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### Mindful Self-Care as Predictor of Stress in Working and Non-working Married Women

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#### Abstract

This research investigates the relationship between mindful self-care and stress levels in married women, comparing working and non-working groups. A cross-sectional design was employed, involving married women, and utilizing validated scales to assess mindful self-care components and stress levels. The results showed significant negative correlations between self-care dimensions and stress, indicating that higher levels of self-care are associated with lower stress levels. Notably, Self-Compassion and Purpose emerged as a strong protective factor. Contrary to expectations, the study found no significant difference in stress levels between working and non-working women, though working women reported slightly higher engagement in Mindful Relaxation and Physical Care. The findings suggest that mindful self-care plays a similar role in buffering stress for both working and non-working married women, highlighting its universal importance for their well-being. The study emphasizes the need for tailored interventions promoting holistic self-care practices to mitigate stress in this population.

Keywords: Mindful Self-Care, Stress, Married Women, Mental Health

#### Introduction

Marriage plays a pivotal role in shaping an individual's emotional, social, and psychological landscape. While it can be a source of support and happiness, marriage also brings responsibilities that can lead to stress, particularly for married women. Both working and non-working women encounter distinct stressors that impact their mental well-being. Working married women frequently experience work-life conflict, juggling professional obligations with family duties. Conversely, non-working women may grapple with different challenges. Mindful self-care has emerged as a potent strategy for managing stress. Grounded in conscious awareness, mindful self-care involves nurturing one's mental, physical, and emotional health with compassion. According to Cook-Cottone and Guyker (2017), mindful self-care encompasses six essential areas. Research indicates that individuals in high-pressure professions who practice mindful self-care report reduced burnout, lower stress levels, and increased emotional resilience (Guyker et al., 2024). These benefits are equally

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### Vol. 3 No. 7 (July) (2025)

pertinent for married women. For working women, mindful self-care can enhance emotional regulation, job satisfaction, and coping with dual roles. For non-working women, it offers opportunities to boost self-esteem, mitigate feelings of isolation, and enhance overall life satisfaction. This study seeks to understand the relationship between mindful self-care and stress among working and non-working married women. By comparing these two groups, the research aims to identify the most effective aspects of self-care in reducing stress. The findings can inform the development of targeted support systems and mental health interventions for women navigating the pressures of marriage, work, or home. Ultimately, mindful self-care is a continuous, intentional approach to maintaining mental and emotional balance. By incorporating mindful self-care practices into daily life, married women can fortify their psychological resilience, manage stress more effectively, and enhance their overall quality of life. Promoting such practices can play a vital role in improving women's well-being across diverse life situations.

#### **Method**

This work seeks to clarify the connection between mindful self-care and stress in married working and non-working women and to analyze how mindful self-care affects stress levels. Additionally investigated in the study is whether conscious self-care helps to lower stress as a protective element. The research design, sample, sampling technique, operational definitions, assessment measurements, process, and ethical issues of the current study are all found under the method section.

#### **Research Design**

The cross-sectional survey approach of this study investigates the association between mindful self-care and stress among married working and non-working women. To find out whether higher degrees of conscious self-care correspond with lower levels of stress, a correlational technique is employed.

#### **Sampling Strategy**

A convenience sampling technique was used, where individuals who agreed to participate and met the inclusion criteria was included in the study. Participants were recruited through community centers, online platforms, and social groups.

#### **Participants**

A sample of 300 (working=150 and non-working women=150) was determined using G-Power analysis, ensuring sufficient statistical power for correlation analysis. The age range of participants was (26-44).

#### **Inclusion Criteria**

The inclusion criteria for the present study required participants to be married women aged 26-44 years. Women doing job for more than a year.

