



# IMPACT OF PHYSICAL HEALTH ON PRODUCTIVITY AMONG WOMEN TEACHERS OF HIGHER EDUCATIONAL INSTITUTION IN COIMBATORE

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## ABSTRACT

The present study investigates the impact of physical health on the productivity of women teachers working in higher educational institutions in Coimbatore. This descriptive study aimed to explore the relationship between various aspects of physical health and the professional productivity of women educators. Data were collected from 307 respondents through a self-assessed questionnaire specifically designed for this research. The study population included working women teachers employed in higher educational institutions within Coimbatore, a region known for its growing urbanization and associated pollution levels, which may influence health outcomes. The collected data were analyzed using Statistical Package for the Social Sciences (SPSS), employing appropriate descriptive and inferential statistical tools to interpret the findings. The study highlights significant insights into how physical well-being influences professional efficiency and offers recommendations for institutional and policy-level interventions to promote better health and productivity among women teachers.

**KEY WORDS:** Physical Health, Productivity, Women Teachers, Higher Educational Institutions, Coimbatore, Descriptive Study, Self-Assessed Questionnaire, SPSS, Occupational Health, Work Efficiency

## INTRODUCTION

Physical health is a fundamental aspect of an individual's overall well-being, directly influencing personal and professional productivity. In the education sector, where teachers play a crucial role in shaping young minds, their physical well-being significantly impacts their ability to perform effectively. Women teachers in higher educational institutions, particularly in cities like Coimbatore, face multiple challenges that affect their physical health and, consequently, their work productivity. Coimbatore, known as an educational hub in Tamil Nadu, houses numerous higher educational institutions, including universities, engineering colleges, medical colleges, and arts and science colleges. Women form a significant part of the teaching workforce in these institutions. However, despite their crucial role, they often experience health issues arising from a combination of occupational stress, sedentary lifestyles, nutritional deficiencies, and work-life balance struggles.

These health challenges affect their ability to deliver quality education, participate in research, and contribute to the overall development of their institutions. This research aims to analyze the impact of physical health on the productivity of women teachers in higher educational institutions in Coimbatore

Women teachers in higher educational institutions perform multiple responsibilities, including teaching, mentoring students, conducting research, participating in administrative duties, and balancing personal life commitments. However, many factors, such as long working hours, inadequate physical activity, improper nutrition, stress, and lack of institutional support, contribute to declining physical health among these educators. The issue is further aggravated by the sedentary nature of the job, poor work-life balance, and societal expectations placed on women regarding household responsibilities

## RESEARCH OBJECTIVE

1. To know the women teacher's awareness on physical health.



2. To identify the physical challenges faced by women teachers during their work

## REVIEW OF LITERATURE

**Boles et al. (2004)** explored the relationship between employee health risks and work productivity in a large-scale workplace study. Their findings revealed that higher levels of health risks—such as obesity, stress, smoking, and physical inactivity—were significantly associated with decreased productivity, primarily through increased absenteeism and presenteeism. The study provided empirical support for workplace health promotion programs, highlighting that reducing modifiable health risks can lead to measurable improvements in employee performance and organizational efficiency.

**Grawitch et al. (2017)** examined the impact of health-related decrements—specifically, mental and physical health—on employee productivity. The authors highlight a critical distinction often overlooked in organizational psychology: that mental and physical health issues influence productivity differently and should not be treated as a singular construct. Using empirical data, the study demonstrates that both types of health impairments contribute uniquely to productivity loss, with mental health issues often having a more immediate and pervasive impact due to cognitive and emotional interference. The study emphasizes the importance of adopting integrated wellness strategies in organizations that address both physical and psychological well-being. It critiques traditional models that narrowly focus on absenteeism, advocating for broader metrics like presenteeism (reduced productivity while at work) as more accurate reflections of health-related productivity losses. Moreover, the research suggests that effective interventions must be tailored to the specific type of health concern, reinforcing the need for organizations to develop comprehensive, evidence-based wellness programs.

**Marin-Farrona et al. (2023)** conducted a systematic review to evaluate the effectiveness of worksite wellness programs that emphasize physical activity in enhancing workers' health and productivity. Drawing on a comprehensive analysis of 35 peer-reviewed studies, the authors found consistent evidence that physical activity-based interventions implemented at the workplace significantly improved various health outcomes, including cardiovascular fitness, musculoskeletal strength, and mental well-being. The review also established a positive link between these health improvements and increased workplace productivity, as measured through reduced absenteeism, enhanced work performance, and better job satisfaction. The authors highlighted that program success often depended on factors such as program duration, frequency of activity sessions, and organizational support. Notably, interventions that were integrated into the workday and supported by management yielded the highest levels of participation and effectiveness.

**Pedersen et al. (2009)** conducted a one-year randomized controlled trial to assess the impact of a worksite physical activity intervention on employees' physical capacity, health, and productivity. The study involved structured exercise sessions during work hours and found significant improvements in physical fitness, reduced musculoskeletal pain, and enhanced perceived health among participants. Importantly, these health gains were accompanied by increased self-reported productivity and reduced sickness absence. The findings support the long-term value of integrating physical activity programs into the workplace to promote employee well-being and organizational performance.

