

# Impact of Self Help Group on Self Efficacy, Resilience and Psychological Empowerment of Rural Women in Telangana

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**Abstract:** *Self help group contributes to the women empowerment, well being and economic independence through self employment and entrepreneurial development. Economic independence makes the individual more confident and increases the self esteem. The present study was taken come to study the self efficacy, resilience and psychological empowerment of rural women in Telangana. The study revealed that women belonging to self help group had high self efficacy, resilience and psychological empowerment than the women who are not attending self help groups*

**Keywords:** self help group, self efficacy, resilience, psychological empowerment

## 1. Introduction

Self-help groups are started by non-governmental organizations (NGOs) that generally have broad anti-poverty agendas. Self-help groups are seen as instruments for a variety of goals including empowering women, developing leadership abilities among poor people, increasing school enrollments, and improving nutrition and the use of birth control. Over the past 25 years, governments have made commitments to the empowerment of women and girls, including rural women and girls with disabilities, as a crucial factor in the eradication of poverty (the 1979 Convention on the Elimination of All Forms of Discrimination Against Women, CEDAW; the 1985 Nairobi Forward Looking Strategies for the Advancement of Women; the 1989 Convention on the Rights of the Child; the 1995 Beijing Declaration and Platform for Action; the 2006 Convention on the Rights of Persons with Disabilities; and the General Assembly Resolution, 2010). A psychosocial approach to empowerment promotes rural women's and girls' human rights, recognizes their strengths, develops their skills, and provides resources. Rural women--even while living in extreme poverty and suffering gender disparities and traditional role restrictions---play a critical role in family, food security, and survival. They also contribute to enhancing agricultural and rural development. (Resolution of the General Assembly, 18 February 2010; Razavi & Miller, 1995; Mulder, & Shellenberger, 1999). According to the Report of the Secretary-General (2011) rural women "should be regarded as active economic agents with untapped potential ...to mitigating the effects of ... rural poverty..." Therefore, their vitality and resilience are protective factors to be nurtured as buffers which enable them to withstand and bounce back from threats to their lives (Spreitzer, 2005). These resilience and protective factors can serve as the basis for planning effective programs of prevention and intervention (Edward, 2005; Psychological research has shown that there is a strong relation between poverty and depression (Simmons et al., 2008) and that women in rural areas are more likely to suffer from high levels of psychological distress and depressive

symptoms (Hays & Zouari, 1995) and less likely to receive psychological treatment than urban women. They are affected by poverty, isolation, lack of education and economic opportunities, and inadequate access to health and mental health care (American Psychiatric Association Issue Paper, 2009; Mulder & Shellenberger, 1999; Smalley, et al., 2010; NAC Rural Health and Human Services Report, 2006).

### 1.1 Objective

The objective of present study is to study the psychological empowerment, self efficacy and resilience of SHG and non SHG women

### 1.2 Hypothesis

There will be difference in psychological empowerment, self efficacy and resilience between SHG and non SHG women

### 1.3 Sample selection

A purposively selected sample comprising 220 rural women of which 100 non SHG women and 120 SHG women of same socio economic group from different districts of Telangana

