

The Impact of Involvement of SHG on Self-Esteem among Rural Women of Bangalore

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Abstract: *This study explores the impact of Self-Help Groups (SHGs) on the self-esteem of rural women in the Bangalore district of Karnataka. SHGs have emerged as a powerful instrument for women empowerment and rural development through financial inclusion, social solidarity, and independence. The study incorporated surveys using questionnaires with 150 women members of the SHGs in rural areas such as Anekal, Hoskote, and Devanahalli. The study reveals high positive correlations among SHG participation and greater self-esteem. Economic independence, peer support, domestic decision-making, and community visibility are the primary reasons for change. Increased confidence, communication, and sense of identity were evidenced among most women. Despite a few disadvantages such as lack of mobility and patriarchal resistance, SHGs have influenced members' psychosocial well-being substantially. The study comes to a conclusion that SHGs are not just economic empowerment strategies but also critical spheres of psychological growth and self-esteem for rural women. The results stress the need for strengthening and scaling up SHG programs for overall rural development.*

Keywords: self-esteem, Self help groups, rural women, women empowerment, economic empowerment

1. Introduction

Rural Indian women still experience severe social and economic constraints that limit their access to resources, autonomy, and decision-making involvement. These restrictions typically stem from culturally ingrained patriarchal norms, illiteracy, financial reliance, and legal exclusion from positions of authority (Kabeer, 2005). Reducing these systemic disparities involves not just tangible solutions but also treatments that support women's psychological empowerment and self-esteem. The Self-Help Group (SHG) model is one such community-level intervention that has proven a vital instrument for women's empowerment and rural development in India.

Self-Help Groups are small, informal groups of approximately 10–20 members, primarily women, who come together to save frequently, access microcredit, and engage in livelihood activities (Desai & Joshi, 2018). Beyond the economic, SHGs have come to be regarded more and more as spaces where women forge solidarity, gain leadership, and become assertive individuals through shared experience and mutual support (Narayana, 2020). Through SHG membership, women typically undergo a change in self-perception—from passive recipients to proactive change-makers in family and society.

Government of India and state initiatives have facilitated scaling the SHG movement. Karnataka has the Karnataka State Rural Livelihood Promotion Society (KSRLPS) which, in collaboration with the National Rural Livelihood Mission (NRLM) aegis and programs like Stree Shakti, has facilitated the growth of thousands of SHGs in rural and peri-urban areas. These are made not just in an attempt to eradicate poverty but to improve inclusive growth by making women

economically and socially empowered. In parts of Bangalore such as Anekal, Hoskote, and Devanahalli, SHGs are now a common feature in rural life, both at the household and community level.

Much less emphasis has been placed on the psychosocial effects, such as self-esteem, of SHG membership, although the economic effects reported by members—such as savings, credit, and business ventures—have been extensively documented. Self-esteem is that individual's global subjective assessment of his or her personal value, according to Rosenberg (1965). It plays a significant role in the formation of behavior, mental well-being, relationships, and resilience. For rural women, who were perhaps raised being taught social norms that debase their work and contributions, strengthening self-esteem can be an agent of profound change that transforms the manner in which they inhabit the world.

Empirical evidence has begun to suggest that SHG membership could introduce greater self-confidence, enhanced communication skills, and assertiveness in families and local administration systems (Patel & Sen, 2019; Kumar & Mukherjee, 2021). Most of these analyses are found to rely on broad empowerment indices or are performed in northern Indian states. There is a distinct lack of focused research into the psychological dimensions of empowerment, especially where there are environments of high-speed urbanization like Bangalore, where traditional rural mores encounter modernizing values, and a new social environment results.

In a step toward filling this research need, this study looks at how being a member of SHGs boosts the self-esteem of rural women in the Bangalore district. The research adopts a mixed-methods design that utilizes both quantitative measurement in the form of the Rosenberg Self-Esteem Scale

(RSES) and qualitative data gathered from interviews and focus groups. The objective is to discover how SHGs function not only as financial safety nets but also as psychosocial spaces for rural women to construct an increased sense of purpose, confidence, and identity.

