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STRESS EXPERIENCED AND ROLE FULFILMENT BY CAREER
WOMEN IN DUAL CAREER FAMILIES



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SUMMARY SHEET OF
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SUMMARY SHEET



The concept of dual career families is a fast increasing phenomenon in India since a couple of decades. The pursuit of higher education by women, increases in equal employment opportunities and the tendency of professional women to marry professional men have each contributed to the increased prevalence of dual career couples and families. Their presence is felt more in the contemporary society. Women who aspire for both career and marriage may face incompatibility of demands between career and familial roles. High demands from one of these roles will limit capacities and capabilities of career women in dual career families to meet the demands of the other role. When the demands put up by various roles exceed their capacities, career women in dual career families experience stress. The roles they are expected to perform generate stressors. In India, not much attention has been focussed on learning how stress arises in the first place. To achieve a reliable understanding of how impact of stressful conditions is mediated, it is necessary to identify and understand how they originate, how stress can be expressed and reflected in the functioning, feelings and behaviour of people. The circumstances of roles with which people have to contend in their daily lives are highly productive of stressors. For women in dual career families both the employment and the family organisation can be sources of stressors. Stressors generate stress. The stress experienced influence their role fulfilment in employment as well as in family organisation and vice versa.

The specific objectives drawn for the present investigation were

1. To measure the extent of stress experienced by career women in dual career families
2. To assess the perceived levels of career and familial role fulfilment by career women in dual career families
3. To develop scales that would appropriately measure
 - 1 Stressors from (a) employment and (b) family organisations

2. Stress coping strategies that would be adopted by selected sample to deal with stress producing situations in (a) employment and (b) family organisations.
3. Social support that would be extended by (a) employment and (b) family organisations
4. To find out the interrelationship that exists between the dependent variables, viz. (i) extent of stress experienced, and (ii) perceived levels of career and familial role fulfilment and selected independent variables

The extent of stress experienced by career women in dual career families was measured in terms of neurotic symptoms. PGI-Health Questionnaire N-2 developed by Wig and Verma (1978) was used in the present investigation to measure the extent of stress experienced. Perceived levels of career and familial role fulfilment were measured in terms of perception regarding the level of present goal achievement associated with the roles assumed in respective organisations. A self anchoring scale, commonly known as Cantril ladder of life was used to measure the perceived levels of career and familial role fulfilment. To measure the independent variables, employment organisation stressors scale, family organisation stressors scale, employment organisation stress coping strategies scale, family organisation stress coping strategies scale, employment organisation social support scale, family organisation social support scale were developed

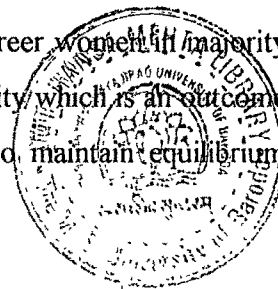
All the instruments developed were validated prior to their use in the pilot study. After the pilot study the reliability of these instruments were established. All the scales had commendable degree of reliability. Items in the scales were finalised after item analysis. The population of the current study formed women who assumed dual roles of home making and career in dual career families, having at least one child and a minimum of three years of experience in the chosen career. The sample comprised of 541 career women in dual career families. Questionnaire method was adopted to gather relevant data.

The age of the career women ranged from 21 to 58 years with a mean age of 39.6 years. The mean personal income of the sample was Rs 9875 per month. CW in DCFs studied spent major portion of their time in a day on their paid work and least amount of time on their personal care. Career women on an average were working for 17 hours daily. The ratio between work and rest and sleep, leisure and personal care was 17.7. More than half of the CW in DCFs under the investigation belonged to nuclear family system. Families with 3 to 5 members together formed 83 per cent of the sample. The mean family size was found to be 4.3. About Rs. 19,216 was the mean family income per month. The mean age of the youngest and oldest family member was 10.9 years and 54.1 years respectively. A little less than half of the career women under study had no school going children in their families.

The largest proportion of CW in DCFs of the study were officers in government establishments, whereas a relatively small proportion of them were in the position of senior technical officers in the industry. More or less equal proportion of them were found pursuing their career as teaching faculty in institutes of higher education, scientists in national research organisations, and as officers in banking institutions. The length of service of CW in DCFs of the study ranged from 3 to 34 years, with a mean of 17 years.