#### **Exclusion Criteria**

The exclusion criteria comprised individuals diagnosed with severe psychiatric disorders those undergoing medical treatments that could significantly impact stress levels, and individuals who did not complete the survey.

www.thedssr.com

ISSN Online: 3007-3154 ISSN Print: 3007-3146



DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 7 (July) (2025)

### Assessment Measures Demographic Sheet

The demographic sheet included basic information of the participant i.e. respondent's age, gender, education level, occupation, marriage, year of marriage, family income, occupation of the respondent, the existence/history of chronic health issue in the respondent, the existence/history of chronic health issue in the respondent's family.

### **Mindful Self-Care Scale (MSCS)**

The Mindful Self-Care Scale (MSCS) (Cook-Cottone & Guyker, 2018) was used to evaluate married women's mindful self-care. The 33-item construct assesses self-care practices across several spheres, including physical care, supportive relationships, deliberate relaxation, self-compassion, and mindful awareness. From 1 (never) to 5 (regularly), each item is graded on a five-point Likert scale. The MSCS assesses how frequently people participate in actions that support well-being and stress management. The scale consists of six subscales:

- a) Physical Care: activities that support physical health (7 items)
- **b**) Supportive Relationships: maintaining positive social connections (5 items)
- c) Mindful Awareness: being present in the moment (5 items)
- d) Self-Compassion and Purpose: self-kindness and having a sense of meaning (6 items)
- e) Mindful Relaxation: engaging in relaxation activities (5 items)
- f) Supportive Structure: organizing daily life to promote well-being (5 items) The Cronbach's alpha for the total MSCS scale ranges from 0.80 to 0.91, indicating high reliability. For the present study, the Cronbach's alpha value of the total scale is 0.88, while for the subscales, it ranges between 0.72 and 0.86.

### Depression, Anxiety, and Stress Scale (DASS-21) Stress Subscale

Married women's levels of stress were measured using the Stress subscale of the DASS-21 (Lovibond & Lovibond, 1995). With seven items in each subscale, the 21-item self-report DASS-21 measures three areas: depression, anxiety, and stress. The Stress subscale assesses difficulties in relaxing, anxious excitement, irritability, and a tendency to become readily disturbed or overburden. Every item is rated on a four-point Likert scale, from zero (Did not apply to me at all) to three (Applied to me very much or most of the time). Greater stress is reflected in higher scores. With values ranging from 0.87 to 0.89, the Cronbach's alpha for the Stress subscale of the DASS-21 shows great internal consistency. The Cronbach's alpha value of 0.86 for the Stress subscale confirms the dependability of the instrument in judging married women's perceptions of stress in the present study.

#### **Procedure**

The synopsis was discussed in the Departmental Research Program Committee and afterwards, it was approved by The Board of Advanced Studies & Research (BASR). Permissions was sought from the authors of the assessment measures for use in the present research. After attaining the permissions of the tools, the

www.thedssr.com

ISSN Online: 3007-3154 ISSN Print: 3007-3146



DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 7 (July) (2025)

researcher acquired an institutional approval letter from the department of Psychology, GCWUS. The researcher's identity and the study's title was mentioned in the authorization letter. After this step, the principals of Murray College, Government College Women University and USKT, Sialkot was approached to seek permission for the collection of data.

#### **Main Study**

To conduct the main study, the Mental Health Screening Questionnaire (MHSQ; Mirza & Kausar, 2012) was used, on those who provided consent to take part in the research study to exclude students with any psychiatric problem. Those students who fulfilled the inclusion criteria was then provided with the information regarding the research study. Permission as taken from participants before collection of data as informed consent was signed by each participant and the researcher ensured them about the confidentiality of their data. After that, the information sheet was given to the participants. The questionnaire was administered in the classroom settings. The questionnaire has parts i.e., Demographics, Mindful self-care Scale, DASS-21Stress Sub-scale. When the participant completed the questionnaire, they submitted it to the researcher. After collection of data, it was analyzed by using SPSS version 21.0.

