

Role Conflict and Coping Behaviour of Married Working Women

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ABSTRAK

Penyelidikan ini mengkaji konflik di antara peranan kerja dan keluarga bagi wanita yang telah berkahwin, serta strategi pengurusan konflik tersebut. Data dari 82 wanita profesional dari enam institut penyelidikan menunjukkan wanita-wanita ini mengalami konflik di antara peranan kerja dan keluarga dengan intensiti yang berbeza, dalam usaha untuk memenuhi tuntutan setiap peranan. Mereka mengurangkan konflik dengan mengguna strategi reaktif serta mengubah sikap dan persepsi diri terhadap tuntutan peranan. Kedua-dua strategi ini lebih selalu digunakan berbanding dengan strategi pendefinisian semula peranan secara struktur yang melibatkan pengubahan harapan ahli-ahli dalam set peranan seperti ahli keluarga, rakan-rakan dan ketua di tempat kerja, dan masyarakat. Implikasi hasil kajian terhadap wanita yang berkerja serta cadangan penyelidikan selanjutnya dibincangkan.

ABSTRACT

This study examined the conflict that married women experienced between work and family roles, and analysed the coping behaviour. Data from 82 professional women from six research institutes revealed that married women experienced work-family conflict with varying intensities in trying to meet the expectations of work and family roles. In managing the work-family conflict, the women tended to cope through reactive role behaviour, and personal role redefinition by changing their own attitudes and perceptions of role expectations. These two strategies were more frequently adopted than structural role redefinition, which entails changing the expectation of members in the role set such as family members, colleagues and leaders at the work place, and society. Implications of these findings for working women and suggestions for further research are discussed.

INTRODUCTION

Married working women are faced with problems in performing different roles, such as the wife, mother, homemaker and employee roles. The major role problem a woman faces is the conflict arising from multiple roles. According to Katz and Khan (1978), the fact that multiple roles operate at the same time should lead to greater role conflict. The expectations surrounding any of these roles can generate interrole conflict when they involve pressures to dominate the time of the focal person and interfere with fulfilling the expectations associated with the other roles.

Time utilisation studies have shown that married women spend substantial amounts of their time performing multiple roles (Hing 1984; Airmy *et al.* 1991; Aminah and Narimah 1992;

Van Der Lippe *et al.* 1992). Also, the role theory postulates that multiple roles can lead to interrole conflict and, in turn to symptoms of strain (Katz and Khan 1978).

Women in multiple role situations hence need to reduce the amount of conflict they experience by using coping strategies. Many researchers have studied role conflict (Holahan and Gilbert 1979; Pleck *et al.* 1980; Beutell & Greenhaus 1983; Koppelman *et al.* 1983; Cook and Rousseau 1984; Good *et al.* 1990; Duxbury and Higgins, 1991; Gutek *et al.* 1991; Higgins and Duxbury 1992), and coping behaviour (Hall 1972; Beutell and Greenhaus 1983; Gray 1983; Alpert and Cubertson 1987; Long 1989; Skinner and McCubbin 1991), especially focusing on women in Western cultures.

In Malaysia, with the increase in the percentage of women entering the work force, from 36.3% in 1970 to 46.8% in 1990 (Siti Rohani 1993), and their attachment to employment becoming much more permanent, it is pertinent that the diversified role expectations and coping strategies undertaken by women be explored empirically. A study of role conflict among married working women in Malaysia by Fatimah (1985) suggested the need for further studies on work-family conflict and coping behaviour of married working women.

Work-family conflict, as defined by Kahn *et al.* (1964), is a form of interrole conflict in which the role pressures from the work and family domains are mutually incompatible in some respects. Each role within the family and work environment imposes demands requiring time, energy and commitment.

Hall (1972) has identified three types of coping behaviour for dealing with interrole conflict. The three types of coping behaviour were logically derived from three role components by Levinson (1959)—structurally imposed demands, personal role conception and role behaviour. Type I coping (structural role redefinition) involves an active attempt to deal directly with role senders and lessen the conflict by mutual agreement on a new set of expectations. One way of changing structural demands would be to relocate and share one's role tasks (cleaning, washing, and child care, for example).

Type II coping (personal role redefinition) involves changing one's personal concept of role demands received from others. It entails changing the expectations themselves. An example is setting priorities among and within roles, being sure that certain demands are always met (for example, the needs of sick children), while others have lower priority (such as dusting furniture).

Type III coping (reactive role behaviour) entails attempting to improve the quality of role performance with no attempt to change the structural or personal definition of one's roles. Implicit in coping through role behaviour is the assumption that one's role demands are unchangeable and that the person's main task is to find ways to meet them; this coping strategy involves a passive or reactive orientation toward one's roles.

Recognising that the demands of multiple roles result in role conflict and, in turn, strain, and the need to adopt certain coping strategies to manage the conflict, this study investigated the intensity of work-family conflict experienced by married working women and analysed their coping behaviour using Hall's (1972) model of coping with role conflict.

METHOD

Subjects and Procedure

Subjects in this study were women who (a) were married and living with their husbands; (b) had at least one child; and (c) were full-time researchers by occupation or officers responsible for research and are employed in research institutions. These criteria were established to ensure that the women in the sample had quite similar responsibilities in performing family and work roles. One hundred and sixty-five professional women meeting these criteria from six selected research institutions were mailed questionnaires to complete and return envelopes. Of the 165 mailed questionnaires 82 were returned within a period of nine weeks.

