Subjective Well-Being Among Young Married Women: Assessing Their Satisfaction with Life in North Dinajpur District of West Bengal, India

Atreyee Sinha[*] & Faujdar Ram[**]

Abstract

Subjective wellbeing describes how people experience the quality of their life and has gained importance in recent psychological research. This paper assesses the subjective wellbeing among young women by measuring their overall satisfaction with life. Data come from a primary survey of 500 young married women (18-30 years) in 10 selected villages of North Dinajpur District of West Bengal. Sixty per cent of the women were satisfied with their life conditions as they "have gotten the important things in life, they are satisfied with life, in most ways their life is close to ideal, the conditions of life are excellent and if they could live their life over, they would change almost nothing". In contrast, around one fourth of them were dissatisfied. Multivariate analysis revealed that respondents belonging to Muslim community, having higher education, any mass media exposure and arranged marriages were more likely to be satisfied than their other counterparts. Women who experienced any form of spousal violence and exhibited mental health problems were less likely to be satisfied with life. Conversely, higher marital satisfaction, high religiosity and higher social support among them had significant positive relationship with their overall life satisfaction.

Keywords: Subjective wellbeing, young women, India.

I. Introduction

The concept of well-being is an abstraction that is used to refer to the quality of life (Gasper, 2007). It is used more when we speak with reference to individuals. Results from cross-sectional, longitudinal and experimental studies find that it is associated with self-perceived health, longevity, healthy behaviours, mental and physical illness, social connectedness and factors in the physical and social environment (Diener & Seligman, 2004; Lyubomirsky, King & Diener, 2005). Well-being includes the presence of positive emotions and moods (e.g., contentment and happiness), absence of negative emotions (e.g., depression and anxiety), satisfaction with life, fulfilment and positive functioning (Diener, 2000; Ryff & Keyes, 1995). Researchers from various disciplines have examined different aspects of well-being that include physical well-being, socio-economic well-being, development and activity, emotional well-being, psychological well-being and life satisfaction (Diener, 2000; Diener, Suh, Lucas & Smith, 1999; Kahneman et al., 2004).

On a social level, key factors affecting well-being include a high standard of living, culture, history, social institutions and a sense of community (Sirgy, 1998; Helliwell, 2003; Stutzer, 2004; Elo, Saarnio & Isola, 2011). At the individual level age, gender, marital status, employment, education, health, physical ability, psychological stability and absence of chronic disease affect well-being (Veenhoven, 1996; Helliwell, 2003). Social well-being encompasses our interpersonal relationships, social support networks and community engagement. Social interactions and our ability to effectively manage those interactions can have major impacts on various other areas of our well-being, e.g., psychological well-being and satisfaction with life.

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Recent years have witnessed an exhilarating shift in the literature to a focus on well-being and positive mental health. This paradigm shift has been especially prominent in current psychological research (Diener, 1984; Ryff & Singer, 1998). But it has also captured the attention of epidemiologists, social scientists, economists and policy makers (Marmot et al., 1997). This perspective is also enshrined in the constitution of the World Health Organisation where health is defined as õa state of complete physical, mental and social well-being and not merely the absence of disease or infirmityö (WHO, 1948). More recently, the WHO has defined positive mental health as õa state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her communityö (WHO, 2001).

However, the subjective well-being and its determinants among people in India have not as yet received much attention. This is unfortunate, given that despite a strong growth record of the Indian economy for more than a decade and a declining trend in poverty levels, one-third of the global poor still reside in the Indian sub-continent, and roughly three-quarters of the Indian poor live in the countryside (World Bank, 2009). A distinctive feature of Indian society is its multicultural and multi-lingual entity and social stratification based on the religion and caste structure. Therefore, it is important to assess subjective well-being in such a diversified societal setting. We attempted to bridge this gap by studying the levels of satisfaction with life and its determinants among young married women in a rural setting.

II. Methods

Study area

The present study was conducted in the rural areas of North Dinajpur district in West Bengal. As per 2011 census, it has 88 per cent rural population and characterized by low sex ratio, low effective female literacy rate and a high gender gap in literacy rates (below state average). Further, it has one of the largest concentrations of Muslim population (47.4 per cent), while the rests are Hindus.

