

SEX-ROLE ORIENTATION AS THE MODERATOR OF RELATIONSHIP BETWEEN ORGANIZATIONAL ROLE STRESS AND PSYCHOLOGICAL HEALTH IN WOMEN

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Abstract

In the present study an attempt was made to explore the moderating effect of sex-role orientation on the relationship between organizational role stress and psychological health of women. The organizational Role Stress Scale developed by Pareek, the Cornell Medical Index developed by Wig, Prasad and Varma and the Indian adaptation of Bem's Psychological Sex-Role Orientation Inventory by Rao, Gupta and Murthy were administered on a sample of 280 working women from the city of Ahmedabad. Selected working women were divided into three groups viz., high, moderate and low stress group. Again working women in each of these stress groups were categorized in four groups according to their sex-role orientations. These four groups were working women with Androgynous, Masculine, Feminine and Undifferentiated orientation. The sub-group wise comparison revealed that during the experience of low stress masculine group of women exhibited poorest psychological health and that androgynous group of working women exhibited better psychological health than the masculine and feminine group of women. Further, during moderate level of stress women with androgynous orientation had highest level of psychological health as compared to women belonging to other three groups. However, during the experience of high stress, no significant difference in psychological health was observed among various groups of women having different sex-role orientation.

INTRODUCTION

In this competitive age increasing number of women have joined the world of work in India. Women are entering into different types of jobs either with a view to enhance the income of the family or to fulfill the need of self-pride or being compelled to enter into job because of increased financial liabilities. However, in the male dominated Indian society there is no special facility for majority of working women. A clear conflict emerges between the socially approved status of women as homemaker and the status as an employed worker. Women face the dilemma of somewhat contradictory role perceptions. The loyalties, interests and aims differ between home and work-place and demand two different types of individualities. When a housewife takes on the working role she takes upon herself increasing pressures to reconcile the dual burden of the two roles located in different sectors of the society- in house and work-place. Various studies support the view that working women experience more stress due to daily hassles (Baruch and Barnett, 1986; Jadeja, 2005), and that female employees feel more job stress than male employees (Mishra, 1996; Thakar and Misra, 1995; Davidson and Cooper, 1983; Lundberg and Parr, 2000).

Heavy work load on working women may affect their physical as well as psychological health. As Long and Porter (1984) pointed out, the psychological consequences of multiple role involvement depend not only on the total number of roles occupied but on the nature of particular roles and on the nature of person occupying multiple roles. Recently more and more researchers are developing interest in finding out the factors that moderates relationship of stress to well-being. Many personality traits, like hardiness, self-esteem, locus of control, optimism etc., are found to act as moderators of stress (De Longis, Folkman and Lazarus, 1988; Scheier et al., 1989; Leftcourt, Miller, Ware and Sherk, 1985; Brockner, 1998).

The present study is centered around the moderating impact of gender role orientation among working women. In the social sciences the concept of gender role orientation among working women. In the social sciences the concept of gender means much more than biological sex. It refers to socially constructed expectations regarding the ways in which one should think and behave, depending on sexual classification. These stereotypical expectations are commonly referred to as sex roles or gender roles. Attitude toward gender roles are thought to result from complex interactions among societal, cultural, familial, religious, ethnic and political influences.

Gender affect many aspects of life, including access to resources, methods of coping with stress, styles of interacting with others, self-evaluation and expectations of others. These are all factors that can influence mental health positively or negatively. Research indicates the differential impact of masculine, feminine and androgynous personality on psychological well-being. Naphotz (1994) reported significant differences among the four sex-typed groups (masculine, feminine, androgynous and undifferentiated) on self-esteem and depression. He found that the sex-typed group had significantly higher depression and lower self-esteem scores than the androgynous group.

METHOD

Sample : The study was conducted on 280 married working women working in various colleges, schools and hospitals in ahmedabad city. The age of participants varied from 21 to 58 years. The educational attainment of the participants range from high school to university degree with experience range of 5 to 20 years.

Tools : Following Psychometric tools were employed in the present investigation :

Organizational Role Stress Scale :

Organizational role stress scale developed by Pareek (1983) was used to measure organizational role stress of the working women. The scale comprises 50 items to be rated on 5-point scale, relating to various dimensions of role stress. The scale has acceptable level of reliability as reported by Pareek (1983) validity of the tool has been established through internal consistency and construct validity methods.

