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Work Status Differences Related to Personality Traits and Psychological Health among Professional Women

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This study was conducted to identify the relationship among job status, personality traits, and psychological health of professional women in Pakistan. A sample of (N = 240) professional women of age range of 22-60 years was selected from banks, hospitals, and telecom-sector. Three job status groups including executive group, managerial group, and junior executive group were established. NEO-Five Factor Inventory (Costa & McCrae, 1992) and General Health Questionnaire-28 (Goldberg & Hillier, 1979) were used as measuring tools. Results revealed that neuroticism and agreeableness had significant positive relationship with anxiety and depression. Differences among job status groups indicated that junior executive worker women scored high on neuroticism, anxiety, and depression as compared to managers and executives. It is concluded that women holding lower status were facing difficulty in determining job and life balance and women having predisposition of neuroticism displayed poor health. Furthermore, executive women scored high on agreeableness; their status and support at work place helped them to be compassionate and cooperative.

Keywords. Work status, personality traits, psychological health, professional women

Substantial research has reported relationship between personality traits and health issues. Researchers are more interested in

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investigating professional women's vulnerability to psychological health problems due to their entry in work force and dual responsibilities (Dudhatra & Jogsan, 2012; Klainin & Arthur, 2009). It is documented that women constantly complain psychologically ill health; they encountered higher number of chronic sickness and added chronic conditions; therefore, made additional visits for health care. Women are the larger user of medical facilities and prescription; therefore, experienced extra psychological problems (Jenkins, 1991). To evaluate the relation between psychological health and job, the Samothrace Program was started in 2006 by the French Institute for Health Surveillance. Results indicated high levels of psychological distress among workers, mainly among women**.** More precisely, women documented elevated scores in context of anxiety and depression related problems than men (Birknerova, 2011; Nicot, 2010).

Numerous researches on health and personality indicated that personality traits appear to contribute an influential function in development of psychological distress. Personalities that are more negative, are the ones traditionally associated with distress, while more outgoing and positive personalities, generally, experience positive psychological health (Duggan, Sham, Lee, Minne, & Murray 1995; Vollrath & Torgersen, 2008). Most of the research that studied relationship between distress and personality had centered on the Big Five personality traits (Duggan et al., 1995; Vollrath & Torgersen, 2008). According to Costa and McCrae (1984), extraversion and neuroticism can explain the significant variance for well-being. Neuroticism is similar to the negative influence that guides an individual to emphasize the negative aspects of their experience. Extraversion is a personality trait that influences individuals to experience the positive emotional conditions and feel good about them and related to the world surrounding them; in contrast, it is shown to be connected to good physical condition (Noor, 1996).

During previous decade, the large research examined relationship between stresses, health, and personality traits. Williams, Wasserman, and Lotto (2003) provided confirmation that personality differences in self-assessed health are reflected in schematic processing of health relevant information. It is also suggested that positive emotions might provide a protective function in growth of disease. As reported by Noor (1996), neuroticism is similar to the negative influence that guides an individual to emphasize the negative aspect of their experience. Extraversion is a personality trait that influences individuals to experience the positive emotional conditions, feeling good about them, and the surrounding world around them; in contrast,

it is shown to be connected to good physical condition (McCrea & Costa, 2007).

Different researchers examined associations between Big Five traits and psychological health; negative association between agreeableness and psychological distress in both genders is identified (Carr, Gareis, & Barnett, 2003). Neuroticism and conscientiousness emerged as the most important traits predicting associations/ engagements (Rantanen, Pulkkinen, & Kinnunen, 2005). Extraversion was positively linked to well-being, whereas neuroticism was negatively linked to psychological well-being (Dijkstra & Barelds, 2009). In perspective of the Big Five dimensions, a number of studies found out extraversion and agreeableness as the magnitude with the maximum projecting capability for positive influence, while, neuroticism being the most significant forecaster of negative impacts (Mroczek & Almeida, 2004, Robinson, Meier, & Solberg, 2005). Neuroticism is linked with broad variety of poorer health outcomes and is connected in psychosomatic disorders. This could reflect the high neurotic person's tendency to be distress prone, either physically or mentally (Mathews, Deary, & Whiteman, 2003). While, McCrae and Costa (1997) recommended that agreeableness and conscientiousness would enhance the chances of positive experience and straightly linked to subjective well-being. Alternatively, openness to experience should guide the individual to practice both more positive emotional conditions and additional negative ones.