Data

The present study is based on a population based primary survey of young married women aged between 18 and 30 years. A sample of 500 young women (250 Hindu and 250 Muslim), who were married for at least two years and co-residing with their husbands at the time of survey, were interviewed during April-August, 2015. A multistage sampling design was adopted. In the first stage, Raiganj [66.4 per cent Hindus & 32.7 per cent Muslims (Census, 2001)] and Islampur [28.7 per cent Hindus & 71.1 per cent Muslims (Census, 2001)], the two sub-divisions of the district, were purposively selected primarily based on the dominant religious groups. In the second stage, 10 villages were identified based on their religious composition and distance from the nearest town. In the final stage, 50 households were selected from each village through systematic random sampling.

The interviews were conducted using various sets of structured questionnaires. All ethical protocols were adhered to and ethical clearance was obtained from The Students Research Ethics Committee (SREC) of International Institute for Population Sciences (IIPS), Mumbai. Before commencing the field work, written permission was obtained from concerned authorities in the district head-quarters as well as villages. Informed consent was obtained before each of the interviews commenced. Complete confidentiality was assured to the respondents. Participation in the survey was voluntary and no monetary compensation was provided.

Variables: Outcome variable

Satisfaction with life (SWL): The main outcome of interest was satisfaction of women with their life which was measured using Diener et al. (1985) satisfaction with life scale (SWLS) having

five items, each having a response set on seven point Likert scale from strongly disagree (1) to strongly agree (7) (see Table 1). The scale index score range was 1-7 and was classified into three groups: dissatisfied (coded as 1), average score (coded as 2) and highly satisfied (coded as 3). For the logistic regression analysis, the composite index score of life satisfaction was classified into two categories: values below median were grouped as –low satisfactionø and code –0ø was assigned to it, and values above median were grouped as –high satisfactionø and code –1ø was assigned to it.

Table 1: Properties of Satisfaction with Life Scale (SWLS)

Index	Description of items used	Mean	SD		Categories
Satisfaction with Life Scale (SWLS)	5 items specific to the level of satisfaction women had in their life	24.9	7.6	0.937	For logistic regression: Low =0, High =1
	Response category: Strongly disagree =1, Disagree =2, Slightly disagree =3, Neither agree nor disagree =4, Slightly agree =5 Agree =6, Strongly agree =7				
1	So far I have gotten the important things I want in life				
2	I am satisfied with my life				Dissatisfied =1
3	In most ways my life is close to my ideal				Average score =2
4	The conditions of my life are excellent				Highly satisfied =3
5	If I could live my life over, I would change almost nothing				

Note: SWL Score is calculated using the following formula; SWL Score = (Total satisfaction score)/5

Covariates

In the present study a set of socio-economic and demographic factors that were likely to be associated with womenøs gender attitude were controlled. Background characteristics like age of the respondents, religion, wealth index, work status, educational attainment, mass media exposure, family composition and type of family were included in the analysis.

Apart from them, other variables included in the analysis were womenøs experience of any spousal violence (physical/emotional/sexual ó those who experienced were coded as –1ø and –0ø as otherwise); inter-spousal communication, in terms of womenøs communication with their husbands regarding childcare, family planning, family matters and going out with husband (Coded –0ø for low and –1ø for high); relationship control, specific to womenøs experience of marital control from husbands (Coded –0ø for low and –1ø for high); social support specific to social support network for sharing feelings/getting help/taking care/familial problems/true love and support (Coded –0ø for low and –1ø for high); marital satisfaction, specific to satisfaction in her marital life (Coded –0ø for low and –1ø for high); and experience of symptomatic depression - women who have reported two or more symptoms of sadness, loss of interest or lack of energy in the last 12 months and four or more symptoms of loss of appetite/sleeping problems/lack of concentration/restlessness/negative thoughts about self/thoughts of death are defined as having symptomatic depression and given a code of –1ø and –0ø is assigned for women who have not reported any symptom and religiosity, specific to womenøs involvement and belief in their own religion and its customs (Coded –0ø for low and –1ø for high).