#### **Ethical Considerations**

Ethical standards of APA were followed (APA 2016) to conduct this study. First the proposal of research study was approved by The GCWUS' Board of Advanced Studies & Research (BASR) and permission was sought from the authors of the assessment tools. Before data collection, permissions was obtained from authorities of the Murray College, Government College Women University and USKT, Sialkot. Afterwards, the informed consent was obtained from the students, they was assured about the confidentiality of their information, and they were inform regarding their right to withdraw from the study at any time without providing any reason. Also, the participation was completely voluntary, no inducement will involve. It was also assured to the participants that the collected data was only be accessed by the researcher and her supervisors for the academic purpose and the participants were provided with additional contact information.

#### **Results**

The current research focused on examining mindful self-care as a predictor of stress among working and non-working married women. To achieve this objective, data were analyzed using IBM SPSS version 23. This chapter presents a summary of the statistical findings derived from the analysis to address the aims of the study.

The findings include a description of the sample through demographic characteristics such as age, educational background, employment status, family structure, and type of marriage. This section also outlines the internal consistency (alpha reliability) of the scales utilized, along with descriptive statistics including means, standard deviations, and frequencies for the main study variables. Pearson product-moment correlation was conducted to explore the relationships between mindful self-care, its subcomponents, and stress levels. Additionally, group differences between working and non-working

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DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 7 (July) (2025)

married women were assessed using an independent samples t-test. Finally, linear regression analysis was employed to determine the predictive role of mindful self-care in relation to stress.

www.thedssr.com

ISSN Online: 3007-3154 ISSN Print: 3007-3146



Vol. 3 No. 7 (July) (2025)

Table 1: Demographic characteristics of the Sample (N-300)

Variables         Mean(S.D)         (f)n %           Age of the participant         30.10(4.65)           Gender of participants         (300)100%           Female         (201)67.0%           Education of participants         (171)27.7%           M.Phil.         (16)5.3%           PHD         (129)43.0%           Unemployee         (129)43.0%           Unemployed         (171)57.0%           Marital         status         (64)21.3%           Love         (236)78.7%           Arrange         Marriage         year         of           2020.56(3.93)         2020.56(3.93)
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participant
Family income of
participant (28)9.3%
40000-50000 (29)9.7%
50000-60000 (106)35.3%
60000-70000 (137)45.7%
70000-80000
family system of participant
Nuclear (126)42.0%
Joint (120)42.0%
History/Presence of
chronic health problem in
respondent (17)5.7%
Yes (283)94.3%
No (203)94.3%
History/Presence of
psychiatry problem in
family (40)13.3%
Yes (260)86.7%
No  This table outlines the socio-demographic profile of the 300 female participants

This table outlines the socio-demographic profile of the 300 female participants who took part in the study. It includes information such as age, academic qualifications, employment status (working vs. non-working), marriage type (love or arranged), year of marriage, monthly family income, and the nature of the family system (joint or nuclear). Additionally, the table highlights the presence or absence of chronic physical and psychiatric health conditions, offering essential context for group comparisons.

www.thedssr.com

ISSN Online: 3007-3154 ISSN Print: 3007-3146



Vol. 3 No. 7 (July) (2025)

Table 2: Descriptive Statistics of the Scales of Present Study (N = 300)

Scale	M	SD	α	Range		
			-	Actual	Potential	
MR	19.41	4.73	.70	24	24	
PC	27.33	6.18	.70	29	32	
SCAP	20.58	4.19	.70	22	24	
SR	17.42	4.32	.78	20	20	
SS	13.59	3.35	.72	16	16	
MA	14.08	3.21	.76	16	16	
General	9.90	2.76	.77	12	12	
DASS	8.04	3.92	.73	17	14	
MHSQ	7.63	1.68	.70	5	4	

Table 2 explain the study's measurement tools, confirming their reliability and suitability for analysis. The Cronbach's alpha values ( $\alpha$  = .700-.783) for all scales, including Mindful Relaxation (MR), Physical Care (PC), Self-Compassion and Purpose (SCAP), and the Depression Anxiety Stress Scale (DASS), demonstrate adequate internal consistency, indicating that the instruments accurately measured their intended constructs. The actual score ranges closely aligned with potential ranges for most scales, showing that participants utilized the full range of response options and capturing meaningful variability in self-care practices and stress levels.

