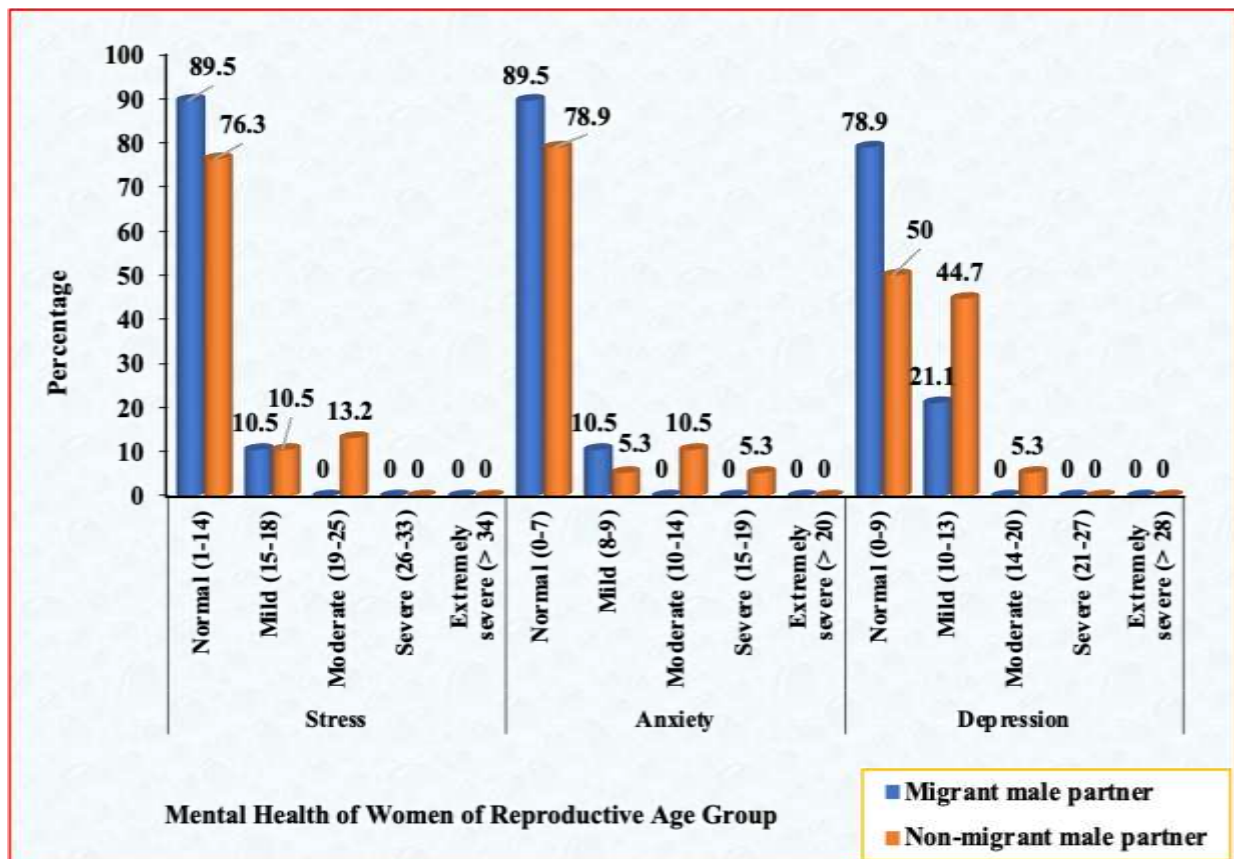


Figure 1: level of mental health of women in reproductive age group having migrant and non-migrant male partner.

Table 1: mean difference mental health of women of reproductive age group having migrant and non-migrant male partner.

N=76

Variables	Women of reproductive age having				Mean difference	t- value	p-value
	Migrant male partner		Non-migrant male partner				
	Mean	SD	Mean	SD			
Stress	8.05	3.855	9.52	5.097	1.47	1.421	0.159 NS
Anxiety	5.52	1.781	5.76	3.451	0.23	0.376	0.708 NS
Depression	6.42	3.342	8.36	3.649	1.94	2.426	0.018* S

S – Significant

NS – Non-Significant

*Significant at $p < 0.05$

Discussion and Conclusion

The present study revealed that, among women of reproductive age group having migrant male partner, around 10.5% had mild stress and mild anxiety. Whereas, 21.1% had mild depression. Whereas, among women of reproductive age group having non-migrant male partner, about 13.2% had moderate stress, 5.3% had severe anxiety, and 5.3% had moderate depression. The mean difference was significant between both groups in terms of depression ($p < 0.05$) but not significant in terms of stress and anxiety ($p > 0.05$). Chi-square test revealed that there is significant association between stress with religion and monthly family income ($p < 0.01$), anxiety with age, religion, residence, occupation, and duration of married life ($p < 0.05$), and depression with religion, residence, and monthly family income ($p < 0.01$).

The present study findings were supported by a comparative study on impact of male out-migration on women left behind done in two villages of Uttar Pradesh. The study reported that, around 93% of women suffered with loneliness, 86% reported feel of insecurity and constant fear⁶. To conclude, male migration have strong impact among women in reproductive age group in terms of mental health. Women empowerment will improve the mental health and wellbeing among women.

References

1. Portes, Alejandro (2016): Migration and Social Change, Peshawar Journal of Psychology and Behavioral Science.2016;3;2:243-47
2. Zachariah, KC, E.T. Mathew and S. Irudaya Rajan, “Impact of Migration on Kerala’s Economy and Society” International Migration, 39 (1): 63- 88.
3. Dobson Roger (26/08/2018) From cancer to heart disease, the amazing, life-saving benefits of marriage (couple staying together) The mail on sunday08;35.
4. Bhurtyal YM. Effects of male international migration on wives left behind in Nepal [Internet]. etheses.whiterose.ac.uk. 2015 [cited 2020 Nov 26]. Available from: <http://etheses.whiterose.ac.uk/11677/>
5. Heller Arogyaraj and Koushik Archana. The consequence of Husband migration on Family Left –Behind in Tamilnadu, India. Journal of International Migration and Integration.2020;21:1149- 63
6. Singh R. Impact of Male Out-Migration on Women Left Behind: A Study of Two Villages in Uttar Pradesh. REMITTANCES REVIEW. 2018 May 16;3(1):75–92.