III. Analysis

Firstly, a detailed socio-demographic overview of the respondents is provided. Secondly, level of life satisfaction among young women and life satisfaction by background characteristics are described through univariate and bivariate analyses. Binary logistic regression model was applied to

assess the determinants of subjective well-being. All the analyses were performed in SPSS-statistical software Version-21.0.

Additionally, Structural Equation Modelling (SEM) was applied to test the causal relationship between outcome and independent variables. Structural equation modelling is a multivariate statistical analysis technique that is used to analyse structural relationships. This technique is a combination of factor analysis and multiple regression analysis and is used to analyse the structural relationship between measured variables and latent constructs. The purpose of SEM is to examine a set of relationships between one or more Independent Variables (IV) and one or more Dependent Variables (DV). Independent variables are usually considered either predictor or causal variables because they predict or cause the dependent variables (the response or outcome variables).

There are two components in the SEM: the measurement part and structural part. As postulated by earlier researchers, it is better to adopt a two-step approach, i.e., specifying the measurement models first, followed by the simultaneous estimation of measurement and structural models (Uthman, Moradi & Lawoko, 2011). The default estimator for categorical variables in MPlus is Weighted Least Square Means and Variance (WLSMV) and it has been used in the present analysis. The model fit was examined by three indices: Comparative Fit Index (CFI), Tucker Lewis Index (TLI) and a Root Mean Square Error of Approximation (RMSEA). A CFI value of >= 0.96, TLI of >=0.95 and RMSEA of <= 0.05 with a sample size of more than 250 can be indication of a good model (Yu, 2002). The MPlus (Muthén & Muthén, 1998-2001) programme is used as it can deal with categorical variables.

IV. Results

Socio-economic and demographic profile of the study population

As presented in Table 2, both joint and nuclear types of families were common. Hindu respondents belonged to mainly general caste group (51.6 per cent) and scheduled castes (48.4 per cent). Nearly 45 per cent of the respondents lived in kachha houses and the proportion of respondents living in pucca and semi pucca houses was around 53 per cent. While more than 75 per cent of the respondents were literate, around one fourth were illiterate or had no formal schooling. More than 50 per cent of the respondents were educated above primary level and around one-fourth had more than 10 years of schooling. While nearly 58 per cent of the women had some exposure to mass media, their proportion having no exposure was also high (42 per cent). Participation of respondents in any income generating work was very low and a majority of the respondents were not working.

The demographic characteristics show that 25 per cent of the respondents belonged to the teenage group, followed by one-third women (30 per cent) in their mid-20s and 44 per cent in the 26-30 years of age group. A large proportion of the respondents was married before the legal age of marriage. Mean age at first marriage was 16.5 years and at first pregnancy 18 years. The proportion of women having fewer number of children, i.e., one or two, was high (76 per cent), while 25 per cent of them had three or more children.

Life satisfaction and its determinants

Table 3 presents young women's satisfaction with life. A majority of the respondents (61 per cent) were satisfied in their life situations. However, a quarter of the women expressed dissatisfaction and 14 per cent of the women expressed average feelings. There is a significant difference in the levels of life satisfaction among Hindu and Muslim women. While nearly 70 per cent of the Muslim women reported being satisfied, the corresponding value for Hindu women was only 52 per cent. One-third of the Hindu women expressed dissatisfaction with their life situations compared with only 21 per cent of the Muslim women.