Table 3: Mean, Standard deviation and Pearson Product Moment Correlation of Study variables.

Variables	M	SD	1	2	3	4	5	6	7	8
MR	19.14	4.73	-	·44**	.28**	.04**	.16**	.21**	.23**	- .04**
PC	27.33	6.18	-	-	.16**	.10	.13*	.17**	.13*	13*
SCAP	20,58	4.19	-	-	-	·34**	.50**	·55**	.30**	- .22**
SR	17.42	4.32	-	-	-	-	·54**	.51**	.50**	 - .21**
SS	13.59	3.35	-	-	-	-	-	.63**	·47**	11*
MA	14.08	3.21	-	-	-	-	-	-	.46**	- .16**

www.thedssr.com

ISSN Online: 3007-3154 ISSN Print: 3007-3146



### Vol. 3 No. 7 (July) (2025)

General	9.90	2.76 -	-	-	-	-	-	-	08
DASS	8.04	3.92 -	-	-	-	-	-	-	1

Note: MR= Mindful Relaxation, PC=Physical Care, SCAP= Self-Compassion and Purpose, SR= Supportive Relationship, SS=Supportive Structure, MA= Mindful Awareness, General= General.

(\*p<0.5;\*\*p<0.1).

Table 3 reveal the interconnections between mindful self-care components and their collective relationship with stress levels. The robust positive correlations among self-care dimensions-notably between Self-Compassion and Purpose (SCAP) and Supportive Relationships (SR) (p<.01), and between Supportive Structure (SS) and Mindful Awareness (MA) (p<.01) illustrate that these practices are interconnected yet distinct, forming a unified self-care framework. Importantly, the consistent negative correlations between multiple self-care dimensions and stress (DASS)-such as SCAP, SR and MA confirm that mindful self-care serves as a potent buffer against stress. Notably, Self-Compassion and Purpose (SCAP) exhibits the strongest protective association with lower stress, implying that cultivating purpose and self-kindness may be particularly essential for married women's psychological resilience. The weaker yet still significant link between Physical Care (PC) and stress highlights that while physical well-being is important, its impact may be secondary to emotional and relational self-care strategies. These patterns collectively validate the theoretical model that holistic self-care—encompassing emotional, social, attentional practices—synergistically mitigates stress. The findings emphasize the need for interventions that target multiple self-care domains simultaneously, with a focus on fostering self-compassion, supportive networks, and mindful presence to maximize stress reduction.

Table 4: Mindful Self-Care as predictor of stress in working and

non-working married women

	Working		Non-Working		df	t(300)	Cohen's	
	Wome		Women		<u> </u>		d	
	M	SD	$\mathbf{M}$	SD				
			0 (					
MR	19.99	4.35	18.96	4.96	298	1.87	0.22	
PC	28.08	5.74	26.76	6.46	298	1.83	0.21	
10	20.00	3.74	20.70	0.40	290	1.05	0.21	
SCAP	20.86	4.09	20.37	4.26	298	1.00	0.11	
		_			_			
SR	17.17	4.06	17.61	4.51	298	86	0.10	
SS	13.56	3.29	13.61	3.40	298	12	0.01	
55	13.30	3.29	13.01	3.40	290	12	0.01	
MA	13.71	3.07	14.36	3.30	298	-1.72	0.20	
General	10.08	2.54	9.77	2.91	298	.96	0.11	

www.thedssr.com

ISSN Online: 3007-3154 ISSN Print: 3007-3146



DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 7 (July) (2025)