Apart from this, the study also explores the socio-demographic factors of age, education, caste, and marital status that are possible mediators or moderators of the relationship between membership in SHGs and self-esteem. It also tries to identify the most impactful internal processes in SHGs (leadership experience, skill training, support by peers) to psychological development. Through this process, this research contributes to the growing recognition of self-esteem as a significant product of empowerment interventions, and offers policy-relevant insights into how SHG program design needs to concentrate on material as well as mental well-being.

Ultimately, this study emphasizes the potential of SHGs not just as instruments of poverty alleviation, but also as drivers of personal change. By situating the inquiry within the specific socio-cultural context of rural Bangalore, the study brings to the foreground the nuanced way that membership in an SHG alters women's sense of self and their social place.

2. Methodology

1) Research Design

Mixed-methods research design with both quantitative and qualitative methods was used in this study to measure the influence of participation in SHGs on rural women's self-esteem. The use of mixed-methods was desired to get a comprehensive picture not only of the measurable variations in self-esteem scores but also of the subjective experiences, perceptions, and processes behind these variations.

2) Study Area

The study was carried out in rural areas on the periphery of Bangalore in Karnataka, specifically the Anekal, Hoskote, and Devanahalli taluks. These were chosen because they had active Self-Help Group networks supported by both government and non-governmental agencies such as the Karnataka State Rural Livelihood Promotion Society (KSRLPS) and other local NGOs.

3) Population and Sampling

The study population included rural women 19–59 years of age living in the taluks chosen. Two groups were created for comparison:

- SHG Members (Experimental Group): Women who are active members of an SHG for a minimum of one year.
- Non-SHG Members (Control Group): Women with similar socio-economic status who are not members of any SHG.

4) Sample Size

150 women were chosen employing purposive and snowball sampling techniques:

75 women who participate in SHG and 75 women who are not participating in SHG.

This sample size was deemed sufficient to ascertain statistically significant group differences and to obtain saturation in qualitative data gathering.

5) Data Collection Methods

The data was gathered through quantitative Data Collection

6) Instrument Used:

The Rosenberg Self-Esteem Scale (RSES) was given to assess self-esteem. It is a 10-item scale employing a 4-point Likert response format and is highly validated for cross-cultural and community-based use.

7) Socio-demographic questionnaire:

Members also contributed data on age, marital status, education, occupation, income, and years in the SHG.

8) Data Analysis

Statistical Package for the Social Sciences (SPSS v26) is used for analyzing descriptive and inferential statistics.

9) Ethical Considerations

Confidentiality: Names and personal identifiers were anonymized.

Voluntary Participation: Participants were allowed to withdraw at any point without penalty.

Ethical clearance was granted by the Institutional Research Ethics Committee before data collection.

10) Validity and Reliability of the Scale

The Rosenberg Self-Esteem Scale was found to have high reliability (Cronbach's alpha = 0.87 in this research).

3. Results and Findings

Table 1: Shows the demographic details of the respondents

Age	f(%)	Educational Status	f(%)	Occupation	f(%)	Marital Status	f(%)
18-25	31 (20.7)	No Formal Education	32 (21.3)	Housewife	29 (19.3)	Married	35 (23.3)
26-31	19 (12.7)	Primary	28 (18.7)	Agriculture	30 (20.0)	Divorced	46 (30.7)
32-37	16 (10.7)	Secondary	29 (19.3)	Unemployed	38 (25.3)	Unmarried	33 (22.0)
38-43	28 (18.7)	Higher Secondary	33 (22.0)	Daily Wages	24 (16.0)	Widow	36 (24.0)
44-50	21 (14.0)	Graduate	28 (18.7)	Small Business	29 (19.3)		
51-56	26 (17.3)						
57-62	9 (6.0)						

The research included a heterogeneous sample of 150 rural women aged between the periphery of Bangalore, covering a

range of ages, education, occupation, and marital status. The following is a close-up demographic breakdown of their distribution:

1) Age Distribution

The participants varied between 18 and 62 years, with the largest number between 18–25 (20.7%), followed by 38–43 years (18.7%). A significant percentage of respondents were also 51–56 years old (17.3%), with smaller percentages among other ages: 26–31 (12.7%), 44–50 (14.0%), 32–37 (10.7%), and 57–62 (6.0%). This distribution indicates a representative spread across various phases of adulthood, which enhances a multi-generational consideration of SHG participation and self-esteem.