Table 2: Socio-economic and demographic profile of the study sample (N=500)

Background characteristics	% of women
Type of house	
Kachha	44.8
Pucca	42.6
Semi pucca	12.6
Type of family	
Nuclear	49.2
Joint	50.8
Household wealth index (HWI)	
Lower	33.0
Middle	32.4
Upper	34.6
Caste[*]	
General	51.6
Scheduled caste	48.4
Literacy	
Literate	75.8
Illiterate	24.2
Educational attainment (years of schooling)	
No schooling	24.2
1-4	12.0
5-7	17.6
8-9	21.4
10-11	14.8
12 & above	10.0
School dropout (discontinuing school before class 10)	67.3 (379)
Current work status	
Working	15.0
Not working	84.6
Any mass media exposure (reading newspaper/magazine or watching TV)	
No	42.1
Yes	57.9
Demographic characteristics	
Age group (in years)	
18-21	25.4
22-25	30.6
26-30	44.0
Age at first marriage (in years)	
<15	15.0
15-17	58.0
18 & above	27.0
Mean age at first marriage (in years)	16.5
Mean age at first pregnancy (in years)	18.0
Total number of surviving children	
1-2	76.3
3+	23.7
N	**500**

Note: * Belongs only to Hindu religion.

Table 3: Percentage of young married women according to their satisfaction with life by religion.

Satisfaction with life scale (SWLS)***	Hindu	Muslim	Total
Dissatisfied	30.0	20.8	25.4
Average score	17.6	10.4	14.0
Satisfied	52.4	68.8	60.6
Total	250	250	500

Note: Associations found significant in Chi-square test; *** p<0.001.

Table 4 presents the bivariate associations between women's overall life satisfaction and their background characteristics. The results show that satisfaction with life was low among working women. On the other hand, life satisfaction was more among women living in joint families. The type of marriage has come out to be another important factor. Interestingly, life satisfaction was less among women who had love marriages (47 per cent) than those who had arranged marriages (63 per cent). Women who were highly religious and had high social support were more satisfied with their life situations. High inter-spousal communication and marital satisfaction enhanced the overall life satisfaction among young married women. Women who were exposed to parental violence during childhood had less satisfaction in life. On the other hand, respondents experiencing high relationship control and any form of spousal violence in their marriage reported less satisfaction with life than their other counterparts. Women who experienced symptomatic depression also had less satisfaction in life than those who did not experience depressive symptoms.

Table 5 presents the results from binary logistic regression showing the odds of having high satisfaction with life. Model-1 depicts that experience of any spousal violence and depression affects young women's overall life satisfaction significantly. Women who had experienced spousal violence were around 62 per cent less likely to have high life satisfaction with life (OR=0.38, p<0.01) than those who did not experience it. Similarly, women who have experienced symptomatic depression were 72 per cent less likely to have high satisfaction with life (OR=0.28, p<0.01) than those who did not experience it. Muslim women were almost twice more likely to have high satisfaction with life than Hindu women (OR=2.11, p<0.01). Higher marital satisfaction and higher social support satisfaction increased the likelihood of having higher life satisfaction among women (OR=1.52, p<0.001 & OR=1.62, p<0.10 respectively). Young women who were highly religious were also significantly more likely to have higher life satisfaction (OR=1.87, p<0.05) than their counterparts.

Model 2 presents the adjusted odds ratios of having high satisfaction with life after controlling for various background characteristics of women. The level of education and mass media exposure were significant predictors for overall life satisfaction. Women, educated up to primary level were four times more likely to have high satisfaction with life (OR=4.39, p<0.01) than women who had no schooling. Higher education did not have any significant influence on women's satisfaction with life. Although weak, exposure to mass media enhanced women's satisfaction with life by two times (OR=1.96, p<0.10). Interestingly, women who had love marriage were almost 56 per cent less likely to have high satisfaction with life than women having arranged marriage (OR=0.44, p<0.05). Even after controlling for the background characteristics of women, spousal violence, religiosity, social support, marital satisfaction, depression and religion had statistically significant relationship with women's life satisfaction. Women who experienced any spousal violence were 66 per cent less likely to be highly satisfied with their life (OR=0.34, p<0.001). Highly religious women were almost twice more likely to be highly satisfied in life (OR=1.79, p<0.05). Higher marital satisfaction improved the probability of being highly satisfied in life significantly (OR=1.54, p<0.001). Those who exhibited depressive symptoms were significantly less likely to be highly satisfied with their life situations compared to their counterparts (OR=0.29, p<0.01). Similarly, Muslim women were around 2.5 times more likely to have high life satisfaction than Hindu women (OR=2.50, o<0.01). Social support also had a weak but significantly positive relationship with life satisfaction. Higher social support increased the likelihood of being highly satisfied in life (OR=1.80, p<0.10).