The Psychological Sex-Role Orientation Inventory :

This is as inventory to measure Sex-Role Orientation of individuals as conceptualized by Bem (1974). Keeping in view the Indian culture Rao, Gupta and Murthy (1982) developed an Indian adaptation of the Original Sex-Role Inventory developed by Bem (1974). For the present investigation this adapted version was used to measure sex-role orientation of working women. The scale consists of 30 items with 15 masculine and 15 feminine adjectives. It is a 7-point scale with 1 representing 'Never or almost never true' and 7 representing 'Always or almost always true.' On the basis of masculinity and femininity scores subjects can be divided into 4 groups viz., masculine, feminine, androgynous and undifferentiated. The authors have reported satisfactory reliability and validity.

RESULTS AND DISCUSSION

As the aim of present research was to study the moderating impact of sex-role orientation on the relationship between organizational role stress and psychological health of working women, initially all the subjects were divided into 3 groups having different levels of stress (high, moderate and low). Again subjects in each of these sub-groups were categorized into the following four groups according to their scores on sex-role inventory :

All the four gender groups in each of the three stress groups (e.g. Low, Moderate and High Stress Group) were compared on psychological health separately using t-test. The results are presented in table-1.

Results indicate that in low stress group androgynous women scored lowest on psychological distress (M=5.80) and masculine women scored highest on psychological distress (M=9.28). Working women with masculine orientation significantly scored higher than working woman with androgynous and undifferentiated orientation. Thus it was concluded that when stress level is low working women with masculine orientation exhibited low level of psychological health than other groups of working women accept feminine group.

Table-1

Sub-group wise Means, SDs and t-values of Psychological distress among working women

Stress Groups	Groups based on sex-role orientation	N	Mean	SD	t-value
LOW STRESS	1. Androgynous	46	5.80	4.37	1 vs 2 = 3.87 ** 1 vs 3 = 3.36**
	2. Masculine	54	9.28	4.53	1 vs 4 = 1.09 2 vs 3 = 0.76
	3. Feminine	32	8.44	5.17	2 vs 4 = 2.30* 3 vs 4 = 1.20
	4. Undifferentiated	42	7.00	5.03	
MODERATE STRESS	1. Androgynous	48	6.60	4.41	1 vs 2 = 4.71** 1 vs 3 = 2.40*
	2. Masculine	42	10.79	3.99	1 vs 4 = 2.50* 2 vs 3 = 2.43*
	3. Feminine	62	8.76	4.96	2 vs 4 = 2.00* 3 vs 4 = 0.20
	4. Undifferentiated	60	8.95	5.31	
HIGH STRESS	1. Androgynous	26	11.65	5.70	1 vs 2 = 0.64 1 vs 3 = 0.26
	2. Masculine	24	12.63	5.12	1 vs 4 = 0.80 2 vs 3 = 0.26
	3. Feminine	26	12.08	6.40	2 vs 4 = 0.23 3 vs 4 = 0.52
	4. Undifferentiated	18	13.00	5.35	

* P < .05, ** P < .01

When the same statistical analysis was carried out for working women experiencing moderate level of stress many interesting results were found. Firstly, as in the case of group of women with low stress, women with masculine orientation scored highest and women with androgynous orientation scored lowest on psychological distress. Secondly, masculine group of women significantly differed from androgynous, feminine and undifferentiated group of women on psychological distress and exhibited lowest level of psychological health than the rest of the groups of women. Thirdly, androgynous group of women not only scored higher than masculine group of women but also significantly scored higher than the feminine and undifferentiated group of women, on psychological health. However, no significant difference in psychological health was observed between feminine and undifferentiated group of women.

In the group of working women experiencing high level of stress, it was observed that women belonging to all the four gender groups exhibited similar level of psychological distress. Not a single comparison between the groups could reach the level of significance, which indicated that during the situation of high stress all the groups of working women exhibited same level of poor psychological health irrespective of their sex-role orientation.

Thus, the above results clearly proved that sex-role orientation among working women had moderating impact on the relationship between organizational role stress and psychological health, at least during the low and high stress conditions. When the stress level is either low or moderate androgynous orientation buffers the effect of stress on psychological health of working women. To some extent undifferentiated orientation also protected women against the adverse impact of stress on psychological health. Masculine group of women's psychological health was very much adversely affected by stress, even though the level of stress was very low or moderate. However, when the stress level was very much high not a single group of working women was protected from the damaging impact of stress on psychological health, which means that during high stress sex-role orientation among women did not buffer the impact of stress on mental health and thus, did not play the role as moderating variable.

Finally, it could be concluded that perhaps traditionally feminine or recently developed masculine orientations among women are less suited to current conditions, than are androgynous and undifferentiated orientations especially for working women. If this is true, then developing androgynous sex-role orientation may promote greater adaptability and positive mental health in working women.

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