DASS	8.20	4.19	7.92	3.72	298	.60	0.07	
MHSQ	7.50	1.55	7.73	1.76	298	-1.19	0.13	

Table 4 reveal the relationship between employment status, mindful selfcare practices, and stress levels among married women. The strikingly similar stress levels (DASS scores: working women M=8.20 vs. non-working M=7.92; d=0.07) contradict the common notion that employment inherently increases stress, suggesting instead that marital and household responsibilities may impose similar psychological demands regardless of work status. Notably, working women showed slightly higher engagement in Mindful Relaxation (d=0.22) and Physical Care (d=0.21), implying that employment may promote greater intentionality in self-regulation, possibly as a coping mechanism for balancing work and family. Conversely, non-working women reported marginally higher Mindful Awareness (d=0.20), potentially reflecting deeper introspection enabled by fewer external demands. Importantly, the lack of significant differences in Supportive Relationships (d=0.10) or Mental Health Screening scores (d=0.13) highlights that social support and well-being are not inherently linked to employment but may depend on individual and contextual factors. These findings collectively emphasize the universal relevance of mindful self-care for stress mitigation in married women, transcending employment distinctions. The study advocates for tailored, role-sensitive interventions that address shared stressors while leveraging the unique self-care strengths of each group encouraging working women to maintain their proactive relaxation practices while guiding non-working women to channel their mindful awareness into purposeful self-care routines. This similarity in stress outcomes, despite differing lifestyles, underscores the pervasive challenges of marital roles and the adaptive potential of mindful self-care across diverse life context.

#### **Discussion**

This study was conducted to explore how mindful self-care influences stress levels among working and non-working married women. The findings revealed a notable negative relationship between self-care and stress, indicating that individuals who consistently engage in mindful self-care practices tend to experience reduced stress. These outcomes align with previous research that highlights the positive effects of self-care on psychological well-being. .Although the differences between working and non-working women were not statistically significant, mean comparisons suggested that working women scored slightly higher in mindful self-care, while non-working women reported somewhat greater stress levels. This pattern could be attributed to working women having more structured routines, social interaction, and a sense of independence, all of which may encourage better self-care. Conversely, non-working women might encounter more stress due to domestic workload, emotional fatigue, or limited time for personal well-being. Furthermore, regression analysis confirmed that mindful self-care serves as a significant predictor of stress. This finding underscores the essential role of self-care practices in maintaining mental and emotional balance, regardless of occupational status. Encouraging self-care among married women may therefore be a valuable strategy for reducing stress and enhancing overall mental health.

www.thedssr.com

ISSN Online: 3007-3154 ISSN Print: 3007-3146



DIALOGUE SOCIAL SCIENCE REVIEW

Vol. 3 No. 7 (July) (2025)

#### **Conclusion**

In conclusion, the results indicate that mindful self-care is inversely associated with stress in both working and non-working married women. While employment status does not significantly influence this relationship, individuals who engage in regular self-care routines tend to report lower levels of stress. These findings highlight the need to promote self-care as a key factor in supporting women's emotional resilience and psychological well-being.

### **Implications of the Study**

- Clinical Relevance: Mental health professionals can integrate mindful selfcare strategies into counselingand stress management interventions for married women.
- Community and Educational Impact: Community centers and institutions can offer programs and workshops to raise awareness about self-care and its role in reducing stress.
- Policy-Level Implication: Policymakers and organizations should support initiatives that educate women, especially those not in the workforce, on self-care and emotional health.
- Family-Level Implication: Family members can be encouraged to support women in maintaining self-care habits by recognizing their emotional and physical needs.

# **Limitations and Suggestions Limitations**

- The study's sample was confined to married women from a specific geographic area, which may limit the generalizability of the findings to broader populations.
- As the data were gathered through self-reported questionnaires, the possibility of response bias cannot be ruled out.
- The study's cross-sectional design limits the ability to determine causal relationships between variables.

#### **Suggestions for Future Research**

- Future research should strive to include a larger and more diverse sample, encompassing various marital statuses and geographic regions, to increase the generalizability of findings.
- Longitudinal research could provide more insight into the long-term impact of self-care on stress and mental health.
- Utilizing a mixed-methods approach that integrates both qualitative and quantitative data can provide a richer understanding of women's experiences with self-care and stress management.
- Intervention-based studies could test the effectiveness of mindful self-care training in managing stress levels among different groups of women.

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www.thedssr.com

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