

Psychological Predictors of Health and Quality of Life of Working Women

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Abstract:

Working women's personality characteristics, sense of coherence and coping skills may be regarded as vital mechanisms that may influence the manner in which they deal with these various roles effectively and hence this health and quality of life. Different studies addressing different psychological dimensions of women's life and work have been undertaken. However there are hardly any studies that study personality, coping behavior, Health and Quality of life of women work place. The general objective of this research is to examine the relationship between personality dimension, quality of life, health of working women and to determine whether personality dimensions can predict all these. A cross sectional survey design employed quantitative methodology would be used for the present study. The sample would be obtained by contacting relevant authorities in different fields. The convenience sample consists of 300 working mothers. A prerequisite would be that they should be married and have children, while also pursuing this career.

Key words: Personality, Quality of Life, Health, Working Women, Coping orientation.

Introduction:

Quality of life has been defined by World Health Organization (WHO) as the individual's perception of his/her position in life in the context of the culture and value systems in which he/she lives.

The traditional roles of women in society were those of wives and mothers, with the childcare and domestic responsibilities ascribed to them (Biernat & Wortman, 1991). It is only in recent history that women became a sizeable segment of the work force and made inroads in previously all-male occupations (Senior, 2003). Statistics indicated that 5.8 million women entered the labour market between 1991 and 2011, pointing to a huge increase in women entering the labour market during this period. These statistics confirm that more women pursue careers nowadays and are required to contribute to the income of the household (Acker, 1992; Brannen & Moss, 1991; Shaw & Burns, 1993; Spade, 1994), which results in families operating as dual career couples (Klerman & Leibowitz, 1994; Schwartz, 1989). However, in dual career couples women still perform most of the domestic chores and remain responsible for child care and domestic responsibilities (Douglas & Michaels, 2004; Maconachie, 1990; Ozer, 1995). Being a working mother, does have some implications in terms of overall well-being (Sears & Galambos, 1993; Vosloo, 2000). Major difficulties for career women are the perceived incompatibility of their roles as wife and mother with their roles of being employed (Shipley & Coats, 1992; Vosloo, 2000). Coping with the various roles usually contribute to increased levels of stress and difficulty for working mothers (Chusmir & Durand,

1987; Sears & Galambos, 1993; Vosloo, 2000). On the other hand, it also has some implications for the organization with regards to its productivity and effectiveness, as most working mothers entering the workplace are still responsible for the more traditional domestic and child care responsibilities (Douglas & Michaels, 2004; Senior, 2003). Nevertheless, Welbourne (1999) indicated that having women in top management teams resulted in higher earnings, greater shareholder wealth and better long-term performance. Ruderman, Ohlott, Panzer and King's (2002) research also suggested that the multiple roles women play in their personal lives provide practice for multiskilling, opportunities to inter-personal skills and leadership practice that in the end enhance effectiveness in their work role. Therefore, most organizations nowadays appear to realize the increased importance of utilizing, developing and retaining female talent (Senior, 2003). Vosloo (2000) observed that working women do not function in isolation, but in a bigger system that encloses the organization and their work. But they also function in an individual system that consists of their families and demographic variables (Vosloo, 2000). In terms of the interaction of these two systems and the conflict that may arise from this interaction, it is necessary that mechanisms be found for handling these various roles effectively. Working women's personality characteristics sense of coherence and coping skills may be regarded as vital mechanisms that may influence the manner in which they deal with these various roles effectively and hence their health and quality of life.

RESULTS AND DISCUSSIONS

Table 1: Showing means and standard deviation of predictor and criterion variables

| Variable | Mean | Std. Deviation |
|-----------|--------|----------------|
| NEO_N | 37.84 | 7.551 |
| NEO_E | 38.51 | 6.239 |
| NEO_O | 39.94 | 5.961 |
| NEO_A | 38.93 | 5.574 |
| NEO_C | 40.91 | 7.201 |
| NEO_TOTAL | 196.14 | 14.262 |
| OL_COM | 26.48 | 6.495 |
| OL_ME | 33.34 | 9.201 |
| OL_MA | 5.06 | 1.727 |
| OL_TOTAL | 64.66 | 15.793 |
| CMI_EMO | 11.12 | 10.260 |
| CMI_PHY | 15.16 | 9.572 |
| CMI_TOTAL | 26.31 | 18.366 |
| QOL_IM | 25.35 | 7.171 |