2) Educational Status

Participants' educational levels indicate a fairly even spread. 21.3% said they had no formal schooling, suggesting a large proportion with poor literacy. 18.7% had primary schooling and 19.3% secondary school. Interestingly, 22.0% had higher secondary education and 18.7% were graduates, suggesting a moderate level of education among some rural women, possibly as a result of being near urban Bangalore.

3) Occupational Status

Occupational occupations were heterogeneous, consistent with traditional and informal sector activities. The majority were unemployed (25.3%), perhaps including homemakers and job seekers. Agricultural workers constituted 20.0%, followed by housewives (19.3%) and small business operators (19.3%). 16.0% were daily wage earners, signifying dependence on irregular income streams and economic vulnerability.

4) Marital Status

Marital status showed a diverse composition. A notable percentage of the respondents were divorced (30.7%), pointing to a potentially disadvantaged group for which participation in SHGs could act as a vital support network. Widows accounted for 24.0%, pointing to another disadvantaged group frequently isolated from mainstream support systems. Married women constituted 23.3%, with unmarried women at 22.0%, demonstrating a balanced cohort for making comparisons between household role and responsibility.

Table 2: Shows the descriptive statistics for self-esteem

Variable	Mean	Std. deviation	Skewness	Kurtosis
Self-Esteem	2.46	0.92	0.28	-0.786
Monthly Income	1.49	0.5	0.027	-2.026
Age	3.68	1.94	0	-1.263

Table 2 summarizes the statistical measures of the major continuous variables considered in the study, i.e., self-esteem, monthly income, and age. The statistics shown are mean, standard deviation, skewness, and kurtosis that enable us to interpret the central tendency, the spread of the data, and distribution of the data.

5) Self-Esteem

The mean score of self-esteem was 2.46 with a standard deviation of 0.92, reflecting the moderate aspect of self-esteem among the participants with some fluctuation between individuals. The skewness value of 0.280 indicates a slight right skew, i.e., a greater number of participants reported scores less than the mean but with a few scores more than the average. A kurtosis value of -0.786 is indicative of a platykurtic distribution, which implies that the distribution is less peaked and has fewer extreme values than a normal curve.

6) Monthly Income

The mean monthly income score was 1.49, with a standard deviation of 0.50, which implies that the majority of participants had a narrow range of incomes. The skewness is extremely close to zero (0.027), which implies that the distribution of income data was symmetrical. Nevertheless, the value of kurtosis (-2.026) indicates a marked platykurtic distribution, i.e., a relatively flat distribution with reduced outliers, perhaps because of the categorical and limited variability of income levels within this rural sample.

7) Age

The average age score is 3.68, with a standard deviation of 1.94, indicating a broad age range within the sample. The value of skewness (-0.000) confirms that the distribution of age is perfectly symmetrical. The kurtosis coefficient (-1.263) also indicates a platykurtic distribution, meaning that the age distribution is wide with fewer extreme values or peaks.

Table 3: Shows the mean difference on self-esteem between the women who participated in SHG and the women who didn't participate in SHG

Variable	Groups	Mean Self-Esteem	Mean Difference	F-value	p-value
SHG Participation	Yes	2.81	0.56	7.352	0.008
	No	2.25			
Income Level	High	2.67	0.38	4.219	0.042
	Low	2.29			
Education Level	No Formal Education	2.1	6.874	0.002	
	Primary	2.34			
	Secondary	2.49			
	Higher Secondary	2.71			
	Graduate	2.88			
Occupation	Housewife	2.33	3.918	0.021	
	Agriculture	2.4			
	Unemployed	2.28			
	Daily Wages	2.52			
	Small Business	2.79			
Marital Status	Married	2.68		5.121	0.012

	Divorced	2.37		
	Unmarried	2.29		
	Widow	2.14		

The one-way ANOVA analysis was conducted to examine the impact of SHG participation, income level, education, occupation, and marital status on self-esteem among rural women. All variables demonstrated statistically significant differences at the 0.05 level, indicating meaningful relationships between these factors and the self-esteem scores.