Recent change in society compelled more women to join work force and a large number of women have joined economic fields. Women are holding different positions at their work organizations that is, as executive, managers, and junior executive workers. Researches indicated that the work status of women may be a source of stress for them **(**Kenny & Bhattacharjee, 2000). Even those women, who are associated with traditional feminine professions like secretarial and service personnel, performing in more demanding and less authoritative positions, complain more health problems, as a result work status of women may be a source of their bad health (Thomas, 1997). On the other hand, Walter (1993) reported that the destructive characteristics of personality may support the women's immune system to generate health problem **(**Kenny & Bhattacharjee, 2000). Further, evidence also suggests that personality traits and psychological health status may be varying among women due to their different work statuses (Judge, Hiller, & Mount, 2002). For numerous years, researchers and practitioners, used personality to forecast and explain various job related results. For instance, job execution and job contentment are revealed to be linked to personality (Barrick &

Mount, 1991; Judge et al., 2002). Theorists share the opinion that traits are basic elements of personality, representing wide dispositions to respond in specific ways (Pervin & John, 2001).

Researchers repeatedly observed that heavier responsibilities and job planning has been difficult for women holding higher posts. In addition, women working in the middle rank, like a workplace head or a chief clerk, have faced severe troubles and conflicts (Pervin & John, 2001). Additionally, evaluation of indicators of psychological stress showed that the inclination of workers to hold high work ethics is dependent on the level of their job status (Araki, Muto, & Asakura, 1999). Alternatively, higher status workers, in spite of nonsignificant similarity in their authority are susceptible for more depression in comparison, to other statuses (Judge et al., 2002).

Studies also advocate that work status influence health status, corporative executives in a large number seem exhausted (Basu & Sidh, 2008). A large number of business executives face difficulty in obtaining the required job-life balance. According to Araki et al. (1999), the exhausting pace and odd life-style leads to bad health. The managerial women encounter enormous tensions and isolation at work. Researchers identified significant connection between job status and psychological health due to the burden of their dual responsibilities; the symptoms range from minor headache, insomnia, to severe psychosomatic problems (Basu & Sidh, 2008; Sinha, 1997).

To summarize, relevant literature provides argument that personality traits and health problems are associated to each other. Positive personality traits lead to good psychological health; whereas, negative personality traits are associated with poor health. Studies on working women report frequent complains of their poor health related problems. Furthermore, job execution and job contentment are revealed to be linked to personality and health outcome. In numerous studies, women's work statuses emerged as significant indicators of women's personality traits and related health problems that is neuroticism is found to be associated with poor health. There may be a different and unique affect of cultural aspect and personality dispositions. In Pakistan, due to its developing society, working women, as a consequence, are facing complex conditions.

Based on the literature review, this study is aimed to investigate the relationship between personality trait and psychological health and to identify differences regarding work statuses of professional women in Pakistan. The following hypotheses were phrased:

Hypotheses

1. Neuroticism is negatively associated with psychological health of working women.
2. Agreeableness and conscientiousness would have positive relationship with psychological health of working women.
3. Junior executive women would reflect more neuroticism as compared to female managers and executives.
4. Female executives would indicate higher agreeableness as compared to female managers and female workers.
5. Female executives would have more anxiety and depression as compare to female managers and female junior executives.

Method

Participants

A sample of 240 professional women was selected from hospitals (n = 80), banks (n = 70), and telecommunication companies (n = 90). Purposive sampling technique was used. Age range of participants was 22-60 years with mean of 35.11 years. Three job status groups: (a) Executive group, (b) managerial group, and (c) junior executive group were established to identify the differences regarding personality traits and psychological health. The hierarchy in groups composed, are assumed to have executives at top level, managers at mid level, and executive workers as junior level (see Table 1).

Table 1

Demographic Characteristics of Working Women (N=240)

Variables	*f*	*%*	*M*	*SD*
Age (years)	-	-	35.11	9.41
Working hours	-	-	7.86	1.47
Salary (PKR)	-	-	24982.86	16175
Work experience (years)	-	-	9.29	8.02
Workplace				
Hospitals	80	33.33	-	-
Banks	70	25.00	-	-
Telecom	90	37.50	-	-
Nature of job				
Executive	41	17.08	-	-
Managers	99	41.25	-	-
Junior Executive Worker	100	41.67	-	-

Instruments

NEO-Five Factor Inventory (NEO-FFI). To assess personality traits, NEO-FFI (Costa & McCrae, 1992) was used. This scale measures the responses on five dimensions of personality that is Extraversion, Agreeableness, Conscientiousness, Neuroticism, and Openness to Experience. The responses are given on 5-point Likert scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). Internal consistencies for the individual facet scales ranged from .56 to .81 in self-report. Alpha coefficients acquired in the present study were .65, .71, .74, .77, and .72 for extraversion, agreeableness, neuroticism, conscientiousness, and openness to experience; respectively.