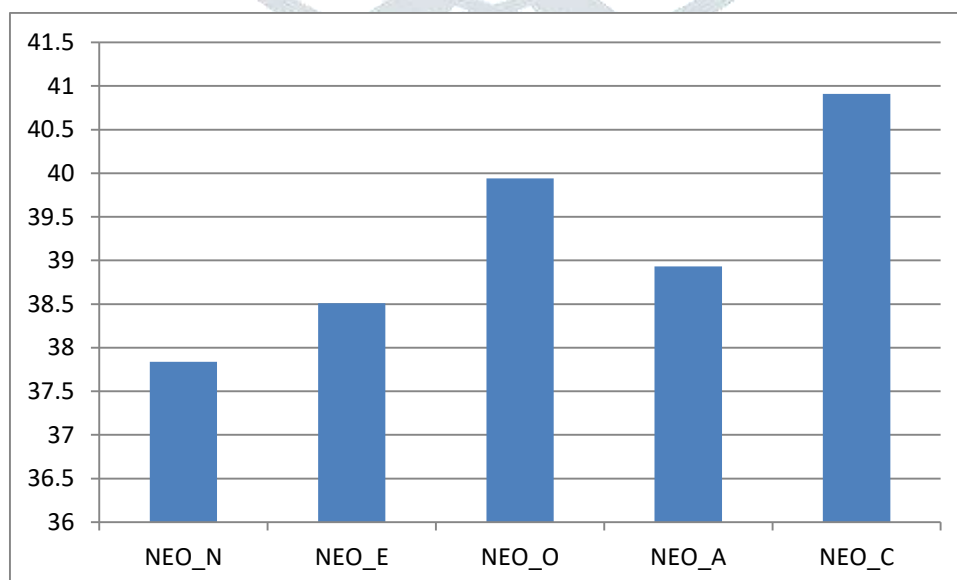
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|-----------|-------|--------|
| QOL_SA | 33.04 | 10.463 |
| QOL_TOTAL | 58.39 | 16.664 |

A careful perusal of table reveals that five dimensions of NEO-P (Big five factor model of personality) have different means and std. i.e. NEO_N has $x = 37.84$ with std. being 7.551 and NEO_E (Extraversion) shows $x = 38.51$, std. = 6.239 besides NEO_O (Openness) has a $x = 39.94$, std= 5.961 while the fourth dimension i.e. NEO_A (Agreeableness) has $x = 38.93$ and std. = 5.574 and the fifth dimension namely NEO_C (Conscientiousness) shows $x = 40.91$ and std. 7.201.

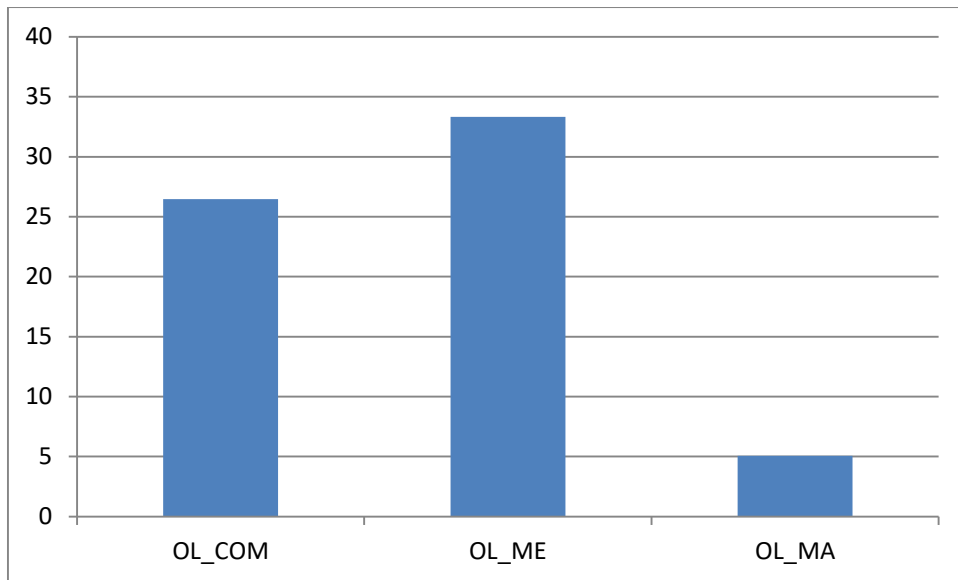
The table further reveals that three dimensions of Orientation to Life Scale namely comprehensive, meaningfulness and manageability have following means and std. with OL_Com. having $x = 26.48$, std. = 6.495 and OL_Me showing $x = 33.34$, std.=9.201 while OL_Ma has $x = 5.06$, std. 1.727 and the mean for OL_Total stands as $x = 64.66$ and std. = 15.793.