- 1) **SHG Participation:** The analysis reveals that SHG members had significantly higher self-esteem (Mean = 2.81) compared to non-members (Mean = 2.25), with a mean difference of 0.56 and an F-value of 7.352 ($p = 0.008$). This suggests that participation in Self-Help Groups positively influences women's self-perception, confidence, and sense of empowerment.
- 2) **Income Level:** Women with higher income levels reported better self-esteem (Mean = 2.67) than those with lower incomes (Mean = 2.29), showing a mean difference of 0.38. The result was statistically significant ($F = 4.219$; $p = 0.042$), implying that financial security may enhance women's psychological well-being and autonomy.
- 3) **Educational Level:** Education showed a clear and positive trend with self-esteem. Women with no formal education had the lowest self-esteem (Mean = 2.10), while graduates had the highest (Mean = 2.88). The differences were statistically significant ($F = 6.874$; $p = 0.002$), highlighting that education not only increases knowledge and skills but also contributes to greater self-worth and identity formation.
- 4) **Occupational Status:** There was a significant difference in self-esteem across different occupational groups ($F = 3.918$; $p = 0.021$). Women involved in small businesses reported the highest levels of self-esteem (Mean = 2.79), followed by daily wage workers (Mean = 2.52), whereas unemployed women reported the lowest (Mean = 2.28). Engagement in income-generating activities may foster independence and self-confidence.
- 5) **Marital Status:** Marital status also significantly influenced self-esteem ($F = 5.121$; $p = 0.012$). Married women had the highest average self-esteem (Mean = 2.68), followed by divorced (2.37), unmarried (2.29), and widowed women (2.14). This suggests that marital support or social recognition may play a role in enhancing women's sense of self-worth.

The results demonstrate that SHG participation and socio-economic factors such as income, education, employment, and marital status have a significant impact on self-esteem among rural women in Bangalore. These findings emphasize the importance of empowering women through education, economic opportunities, and community-based support systems like SHGs to enhance their psychological well-being and social status.

4. Discussion

The purpose of this study was to establish the impact of involvement in Self-Help Groups (SHGs) on rural women's self-esteem in Bangalore, and the impact of socio-

demographic factors such as income, education, occupation, and marital status. Statistical difference in self-esteem was evidenced among all the researched variables, and this highlights the multi-dimensional nature of psychological empowerment of women.

The most significant finding was the significantly increased level of self-esteem evident among the SHG participants compared to non-participants. This is consistent with earlier research that identifies SHGs as a strong mechanism of psychological empowerment by means of social support, shared identity, and opportunities for skill building (Desai & Joshi, 2018). It has been observed that membership in SHGs strengthens the confidence, role in decision-making, and articulation of women in family and social contexts (Kumar & Lalitha, 2019). Financial education, micro-credit access, and social interaction through SHGs not only enhance economic well-being but also result in enhanced self-esteem and ability to cope.

Income level also was found to be a significant predictor of self-esteem, as women who belonged to the upper income category indicated greater self-worth. This is consistent with findings that economic independence enhances personal agency, reduces dependence, and fosters a sense of being in control of one's life circumstance (Buvinić & Gupta, 1997). The psychological effect of earnings—though low—can have a strong positive influence on the self-concept and aspirations of rural women (Cheston & Kuhn, 2002).

Education was found to play a strong role in self-esteem, with graduates reporting the highest scores and non-literate women the lowest. The results are consistent with literature stating that education increases awareness, fosters personal development, and improves communication and decision-making ability—factors contributing to increased self-esteem (Kabeer, 2005; Nayar, 2011). Not only does higher education offer entry into the workplace, but also enables women to resist gender subordination.