Table 4: Young married women's satisfaction with life by their background characteristics.

Background characteristics		Satisfaction with life		$n =$
		Low	High	
Religion***	Hindu	47.6	52.4	250
	Muslim	31.2	68.8	250
Current work status***	Not working	35.3	64.7	425
	Working	62.7	37.3	75
Household wealth index	Lower	42.4	57.6	165
	Middle	38.9	61.1	162
	Upper	37.0	63.0	173
Type of family+	Nuclear	43.5	56.5	246
	Joint	35.4	64.6	254
Age group	18-21	34.6	65.4	127
	22-25	35.9	64.1	153
	26-30	44.5	55.5	220
Years of schooling	No schooling	43.8	56.2	121
	Primary	33.3	66.7	60
	Above primary	38.9	61.1	319
Mass media exposure	No	42.4	57.6	210
	Yes	37.0	63.0	289
Age at first marriage	<15 years	41.3	58.7	75
	15-17 years	39.3	60.7	290
	>=18 years	38.5	61.5	135
Type of marriage*	Arranged	37.1	62.9	428
	Love	52.8	47.2	72
Family composition	No children	35.5	64.5	31
	More sons	37.7	62.3	191
	More daughters	44.9	55.1	167
	Equal no. of sons & daughters	35.1	64.9	111
Social support network (SSN)+	Low	42.7	57.3	300
	High	34.5	65.5	200
Social support satisfaction (SSS)***	Low	56.4	43.6	204
	High	27.7	72.3	296
Experience of any form of spousal violence ***	No	28.6	71.4	336
	Yes	61.6	38.4	164
Relationship control (RCI)***	Low	29.2	70.8	216
	High	47.2	52.8	284
Interpersonal communication (ICI)**	Low	47.6	52.4	250
	High	31.2	68.8	250
Witnessing parental violence***	No	36.0	64.0	325
	Yes	57.4	42.6	101
Religiosity (RI)*	Less religious	43.9	56.1	239
	Highly religious	34.5	65.5	226
Symptomatic depression***	No	34.3	65.7	434
	Yes	72.7	27.3	66
Marital satisfaction (MSS)***	Low	80.1	19.9	151
	High	21.8	78.2	349
Total				500

Note: Associations found significant in Chi-square test; *** $p<0.001$, ** $p<0.01$, * $p<0.05$, + $p<0.10$

Table 5: Results from binary logistic regression showing the odds of having higher satisfaction with life by young married women.

Background characteristics	Model 1		Model 2	
Current work status				
Not working ®				
Working			0.695	
Household wealth index				
Lower ®				
Middle			0.983	
Upper			0.768	
Type of family				
Nuclear ®				
Joint			0.921	
Age group				
18-21 ®				
22-25			0.890	
26-30			0.590	
Years of schooling				
No schooling ®				
Primary			4.389	**
Above primary			1.156	
Mass media exposure				
No ®				
Yes			1.957	+
Family composition				
No children ®				
More sons			1.357	
More daughters			1.112	
Equal no. of sons & daughters			1.433	
Type of marriage				
Arranged ®				
Love			0.444	*
Ever experience of any spousal violence				
No ®				
Yes	0.377	**	0.343	***
Social support satisfaction (SSQS) ©	1.622	+	1.797	+
Relationship control Index (RCI)				
Low ®				
Moderate/high	1.250		1.136	
Religiosity index (RI)				
Less religious ®				
Highly religious	1.870	*	1.789	*
Marital satisfaction scale (MSS) ©	1.515	***	1.544	***
Symptom based depression				
No ®				
Yes	0.277	**	0.285	**
Inter-spousal communication				
Low ®				
High	1.342		1.315	
Religion				
Hindu ®				
Muslim	2.112	**	2.469	**
Constant	0.001		0.001	
R square	0.347		0.379	

Note: ® Reference category, © Continuous variable; *** $p<0.001$, ** $p<0.01$, * $p<0.05$, + $p<0.10$.