General Health Questionnaire-28 (GHQ-28). It (Goldberg & Hiller, 1979) was used to assess the general health of participants. The responses were scored on a 4-point Likert scale of severity 0, 1, 2, and 3 system described by the author. The GHQ-28 provides four subscales consisting of Somaticism, Anxiety, Social Dysfunctioning, and Depression. Reliability coefficients ranged from .78 to .95 in various studies (Goldberg & Hiller, 1979). Alphas acquired in this study were .85, .88, .81, and .76 for Somaticism, Anxiety, Social Dysfunctioning, and Depression; respectively.

Demographic Information Form. In order to gather the demographic characteristics of the participants the demographic information form was prepared by the researcher. Age, marital status (unmarried, married, separated/divorced, widow), education, job status, work experience, and salary was included in the demographic information form.

Procedure

Permission for using scales was taken from the authors. The questionnaire consisted of a covering page to explain the objectives and guideline for completing the scales. Participants were approached at their work places after getting permission from the heads of organizations. They were briefed about the study and an informed consent was taken from each of them. They were granted the confidentiality and were assured that their information would be used only for research purpose.

Results

Data were examined for accuracy of input, outliers, and missing values. Normality of the data and conditions for analysis were

checked visually with histograms and statistically with kurtosis-skewness test for normality. Histogram showed score distributed normally on all scales. To attain the objectives of this research analyses were carried out on a sample of 240 participants.

Correlation analysis was carried out to identify the relationship among personality traits, psychological health, and work statuses. Multiple Analyses of Variance was applied to assess differences among job statuses (executive, managerial, and junior executive workers) regarding personality traits and psychological health of professional women.

Table 2 showed that somaticism has significant positive relation with neuroticism, agreeableness, and significant negative association with extraversion. There is nonsignificant relationship between somaticism, openness, and conscientiousness. Anxiety has significant negative relationship with neuroticism, extraversion, and conscientiousness. Anxiety has nonsignificant relationship with openness and agreeableness. Social dysfunction has significant positive association with neuroticism and agreeableness.

Table 2

Correlation Matrix among Study Variables (N=240)

Variables	1	2	3	4	5	6	7	8	9
1.Neuroticism	-								
2. Extraversion	-.26**	-							
3. Openness	.07	.25**	-						
4. Agreeableness	.23**	-.17**	.13**	-					
5.Conscientiousness	.26**	.21**	-.03	.23**	-				
6. Somaticim	.30**	-.12*	.06	.19**	.01	-			
7. Anxiety	.40**	-.17*	-.04	.03	-.13*	.65**	-		
8.Social Dysfunction	.33*	-.20**	.05	.06	-.25**	.55**	.59**	-	
9. Depression	.40**	-.17*	-.00	-.15*	-.28**	.33**	.45**	.51**	-

*p < .05. **p < .01.

Table 2 further shows significant negative correlation between social dysfunction and extraversion and conscientiousness. Social dysfunction has nonsignificant relationship with openness and agreeableness. Depression has significant positive relation with neuroticism. Depression has significant negative association with extraversion, agreeableness, and conscientiousness; however, nonsignificant relationship exists between depression and openness.

Table 3

Group Differences on Job Status in Relation to Personality and Psychological Health (N=240)

Variables	*SS*	*MS*	*F*(238)	*p*
Neuroticism	338.75	169.37	4.02	.01
Agreeableness	231.47	115.74	4.40	.01
Anxiety	39.45	19.72	4.70	.01
Depression	38.13	19.06	7.50	.00

The results of one way analysis of variance reveal that there are significant differences on neuroticism; agreeableness anxiety, and depression. Posthoc analysis reveals that executive worker women score high on neuroticism, anxiety, and depression as compared to managers and executives. Furthermore, executive worker women score high on agreeableness as compared to managers and workers.

A multiple linear regression was computed to predict health based on neuroticism, agreeableness, and job status (executive).