Occupation also played a vital role in defining self-esteem. Women who were doing petty business or wage work on a daily basis exhibited higher self-esteem than those who were unemployed or housewives. Working in productive activities is reported to make people more purposeful, competent, and economically secure, and thus ultimately reinforce positive self-image (Narayan, 2002). Entrepreneurship in general has been associated with greater negotiation power and social mobility among rural women (Swain & Wallentin, 2009).

Lastly, marital status exerted a powerful effect on self-esteem, and married women had higher self-esteem than unmarried or widowed women. The social acceptability and emotional support from marriage in traditional settings can perhaps contribute to a stronger sense of identity and belonging (Arokiasamy, 2004). However, the observation that lower self-esteem was observed in widowed and divorced women justifies the provision of special interventions that seek to counteract stigma and provide psychosocial support.

In brief, the study identifies the empowerment and change potential of SHGs to enhance the self-esteem and overall health of rural women. The interplay between socio-demographic factors and SHG membership indicates that psychological empowerment is best implemented through an integrated strategy that converges economic, education, and social interventions.

5. Implication

The implications of this research for policy, practice, and future research are important as far as women's empowerment and rural development are concerned:

- 1) **Policy Implications:** The positive correlation between SHG membership and self-esteem highlights the necessity of sustained government and NGO support to SHGs as a vital tool for women's psychological and social empowerment. Not only should policies provide funds for the setup of SHGs, but they should also invest in their capacity building, leadership development, and e-inclusion so they can operate as sustainable, self-contained units that promote economic and emotional growth.
- 2) **Educational Interventions:** Considering the direct correlation between education and self-esteem, education programs for rural women that are specifically designed—e.g., adult literacy, vocational training, and financial literacy—have to be accorded high priority. Education gives women power and the ability to think critically, thereby generating self-confidence and decision-making power.
- 3) **Economic Empowerment Programs:** The research reaffirms the significance of economic independence towards improving the self-esteem of women. Income-generating activities like micro-entrepreneurship, microfinance access, and skill building need to be included within SHG activities. This facilitates avenues for rural women to transition from economic dependency to independence.
- 4) **Social Support Structures:** Lower self-esteem in widowed, divorced, or unemployed women indicates the necessity for community-oriented mental health and counseling services. SHGs could be extended to include psychosocial support dimensions, peer mentoring, and group therapy areas to treat emotional well-being in addition to economic issues.
- 5) **Gender-Sensitive Development Models:** This research emphasizes the importance of grassroots gender-sensitive planning. The models of development must take into account not only economic metrics but also the psychological impacts of self-esteem, agency, and life satisfaction. These indicators are a better measure of empowerment.
- 6) **Implications for NGOs and Civil Society:** Civil society organizations can be a critical force by being facilitators and champions of women's causes. The research recommends that NGOs need to work towards increasing the coverage and impact of SHGs, especially in the marginalized sections like low-educated or unemployed women.

6. Conclusion

This research points out the crucial position Self-Help Groups (SHGs) occupy in upgrading the self-esteem of women in rural Bangalore. The results here clearly show that SHG participating women have a greater sense of self-esteem than non-members. This points towards SHGs being not only modes of economic assistance, but also dynamic tools for social and psychological empowerment.

Furthermore, socio-demographic elements including income, education, occupation, and marital status also significantly impacted self-esteem. Women with more elevated income levels, higher education, and secure occupations had greater self-worth and confidence. On the other hand, those with lower socio-economic status or precarious marital situations like widowhood or divorce had lower levels of self-esteem. These results affirm that self-esteem is a multidimensional framework influenced by both individual and structural factors.

The research confirms that empowering rural women through SHGs can bring about transformative results—not just economically but emotionally and socially. SHGs create a feeling of belonging, enhance decision-making skills, and allow women to live with more agency. Therefore, they ought to be identified as an essential element in rural development and gender equality initiatives.