Present study made use of Coping Scale developed by Carver and Shierer, the original scale has three dimensions i.e. problem focused coping, emotion focused coping and dysfunctional coping style, however, for our purposes we made use of only problem focused coping and emotion focused coping. The mean sd table reveals that problem focused coping has $x = 15.21$, std. 3.690 while emotion focused coping shows $x = 13.161$, std. 3.5286

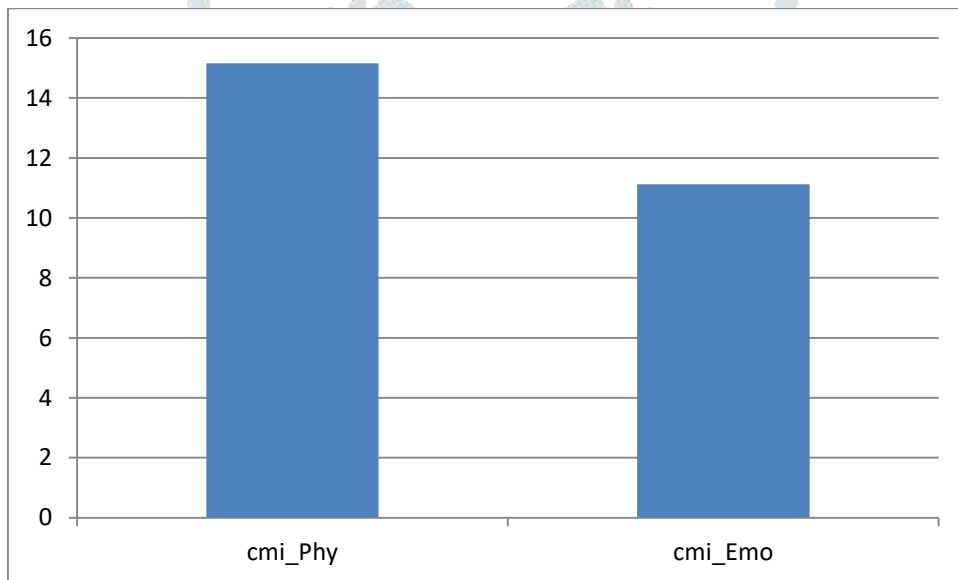
As for criterion variables i.e. health and quality of life the means and standard. CMI_EMO (emotional or psychological health) $x = 11.12$, std. =10.260 while CMI_PHY (physical health) $x = 15.16$, std.=9.572 and CMI_Total has $x = 26.31$, std. = 18.366. Similarly, Quality of life too has two dimensions i.e. Importance (Imp.) and Satisfaction (Sat.). The QOL_Imp. $x = 25.35$, std. =7.171 while QOL_Sat. $x = 33.04$, std. = 10.463 and QOL_Total $x = 58.39$, std. 16.664



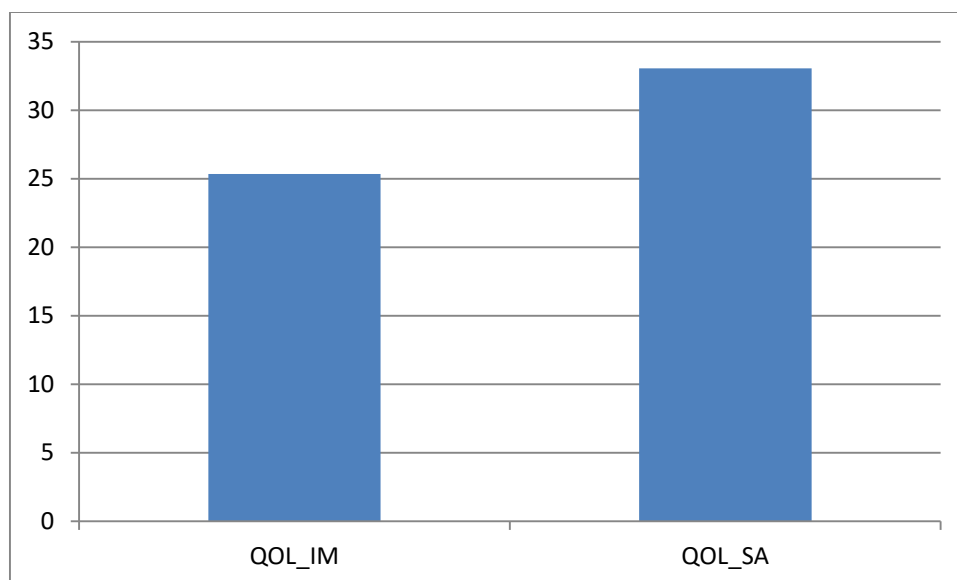
1 Graph showing mean personality dimensions