Career women in dual career families assuming dual roles of career and homemaking in life were faced with demands on their limited time and energy emanated. These demands from multiple responsibilities were associated with each of the major roles. In addition, the organisations, viz., employment and family, of which they were an integral part became sources of stressors for them. To cope with stressful situations that arose in day to day efforts of dual role execution, they resorted to either escape or control mode of strategy with the predominance of the latter over the former mode in relation to managing stressors in both the domains. The amount of social support facilitated them to carry on dual responsibilities. When pressures from dual roles exceeded career women's threshold levels, they experienced stress. By and large, career women managed their dual roles without being pushed to the point of exhibiting neurotic symptoms though they

experienced stress. Moreover, professionally qualified married career women in majority shouldered dual roles without being subjected to emotional instability which is an outcome of role stress. In other words, by and large, they were able to maintain equilibrium between their career and familial roles.



Career women in dual career families exhibited differential levels of stress. Career women seemed to be subjected to more stress as they advanced in their age. Older career women experienced greater EOSE than their younger counterparts. EOSE and personal income of the respondents were independent of each other. Though there was no definite direct relationship between EOSE and length of service, career women with long period of service experienced relatively greater EOSE than career women with short and moderate periods of service. Extent of involvement in household work by the respondents was found having no influence on their EOSE.

Similarly, coping strategies followed to deal with stressful situations either in EO or FO respectively had no significant influence on EOSE. Moreover, PLCRF and PLFRF had shown no impact on EOSE. Career women in medium size families experienced relatively greater EOSE than their counterparts in small and large families. Family income, age of the youngest and the oldest family member and number of children in school education had no impact on career women's EOSE. As work stressors, role stressor perception in EO increased EOSE too increased whereas stressors perception due to personal development, interpersonal relations, and organisation climate in EO had no impact on career women's EOSE. On the other hand, career women who perceived relatively more overall stressors in EO experienced relatively greater EOS. In other words an increase in EOOSP was accompanied with an increase in EOSE by CW in DCFs.

Career women who perceived relatively more stressors from their work in FO (FOWSP) experienced relatively greater extent of stress. FOWSP was directly proportional to EOSE. Similarly FORSP, FOPDSP, FOIRSP, FOCSP and FOOSP showed definite direct relationship with EOSE. In other words, career women who

perceived more role stressors, personal development stressors, interpersonal relations stressors, organisation climate stressors and overall stressors in FO experienced relatively greater EOSE. Thus, stressors perception in FO had an impact on EOSE irrespective of their source. Whereas as work, role and overall stressors in EO had an influence on EOSE. More sources of stressors in FO rather than in EO were contributory towards CW's EOSE.

Social support in EO had no influence on career women's EOSE where as social support in FO had an inverse relation with EOSE. Career women who perceived that they would get relatively more social support from FO showed relatively low EOSE. A hierarchial order in the factors studied in relation to their influence on career women's EOSE was found to exist. Social support from FO, FORSP, FOSCS, length of service, EOWSP, EOOSP, FOWSP emerged out as the major predictors of EOSE.

Career women held distinctive goals pertaining to their career and familial domains. They worked towards reaching their goals. The attainment of goals in part or in total at a given point of time culminated in their role fulfilment. By and large, career women exhibited moderate levels of role fulfilment in relation to both the major roles of presumably equal significance in their lives. They maintained their dual roles complementing each other and at equilibrium in majority of the cases.

Old career women perceived the highest level of CRF and FRF than those in young or middle age groups. Career women's PLCRF and PLFRF each had no relationship with their personal income. There existed a definite direct relationship between length of service and PLCRF and PLFRF respectively. Career women with long years of service perceived relatively higher levels of CRF and FRF than their counterparts with relatively less number of years of service. The extent of involvement in household work by career women showed no impact on their PLCRF and PLFRF respectively. Career women who displayed the tendency to resort to control mode of coping to a greater extent perceived higher levels of CRF and FRF respectively than those who

exhibited lower tendency to use control mode of coping. Mode of coping adopted by career women in dual career families in FO had no influence on their PLCRF, whereas the same had an influence on their PLFRF. Career women who showed a greater tendency towards control mode of coping in dealing with stressful situations in FO perceived relatively higher level of PLFRF. EOSE experienced by career women had no impact on PLCRF and PLFRF respectively