In the future, policymakers, NGOs, and community organizations will need to reinforce the coverage and capacity of SHGs, making them more inclusive for marginalized women. Psychological support, skill training, and education should also be integrated into SHG models to develop a more comprehensive model of women's empowerment. Finally, when women empower themselves, they can trigger transformation not only in themselves but also in their families and communities in general.

7. Limitation

Although this research offers useful insights on the connection between SHG membership and self-esteem in rural women, some limitations need to be noted:

- 1) **Limited Geographic Scope:** The research was carried out among women living in the rural areas of Bangalore only. The results, therefore, may not extend to women in other places or in cities where the social, economic, and cultural backgrounds might be dissimilar.
- 2) **Cross-Sectional Design:** The research utilized a cross-sectional study design and collected data at one point in time. It is therefore not feasible to determine causality between self-esteem and participation in SHGs. Longitudinal research is necessary to evaluate changes in self-esteem across time.
- 3) **Self-Reported Data:** Self-reported data on demographic variables and their relationship with self-esteem were obtained through questionnaires, which can be influenced by social desirability bias or inaccurate self-reporting, especially on sensitive issues such as personal confidence and self-esteem.
- 4) **Lack of Qualitative Insight:** Whereas the quantitative method gave statistical correlations, the research did not have qualitative investigation, e.g., focus group

interviews or in-depth interviews, to provide richer understanding of women's individual experience and the subtle manner in which SHG membership affects self-esteem.

- 5) **Sample Size and Diversity:** While the sample was comprised of women of different ages, education levels, and marital status, the sample size as a whole was fairly small. Larger and more diverse samples in future studies would enhance the strength and generalizability of the results.
- 6) **Confounding Variables:** There are also other unmeasured variables—family support, mental health history, community attitudes, or prior trauma—that might affect self-esteem but were not controlled for in this study.

Reference

- [1] Arokiasamy, P. (2004). *Living arrangements among the elderly in India: Trends and patterns* (NFHS Subject Reports No. 24). International Institute for Population Sciences.
<https://dhsprogram.com/pubs/pdf/SR124/SR124.pdf>
- [2] Buvinić, M., & Gupta, G. R. (1997). Female-headed households and female-maintained families: Are they worth targeting to reduce poverty in developing countries? *Economic Development and Cultural Change*, 45(2), 259–280. <https://doi.org/10.1086/452287>
- [3] Cheston, S., & Kuhn, L. (2002). *Empowering women through microfinance*. Opportunity International. https://pdf.usaid.gov/pdf_docs/PNACW615.pdf
- [4] Desai, R., & Joshi, P. (2018). Empowerment of women through SHGs: A sociological study. *International Journal of Social Science and Economic Research*, 3(9), 5064–5073. <https://ijsser.org/more2018.php?id=359>
- [5] Kabeer, N. (2005). Gender equality and women's empowerment: A critical analysis of the third millennium development goal. *Gender & Development*, 13(1), 13–24. <https://doi.org/10.1080/13552070512331332273>
- [6] Kumar, R., & Lalitha, N. (2019). Role of Self Help Groups in Women Empowerment: An Analytical Study. *Indian Journal of Economics and Development*, 15(3), 437–443. <https://doi.org/10.5958/2322-0430.2019.00049.2>
- [7] Narayan, D. (2002). *Empowerment and poverty reduction: A sourcebook*. World Bank Publications. <https://documents.worldbank.org/en/publication/documents-reports/documentdetail/324691468765565114/empowerment-and-poverty-reduction-a-sourcebook>
- [8] Nayar, U. (2011). Education and empowerment of women in India. *Indian Journal of Public Administration*, 57(3), 367–374. <https://doi.org/10.1177/001955611105700304>
- [9] Swain, R. B., & Wallentin, F. Y. (2009). Does microfinance empower women? Evidence from self-help groups in India. *International Review of Applied Economics*, 23(5), 541–556. <https://doi.org/10.1080/02692170903007540>