# RELATIONSHIP BETWEEN PSYCHO-SOCIAL STRESSOR AND PSYCHIATRIC MORBIDITY AMONG THE FEMALE GARMENT WORKERS

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## Summary

One hundred and seventy-two female garment workers from 5 different garment industries located in different regions of Dhaka City were interviewed to assess the psychosocial stress upon each individual worker. The assessment was done by using Social Readjustment Rating Scale of Holmes and Rahe. Any stressful event experienced by an individual during a period of 12 months prior to the interview was taken into consideration. In order to evaluate the stressfulness of a life-change event, questions were asked about its desirability. The psychiatric morbidity was assessed by using GHQ and DSMIIR. Psychiatric morbidity was found in around 71% among the workers with psychosocial stressors while only 27% workers who did not have psychosocial stressors had psychiatric illnesses. Psychiatric morbidity mostly remained confined to depressive disorders and minor neurotic disorders.

#### Introduction

Various kinds of psycho-social stressors are frequently recognized as the main precipitating factors for different types of psychiatric illnesses.

Psycho-social stressors and psychiatric morbidity is a very popular field of study. Individuals in lower social class may be exposed to proportionally more stressful life events. In our conservative, male dominating socio-cultural milieu, the job opportunity in garment industry has opened a new era in the life of our women of poor economic background. This study is to find out whether these working class women can enjoy a better mental health, despite their stressful living condition, with the support of their job.

Financial security means a good deal to our-folk. Women has been claimed that, paid employment can act as a protective factor against depression in women. 1 However, it is a subject of interest to know, whether an additional job related stress is making them more vulnerable to psychiatric illnesses, when they are already overburdened with various responsibilities. Lack of job related social support, i.e. support from supervisors and co-workers has been shown to be a potential stressor.<sup>2</sup> Moreover, loss of interest in work alienation, and even a decrease in intellectual capacity have been reported as the outcome of a chronic lack of control over one's working situation.3 The objective of this study is to determine the stressfulness in the life of garment workers and the resultant vulnerability to psychiatric illnesses. It has been reported that, about 75% of those who consult psychiatrists are experiencing problems that can be traced to a lack of job satisfaction or an inability to relax. 4 By modifying the environmental

factors and improving the coping ability for the workers, overall output in this industrial field can be increased to a great extent.

### **Materials and Methods**

One hundred and seventy-two female garment workers were interviewed from five different garment factories in Dhaka city. Equal number of subjects were chosen randomly from each of the factory. The subjects were interviewed initially by General Healthy Questionnaire (60-item version) to determine the psychiatric morbidity. DSMIIIR was next used to determine the type of psychiatric illness. The Social Readjustment Rating Scale by Holmes and Rahe was applied for measuring the amount of life stressors in each case. The questions were asked in a simplified manner and problems were discussed freely to avoid any error in rating. A semistructured questionnaire comprising relevant sociodemographic variable and related information about Job was prepared to obtain necessary information. Questions were asked in Bengali and explained elaborately to minimise false responses and ensure accuracy in rating as much as possible.

## Results

**Table-I:** Psychiatric morbidity among the female garment workers according to DSMIIIR

Psychiatric	Female garment	Percentage
morbidity	workers (n=172)	and the same of the same
Present	40	23%
Absent	13	77%

Out of one hundred seventy two female garment workers forty had psychiatric illness according to DSMIIIR.

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**Table-II**: Prevalence of Psychosocial stressors among the female garment workers

According to SRRS	No. of workers	Percentage
Psychosocial stressors present	83	48%
Psychosocial stressors absent	89	52%

Psychosocial stressors according to Social Readjustment Rating Scale was found in 83 out of 172 subjects. The rest 89 had no such stressors during a period of 12 months prior to the interview.

**Table-III**: Prevalence of Psychiatric symptoms among the workers with psychosocial stressors

Psychiatric symptoms	No. of workers	Percentage
		of workers
Present	59	71%
Absent	24	29%

Among the 83 subjects who had psychosocial stressors, 59 had psychiatric symptoms. This group includes the workers with a specific diagnosis according to DSMIIIR and the workers with non-specific minor neurotic symptoms.

**Table-IV**: Prevalence of Psychiatric illness among the workers without psychosocial stressors

Psychiatric symptoms	No. of workers	Percentage
Present	24	27%
Absent	65	73%

Out of 89 workers who did not have psychosocial stressors, 24 had psychiatric symptoms. This group includes the workers with a specific psychiatric illness according to DSMIIIR and also workers with non-specific minor neurotic symptoms.

**Table-V**: Distribution of psychiatric disorders among the workers with psychosocial stressors

Types of psychiatric	Total	Percentage
disorders		
Depressive disorder	26	44%
Anxiety disorder	8	14%
Adjustment disorders	3	5%
Others	3	5%
Minor neurotic symptoms	19	32%

The types of psychiatric disorders among the 59 workers who had psychosocial stressors as well are given in the table V. The most common psychiatric disorder was found depressive disorder (44%). Next common psychiatric disorders according to DSMIIIR were anxiety disorder and adjustment disorder. The subjects who

had few psychiatric symptoms which were not sufficient enough to meet any diagnostic category according to DSMIIIR were labelled as "Minor neurotic symptoms". This group comprises 32% of workers.

#### Discussion

Psychiatric morbidity of a class of people depends on many individual variables such as, genetic factors, personality traits, environmental factors etc. Psychosocial stressors are important precipitatory factor in many psychiatric illnesses. Previous community surveys reported a predominance of Minor Affective Disorder among the working class women. 5 During the last decade, garment industry has emerged as the main export business of our country. Hence, the female workers who are working in this field are contributing greatly in the growth of our economy. To keep it up, the environmental factors which are stressful enough to influence the mental health and thus diminish the working capacity needs exploration. A particular effect of work stress called the "occupational neck-shoulderarm syndrome" or "cervico-brachial disorder" has been described by Japanese physicians.<sup>6</sup> It comprises muscular fatigue; stiffness and pain in the neck, back and forearms; coldness and hypo-aesthesia (or paraesthesia) of the hands; headache; insomnia; and secondary emotional complaints. These symptoms occur particularly in office workers who operate machines e.g. type-writers and in industrial assemblers who are also required to maintain the same posture while engaged in repetitive motor activity. These syndrome is a combination of physical and psychosocial stress involving the neuro-muscular system. Even when the physical load is light but persistent, tension might be expected to rise with increasing mental workload, as the day progresses, due to fatigue and increasing stress. Report of a study states that the occupational groups whose tasks are montonous, and performance failure would be crucial, experience an extra-ordinarily high incidence of psychosomatic disease. The present study report shows that, psychiatric illnesses are directly proportional to psychosocial stressors. The psychiatrically vulnerable group mainly comprises of depressive disorder. Another large section (32%) of the psychiatrically vulnerable group had only vague physical symptoms e.g. headache, neckache, backache, sleep disturbance, etc. without adequate ground for suspicion of any organic disease. Furthermore many of them had gone through sufficient investigations to exclude any apparent organic cause. Many symptoms suggest their origin from long adopted posture they had to maintain during their work which can be accepted as an occupational hazard. The cluster of symptoms do not qualify a diagnosis according to DSMIIIR, nevertheless they are severe enough to impair the efficiency of the worker. However some of them simultaneously develop few more vague complains which can be labeled together as minor neurotic symptoms. Psychologists believe that stress is experienced when there is an imbalance between the coping ability and the environmental demand. By manipulating either of the two, stress feelings can be minimized. To improve the work output of the industrial workers and thereby to ensure further economic development, sufficient emphasis is to be given on a better mental health of the workers.

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