2. Graph showing mean of sense of coherence dimensions



5. Graph showing mean of physical and emotional health



6. Graph showing mean Importance and Satisfaction dimensions of quality of life

Table. 2 Showing correlations between dimensions of Personality (predictor variable) and dimensions of health (criterion variable)

| | | cim_phy | cmi_emo | cmi_total |
|-----------|-------------|---------|---------|-----------|
| neo_n | Correlation | -.015 | -.012 | -.018 |
| neo_e | Correlation | .019 | .100 | .066 |
| neo_o | Correlation | .016 | -.009 | .001 |
| neo_a | Correlation | -.099 | -.095 | -.104 |
| neo_c | Correlation | -.124 | -.073 | -.103 |
| neo_total | Correlation | .094 | .040 | .073 |

The correlation table depicting correlation between dimensions of NEO personality questionnaire and dimensions of CMI (Cornel Medical Index) reveals that NEO_N (neuroticism) correlates slightly negatively with CMI_Phy (Physical health) $r = -.015$ and with CMI_EMO (emotional health) $r = -.012$ while correlation with total on CMI is also slightly negative $r = -.018$. Further the correlation of NEO_E (extraversion) with CMI_Phy stands $r = .019$, with CMI_Emo $r = .100$ and correlation of NEO_E with total score on CMI is $r = .066$

Similarly, NEO_O (openness) has correlation with CMI_Phy $r = .016$, however, NEO_O correlates slightly negatively with CMI_Emo $r = .009$ but the correlation with total on CMI $r = .001$. The table further reveals that NEO_A (Agreeableness) has significant at .01 or .05 level of probability, NEO_A also shows slightly

negative correlation with CMI_Emo $r=-.095$ and its correlation with total on CMI also is negative with $r=-.104$. Though the correlations are slightly negative but none of them is significant at .05 and .01 level of probability.

It is further evident from the table that NEO_C (Conscientiousness) also correlates negatively. Correlation of NEO_C with CMI_Phy $r=-.124$ and with CMI_Emo $r = -.073$ while NEO_C shows correlation with total on CMI $r=-.103$. Here also though the correlation is negative but not significant at .05 and .01 level of probability.

Finally, the correlation of NEO_TOTAL with CMI_Phy $r=.094$ and with CMI_Emo $r=.040$ and with total on CMI $r=.073$. Though the correlations are positive but they are not significant at .05 and .01 level of probability.

Table. 3 showing correlations between dimensions of personality (predictor variable) and dimensions of quality of life (criterion variable)

| | | QOL_IM | QOL_SA | QOL_TOTAL |
|-----------|-------------|--------|--------|-----------|
| NEO_N | Correlation | -.016 | -.029 | -.025 |
| NEO_E | Correlation | -.017 | -.074 | -.054 |
| NEO_O | Correlation | .049 | .030 | .040 |
| NEO_A | Correlation | .118 | .083 | .103 |
| NEO_C | Correlation | .079 | .036 | .056 |
| NEO_Total | Correlation | .091 | .015 | .049 |

Personality dimensions do not correlate with health (Emotional & Physical). It is evident that though all the co-relations are positive but no one reaches significant at .01 and .01 level of probability. Similarly personality dimension and quality of life of working women do not contribute significant as table showing that the correlation between both two slightly negative with co-relation of NEO_N with total on Quality of life is $r=-.025$. Similarly NEO_E correlates slightly negative with quality of life $r= .017$. Rest of the dimension correlates positively but fail to reach the significant level of .01 and .05 level of probability.

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