Results from structural equation modelling (SEM)

The mechanisms by which various aspects of women's married life such as decision making authority, experience of spousal violence and marital satisfaction influence their overall life satisfaction can be considered in the model (Figure 1). The causal relationships among latent variables are seen both directly and indirectly influencing the outcome variable of satisfaction with life (SWL). The details of these causal relationships are separately described by their direct and indirect effects as follows (Table 6).

Table 6: Direct and indirect effects of causal variables on women's SWL in the SWL model

Variables	Direct effect (d_n)	Indirect effect (i_n)
Experience of spousal violence	-0.032	-0.631***
Decision making authority	0.214***	0.159**
Marital satisfaction	0.855***	
Symptomatic depression	-0.015**	

Note: *** p<0.001, **p<0.01, * p<0.05; χ^2 = 51241.152; df = 300; RMSEA = 0.037; CFI = 0.996; TLI = 0.996.

Standardized path coefficients obtained from the SEM analysis depict that decision making authority, marital satisfaction and symptomatic depression were three strong predictors of women's life satisfaction with significant direct effects. Women having high decision making authority and high marital satisfaction were significantly more likely to be satisfied with their life situations (β=0.214, p<0.001 & β=0.855, p<0.001 respectively). On the other hand, experience of depression had a negative effect on women's life satisfaction. Women experiencing symptomatic depression were less likely to be satisfied in their life (β=-0.015, p<0.01).

Figure 1: Showing the mechanisms of SWL model obtained from structural equation modelling (SEM).
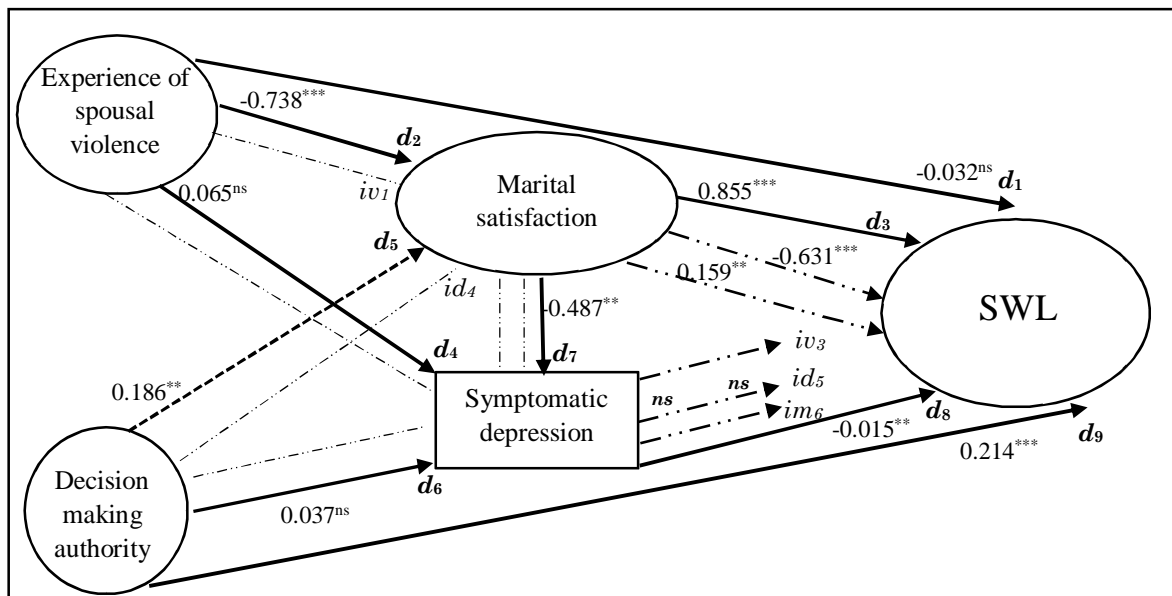
Model fit statistics: RMSEA = 0.037; CFI = 0.996; TLI = 0.996; χ^2 = 51241.152; df = 300.
Note: *** p<0.001; **p<0.01; ns – Not significant; 'd_1-9' – Direct effects; 'iv_1-3' – Indirect effects of spousal violence; 'id_4- 5' – Indirect effects of decision making power; 'im_6' – Indirect effect of marital satisfaction.