Career women who perceived relatively higher levels of PLCRF perceived higher levels of PLFRF as well and vice versa. Size of the family had no influence on career women's PLCRF and PLFRF respectively. Career women's family income had an influence on PLCRF but not on PLFRF. Those with relatively more family income perceived relatively higher level of CRF. With an increase in the age of the youngest family member, career women's PLCRF and PLFRF respectively recorded an increase. Career women who had the youngest family member above 18 years of age perceived higher levels of CRF and FRF respectively than those who had the youngest family member in the age groups of 0 to 3 years and 4 to 18 years respectively. Those who had the oldest family member in the age group of 40 to 68 perceived relatively higher levels of CRF and FRF than their counterparts who had the oldest family member in the age group of 23 to 39 or above 69 years.

Career women's PLCRF and PLFRF had an inverse relationship with their EOWSP. Career women who perceived relatively more work stressors in EO perceived lower levels of CRF and FRF respectively and vice versa. Similarly, an inverse relationship existed between EORSP and PLCRF and PLFRF respectively. Career women who perceived relatively more role stressors in EO perceived relatively lower levels of CRF and FRF respectively and vice versa. In a similar manner, EOPDSP too revealed an inverse relationship with PLCRF and PLFRF respectively. As career women's EOPDSP increased, their CRF and FRF respectively declined and vice versa. Interpersonal relations stressors in EO influenced PLCRF though it had no effect on PLFRF. Career women who perceived relatively more EOIRS, perceived relatively lower

levels of CRF and vice versa. Career women's PLCRF and PLFRF each decreased with an increase in their EOCSP. A lower level of EOCSP of career women was accompanied by higher levels of CRF and FRF respectively. Career women's PLCRF and PLFRF respectively were inversely related to their EOOSP. Respondents who perceived relatively more overall stressors in EO perceived lower levels of CRF and FRF respectively and vice versa.

Career women who perceived relatively more work stressors in FO perceived lower levels of CRF and FRF respectively and vice versa. Career women who perceived relatively more role stressors in FO perceived relatively lower levels of CRF and FRF respectively. Similarly, FOPDSP, FOIRSP, FOCSP and FOOSP each increased, both PLCRF and PLFRF respectively decreased. All the stressors in FO irrespective of their source had an adverse impact on both PLCRF and PLFRF respectively. Career women who perceived more stressors from any one source of stressors or overall stressors in FO perceived relatively lower PLCRF and PLFRF respectively. Stressors in FO thus had a direct adverse impact on role fulfilment of career women in EO as well as FO.

Though SSEO had an impact on PLCRF, it had none on PLFRF. Higher extent of social support in EO facilitated higher level of PLCRF. Similarly, SSFO had no impact on PLCRF though it exerted an influence on PLFRF. Higher extent of social support in FO helped career women to perceive higher level of FRF but not CRF.

A hierarchical order in the factors studied in relation to their influence on PLCRF and PLFRF respectively was found to exist. PLFRF, length of service, EOOSP and FOWSP emerged as the major predictors of PLCRF, while PLCRF, age of the youngest member in the family, FOOSP and EOCSP were seen to be the major predictors of PLFRF.

Summing up, it could be said that the career women who perceived higher career role fulfilment, perceived higher familial role fulfilment too and vice versa. The findings of the investigation revealed how stress arose, what kind of stressors were perceived by

career women in dual career families in both the organisations, what was the impact of these stressors on their health and role fulfilment. These findings can be seen in relation to its implication for managing stress and its reflection in role fulfilment in two domains. These findings can be of use in chalking out action programmes to orient employment and family organisations to create an environment to facilitate career women to function efficiently, and career women to build up capabilities, and potentials to cope with multiple responsibilities. Moreover, these findings can also be used as guidelines to plan strategies and policies at the national, state or organisation level for enhancing participation of educated women in dual roles related to career and home making at minimal stress and maximal role fulfilment