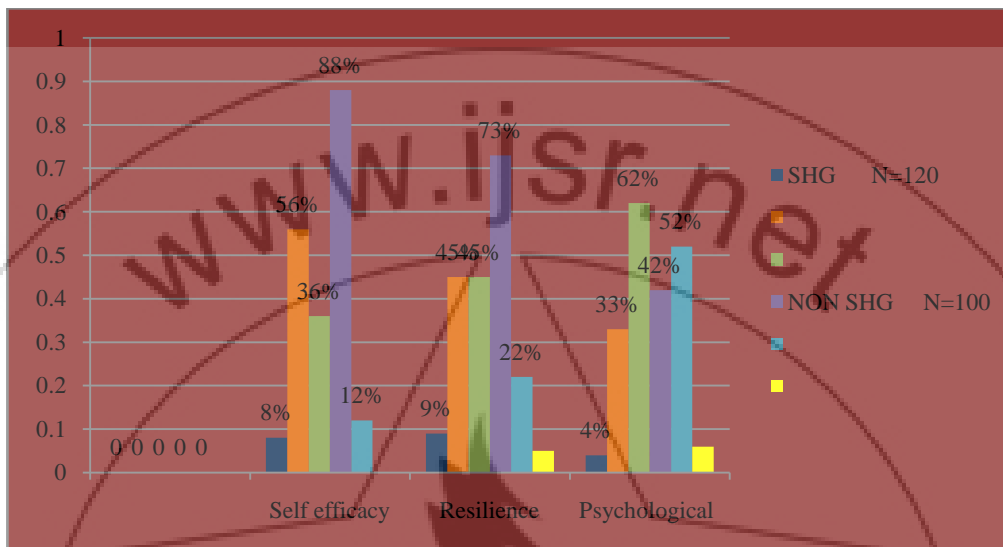
### 1.4 Tools for the Study

Generalized Self-Efficacy Scale by R. Schwarzer and M. Jerusalem (1995), The 14-Item Resilience Scale (RS-14) and psychological empowerment scale were used to study self efficacy, resilience and psychological empowerment in SHG and Non SHG women

2. Results and Discussion

Table 1: Self efficacy, Resilience and Psychological empowerment of SHG and Non SHG women

S. No	Dimension	SHG N=120			NON SHG N=100		
		LOW	AVG	HIGH	LOW	AVG	HIGH
1.	Self efficacy	9(8%)	68(56%)	43(36%)	88(88%)	12(12%)	-
2.	Resilience	11(9%)	55(45%)	54(45%)	73(73%)	22(22%)	5(5%)
3.	Psychological Empowerment	5(4%)	40(33%)	75(62%)	42(42%)	52(52%)	6(6%)



From the above table it can be inferred that most of the (56%) SHG women have average self efficacy and majority (88%) of nonSHG women have low self efficacy. In 43% of SHG women self efficacy was found to be high and interestingly none of the non SHG women had high self efficacy. Majority of women of self help group women had average to high resilience where as majority of non self help group women (73%) had low resilience. It was interesting to note that majority(75%) of self help group women had high psychological empowerment where as 42% of non self help group had low and 52% had average levels of psychological empowerment.

own lives and their ability to influence the direction of social change to create a more just social and economic order.

Table 2: Difference between SHG women and non SHG women in Self efficacy, Resilience and Psychosocial empowerment

S. No	Dimension	SHG-Women		Non-SHG-Women		t values
		Mean	S.D	Mean	S.D	
1.	Self efficacy	33.33	5.81	16.6	6.8	0.0000042***
2.	Resilience	77.089	14.446	49.71	16.54	0.0000374***
3.	Psychological empowerment	18.80	4.40	10.82	4.42	0.000008401***

\*\*\*p<0.001

From the above table it can be established that there is very high significant difference between SHG women and non SHG women in self efficacy, resilience and psychological empowerment. Self help group not only provides opportunity for employment but also trains and educates the women. This newly acquired power made the rural women more confident, being earning member of family she a pivotal role in decision making. SHG helped women to realise sense of self worth, their rights to have and to determine choices. Their right to have power to control their

3. Conclusion

The present study tried to assess the impact of SHG on self efficacy, resilience and psychological empowerment of rural women in Telangana region. Access to credit helped the women in expanding material base by enabling them too start and expand small business, often accompanied by market access. The SHG women experienced Power within, feeling freedom, strength, self identity and increase in levels of confidence and self esteem. Involvement in SHG enabled them to have voice in community affairs and they have been able to tackle community problems like drinking water, toilet facilities, school education, health services.

References

- [1] Simmons, L.A. et al. (2008). Repression and Poverty among Rural Women: A relationship of social causation or social selection? Journal of Rural Health, (24(3), 292-298.
- [2] Smalley, K. B., Yancey, C. T., Warren, J. C., Naufel, K., Ryan, R., & Pugh, J. L. (2010). Rural mental health and psychological treatment: a review for practitioners. Journal of Clinical Psychology, 66(5), 479-489.
- [3] Zimmerman, M.A. (2000). Empowerment Theory: Psychological, Organizational, and Community Levels of Analysis. Handbook of Community Psychology, 43-63.
- [4] Zimmerman, M.A. (1990). Taking Aim at Empowerment Research: On the Distinction between Individual and Psychological Conceptions. American Journal of Community Psychology, 18. 169-177