The result further reveals that experience of spousal violence and women's decision making power had significant direct effects on their marital satisfaction, while incidence of spousal violence decreased marital satisfaction (β=-0.738, p<0.001), and decision making authority increased it

significantly (=0.186, p<0.01). Incidence of spousal violence and decision making authority also had significant indirect effects on overall satisfaction with life (=-0.631, p<0.001 & =0.159, p<0.01).

V. Discussion

The present study captured how satisfied young women are in their lives and explored the factors influencing their self-assessed well-being. Findings suggest that a higher proportion of young married women were highly satisfied with their overall life situations. There was a significant religious difference where Muslim women were more satisfied in their lives than their Hindu counterparts. This finding is interesting when contrasted with the general setting where Muslim women had lower education, poor autonomy, lower status within family and were not bestowed with the same privileges as the Hindu women. Higher life satisfaction among Muslims might be due to the fact that Muslims women were poorer and less educated; therefore, they had low aspiration in life. As also found in the in-depth interviews, Muslim women's attitude to life was ó ‡to be happy and content whatever condition they might face in their marriage or family and whatever they haveø. While Hindu women, especially those who were educated, had unfulfilled desires like to be more educated or to work or to marry at later age. Therefore, in spite of being in most disadvantageous situation compared to the Hindus, Muslim women might have expressed more satisfaction with their life situations compared to their Hindu counterparts. On the other hand, the prevalence of consanguineous/close-kin marriage among Muslim respondents would certainly mean better quality of support received from natal families, than the Hindu women who are generally married into a completely new family. This might be another possible explanation why Muslim women expressed higher life satisfaction than the Hindus.

Women experiencing spousal violence and living with depression were more likely to have lower satisfaction with life. This study is able to connect religious inclination of women with their life satisfaction and suggests that high religiosity significantly increased women's satisfaction with life. Existing studies argue that religious people report being happier and more satisfied with their lives (Diener, Suh, Lucas & Smith, 1999) and this pattern appears to be robust across religious and cultural groups (Tilouine & Belgoumidi, 2009; Abdel-Khalek, 2010). Personal religious identity and participation in organised religion have positive association with well-being (Joshi, Kumari & Jain, 2008; Elliott & Hayward, 2009).

Consistent with existing research (Mitchell & Hodson, 1983), women having higher social support also had higher life satisfaction. Results of the present study also revealed that the level of life satisfaction differs in different types of marriages. The result is consistent with earlier studies (Yizengaw et al., 2014; Arif & Fatima, 2015) which concluded that men and women were more satisfied in arranged marriages than love marriages. In Indian society marriage arranged by the families of individuals is the most common trend and in many instances parents are the source of social, emotional and sometimes financial support for the married couple to live their life in harmony and this might be the reason that parental involvement in mate selection plays an important role in life satisfaction of women.

Policy implications

Although any generalisation of the study findings is not possible, as it is locally based and is part of a case study rather than a representative survey, the study has addressed an area where research in India is limited. Its findings suggest that it is important to eliminate intimate partner violence, and that it is critical to enforce stringent laws especially in rural areas where domestic violence remains behind the closed doors. Mental health problems of women, especially in rural areas, mostly remain unnoticed and unattended. Policymakers and stakeholders should include mental health promotional activities in schools. Community based programmes and psychological counselling of women in health centres, especially as a part of maternal-child health care (MCH) programmes are necessary at the village levels. Higher level of social support system improved

women's status as well as their level of satisfaction with their lives. Apart from family support, it is important to create women's support groups, e.g., *Mahila Mandals* at village levels which can provide help and support to women in distress.

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