## RESEARCH METHODOLOGY

This study adopts a descriptive research design to examine the impact of physical health on productivity among women teachers in higher educational institutions in Coimbatore. The research focuses on women aged 26 years and above working in government, private, and autonomous colleges. A stratified random sampling technique is used to ensure balanced representation across different types of institutions. The total sample size is 389 respondents, selected based on statistical sampling methods. Data is collected using a structured questionnaire that includes both physical health indicators and productivity measures. The study relies on primary data, supplemented by relevant secondary data from academic journals and institutional reports. Descriptive and inferential statistics are used to analyze the data. Tools like percentages, mean scores, and correlation tests are applied. Ethical considerations such as informed consent and confidentiality are strictly followed. The methodology ensures accurate, relevant, and meaningful insights into the relationship between health and productivity.

## DATA ANALYSIS AND INTERPRETATION

**Table:01 Frequency Analysis**

		<b>Frequency</b>	<b>Percent</b>
Age Group	23-26	176	48.6
	above 26	131	36.2
Educational Level	Bachelor's Degree	97	26.8
	Master's Degree	106	29.3
	Ph. d	104	28.7
Marital Status	single	153	42.3
	married	154	42.5
	Total	307	84.8
Workload (hours per week)	<20 hrs	77	21.3
	21-30 hrs	79	21.8
	31-40 hrs	68	18.8
	>40 hrs	83	22.9

The table reveals that most respondents are young adults, with a significant portion holding advanced degrees, including Master's and Ph.D. There is a near-equal split between single and married participants, offering a diverse perspective on personal life stages. Regarding workload, a large number of respondents work over 40 hours per week, indicating a high workload among many female teachers. This demographic diversity highlights the importance of examining physical health and productivity across different educational backgrounds, ages, marital statuses, and work intensities.

**Table 02: Correlation Table**

	<b>Educational Level</b>	<b>Age Group</b>
Educational Level	1	0.065
Age Group	0.065	1
I consciously engage in physical activities	-0.034	0.087
I face difficulty in maintaining proper posture while working	-0.059	-0.038
Regular physical activity improves my energy levels at work	0.08	0.131
Physical discomfort reduces my concentration and efficiency	0.044	-0.011

The correlation analysis reveals that most relationships between variables such as educational level, age group, and aspects of physical health and productivity are weak or negligible. There is a very weak positive correlation between educational level and age group ( $r = 0.065$ ), indicating a minimal association. Both educational level and age group show little to no relationship with consciously engaging in physical activities ( $r = -0.034$  and  $r = 0.087$ , respectively). Similarly, their correlation with difficulty in maintaining proper posture is also minimal ( $r = -0.059$  and  $r = -0.038$ ). A weak positive correlation exists between educational level and improved energy levels through physical activity ( $r = 0.080$ ), while age group shows a slightly stronger but still weak relationship ( $r = 0.131$ ), suggesting older individuals may experience slightly greater energy benefits. Physical discomfort affecting concentration shows negligible correlations with both educational level ( $r = 0.044$ ) and age group ( $r = -0.011$ ). Overall, these findings suggest that demographic factors such as education and age have limited influence on physical activity behaviors and their perceived impact on productivity.

### Interpretation - Discussion

with encouraging check-ups ( $r = 0.914$ ), organizing stress-relief workshops ( $r = 0.098$ ), and wellness programs ( $r = 0.039$ ), indicating institutional alignment in health interventions. The highest observed correlation is between



organizing stress-relief activities and implementing wellness. The Pearson correlation analysis among various variables related to physical health and work productivity among women teachers offers several insights for effective research-based interventions. The correlation between workload hours per week and prioritizing physical health in work schedules is slightly negative ( $r = -0.019$ ), suggesting that as workload increases, prioritization of physical health may decrease marginally. Similarly, weak negative correlations exist between workload and taking preventive measures ( $r = -0.019$ ), providing counseling for health and wellness support ( $r = -0.078$ ), encouraging regular physical check-ups ( $r = -0.122$ ), organizing stress-relief activities ( $r = -0.096$ ), and implementing workplace wellness programs ( $r = -0.038$ ). These findings suggest that increasing workload may subtly hinder engagement in health-promoting behaviors. However, stronger positive interrelationships are seen among the health-focused variables themselves. For instance, prioritizing physical health is positively correlated with taking preventive measures ( $r = 0.049$ ), feeling less motivated to work when facing physical health issues ( $r = 0.079$ ), and implementing workplace wellness programs ( $r = 0.086$ ). Moreover, taking preventive measures is moderately correlated with providing counseling ( $r = 0.032$ ), encouraging physical check-ups ( $r = 0.062$ ), and implementing wellness programs ( $r = 0.048$ ). A notably high correlation exists between feeling less motivated due to physical health issues and providing counseling support ( $r = 0.098$ ), as well as encouraging check-ups ( $r = 0.083$ ) and implementing wellness programs ( $r = 0.114$ ), suggesting that teachers who recognize the impact of poor health on work are more likely to support wellness initiatives. Additionally, providing counseling is strongly associated with programs ( $r = 1.000$ ), pointing to their frequent co-occurrence. These interdependencies support the design of comprehensive institutional interventions, where implementing one form of health support is likely to reinforce others. Strategically integrating counseling, stress-relief workshops, regular health monitoring, and preventive health strategies could create a synergistic effect, fostering better physical well-being and thereby enhancing productivity among women teachers.

## CONCLUSION

This research highlights the link between physical health and work productivity among women teachers. While heavy workloads slightly reduce focus on health, various support activities like counseling and stress-relief programs are closely connected. The study emphasizes the importance of a comprehensive health program in schools, showing that when one health initiative is offered, others are likely to follow. By supporting teachers' well-being with coordinated health strategies, schools can improve motivation, engagement, and productivity.

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