Table 4

Regression Analysis for Personality Traits (Neuroticism and Agreeableness) and Work Status as Predictors of Psychological Health

Variables	*B*	*SEM*	*β*	R^2
Neuroticism	.41	.05	-.43***	.35
Agreeableness	1.82	.06	.15**	
Anxiety	.18	1.25	-.21**	

**$p < .01$. ***$p < .001$.

A significant regression equation is found F (4, 236) = 39.84, $p <$ .000, with of R^2 = .35. Results shows personality traits including neuroticism and agreeableness emerged as significant predictors of poor psychological health; whereas, executive work status emerge as a predictor of good psychological health.

Discussion

The contemporary research has been drastically shifting its focus on specific personality traits and their relationship with general health. Many studies reported that personality traits, such as neuroticism, are

more negative and are traditionally associated with the negative outcome of well-being, while extraversion is, generally, related with positive psychological health (Duggan, Sham, Lee, Minne, & Murray, 1995; Vollrath & Torgesen, 2000). In present study, positive personality traits (extraversion and conscientiousness) showed significant negative correlation with social dysfunction. These results are consistent with previous research (Friedman et al., 1993). Somaticism was not found to be related to openness and conscientiousness (McCrae & Costa, 1997). Extraversion, agreeableness, and conscientiousness were the predictors determining well-being of working women. Previous research indicated that women possessing physically robust traits were capable of handling stressors more efficiently and faced lesser health troubles (Sinha, 1997). In a previous study on women's well-being and personality traits, Noor (1996) investigated the association and concluded that neuroticism and extraversion consisted of the biggest proportion of explained variance related to demographic and role-related variables. Neuroticism is same as pessimistic affectivity that directs people to emphasize the negative aspect of their experience (Mroczek & Almeida, 2004).

In the current study, it was observed that junior executive work status emerged as a significant risk factor for neuroticism, anxiety, and depression in comparison to managers and executives. These results are similar with the previous findings of Thomas (1997) who asserted that women associated with traditional feminine professions like secretarial and service personnel, performing in more demanding and less authoritative positions, complain higher health problems. Executive women scored high on agreeableness and these results are in line with other studies (Sinha, 1997; Walters, 1993). Agreeableness reflects characteristics as support, responsiveness, and confidence, which lead to leadership skills. These characteristics may help women perform their job more effectively. Therefore, by conducting research, organizations may be able to conclude an individual's possible relationship between health and personality traits and its effects on performance.

Regression analysis revealed that work status (executive) and personality traits (neuroticism and agreeableness) are significant predictors of working women's psychological health. The results support the existing evidence that divorce related to marital status is one of the predictor of women's mental health (Robinson et al., 2005). Working status as executives was the significant predictor of general health. Results related to organizational roles are associated with overload, excessive demands, and many responsibilities that lead to a

high risk of adverse health outcomes (Sinha, 1997; Thomas 1997; Walters, 1993). Neuroticism explained significant variance in all health outcomes (Thomas, 1997). Agreeableness emerged as another predicting variable of working women's health. These results are supported by the existing evidence that examined and reported an association between agreeableness and psychological distress (Carr et al., 2003). Furthermore, agreeableness emerged as projecting capability for positive influence, while neuroticism as the most significant forecaster of negative impacts (Mroczek & Almeida, 2004; Robinson et al., 2005).

Implications and Suggestions

The implications of the study shed light on the significance of the personality traits and work statuses contributing to working women's general health. Thus, the study provides greater understanding into personality traits, general health, and demographic variables of Pakistani working women. There is need to create awareness in society that multiple roles may develop conflict among working women's life and can negatively effect their general health. Psychoeducation can also help as a supporting factor for working women, providing better knowledge of interactions between negative personality traits and negative health outcomes. This might be helpful for the choice of more effective interventions. Family counseling, by creating awareness among family members, can become a supporting factor for working women in managing effectively their responsibilities as home-maker and worker.

Conclusion

The results of the present study are useful in conceptualization and quantification of psychological health related quality of life of Pakistani working women. The work status emerged as an important factor that affects the general health of professional women and neuroticism (personality trait) contributes to an important role in developing anxiety and depression. Junior executive worker women have more negative personality that may contribute to their anxiety, and depression as compared to managers and executives. Furthermore, executive women scored higher on agreeableness that may enhance the chances of positive experience and straightly linked to subjective well-being. This research, therefore, provides an awareness forum to study the work status related problems of Pakistani professional women.

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