The women in the sample averaged 38.8 years of age ($SD = 5.50$). There was an average of 2.9 ($SD = 1.46$) children in the family and an average of 2.7 ($SD = 1.38$) children living at home. Seventy-nine of the women were researchers by occupation while three were medical officers who were also engaged in research work. The majority of the women had Master's (59.3%) and Ph.D. and M.D./M.B.B.S (24.7%) degrees; only 16.0% of them had Bachelor's degree. They earned an average gross income of RM3241.00 per month. Those who had children below four years old constituted 46.4%. Fifty seven percent of the women reported that they had domestic helpers. Among those who had domestic helpers, a majority (85.1%) had full-time helpers. Women who sent their children to child-care centres constituted 24.1%.

Instruments

Conflict intensity was measured using the interrole conflict scale by Pleck *et al.* 1980. This scale consists of eight items based on the three most prevalent aspects of work-family conflict, namely excessive work time, schedule conflicts, and fatigue or irritability. The response options

for the questions or items were five-point scales ranging from strongly disagree (1) to strongly agree (5). The reliability coefficient (alpha) for this work-family conflict scale was 0.90.

Coping was assessed using an adapted version of role-coping inventory by Hall and Hall (1979). This inventory has 22 coping strategies or items for three types of coping—structural role redefinition (Type I), personal role redefinition (Type II) and reactive role behaviour (Type III). The response options for the items were five-point scales ranging from never (1) to nearly all the time (5). One of the items for Type II coping was deleted since it was inappropriate to the subjects based on content validation. The item deleted was “Eliminate certain roles (e.g., deciding to stop working)”. Another item was deleted from the Type III coping scale because of lack of variance and low item-total correlation based on the reliability test via internal consistency. The item deleted was “Do not attempt to cope with role demands and conflicts. Let role conflicts take care of themselves”. The inventory for this present study consisted of 20 items, 12 items for Type I, six items for Type II and two items for Type III coping. The reliability coefficient (alpha) for Type I coping scale was 0.69, Type II 0.77 and Type III 0.78.

TABLE 1
Distribution of respondents by work-family conflict intensity

Conflict Intensity	Frequency	%
High (>3.1)	22	28
Medium (2.3 - 3.1)	32	40
Low (<2.3)	25	32

RESULTS

Thirty-two (40%) of the 79 women who responded to the questions on role conflict reported medium intensity of conflict. Twenty-two (28%) reported high intensity of conflict while 25 (32%) reported low intensity of conflict (Table 1). The mean for work-family conflict on a five-point scale was 2.7 (SD = 0.72).

Table 2 presents the means and standard deviations of items measuring work-family conflict. The most highly endorsed item was “After work, I come home too tired to do some of the things I would like to do” (M = 3.31; SD = 0.99). The item that was least endorsed was “My work schedule often conflicts with my family life” (M = 2.4; SD = 1.05).

TABLE 2
Means and standard deviations of items measuring work-family conflict

Items	M	SD
My work schedule often conflicts with my family life	2.4	1.05
After work, I come home too tired to do some of the things I would like to do	3.3	0.99
On the job I have so much work to do that it takes away time for my family interests	2.7	0.82
My family dislikes how often I am preoccupied with my work while I am home	2.6	0.82
Because my work is demanding, at times I am irritable at home	2.8	1.06
The demands of my job make it difficult to be relaxed all the time at home	2.7	1.04
My work takes up time that I would like to spend with my family	2.7	0.95
My job makes it difficult to be the kind of spouse or parent I would like to be	2.8	1.13

To manage the work-family conflict all three types of coping were used by the women. Within the Type I coping (structural role redefinition), the strategies "Get help from someone outside the family (e.g. home maintenance help or child care)" ($M = 3.4$; $SD = 1.39$) was most frequently reported as a means to reduce role conflict (Table 3). The least frequently reported strategy was "Get help from someone at work" ($M = 1.4$; $SD = 0.69$).

Within the Type II coping (personal role redefinition), the women tended to report most frequently the use of the strategy "Establish priorities among your different roles, so that you are sure the most important activities are done" ($M = 4.1$; $SD = 0.74$) (Table 4). The least frequently reported strategy was "Develop self and own interests (e.g. spend time on leisure or self development)" ($M = 3.1$; $SD = 1.04$).

The women reported frequent use of both the strategies for Type III coping (reactive role behaviour) although "Plan, schedule, and

organise carefully" ($M = 4.0$; $SD = 0.85$) was more frequently used than "Work hard to meet all role demands. Devote more time and energy so you can do everything expected of you" ($M = 3.8$; $SD = 0.9$) (Table 5).

In managing the work-family conflict, overall, the Type III coping (reactive role behaviour) with a mean of 3.9 ($SD = 0.78$) was most frequently used by the women whereas the least frequently used strategy was the Type I coping (structural role redefinition) with a mean of 2.5 ($SD = 0.45$) (Table 6). A priori contrasts revealed that there were significant differences in the use of Type I and Type II, as well as Type I and Type III coping (Table 7). Frequency in the use of Type II and Type III coping was also significantly different.

DISCUSSION

Role theory predicts that the expectations surrounding each of the different roles a person performs can generate interrole conflict when

TABLE 3
Means and standard deviations of items measuring type I coping

Items	M	SD
Decide not to do certain activities that conflict with other activities	3.0	0.85
Get help from someone outside the family (e.g. home maintenance help or child care)	3.4	1.39
Get help from a member of the family	2.7	1.13
Get help from someone at work	1.4	0.69
Engage in problem solving with family members to resolve conflicts	2.7	1.15
Engage in problem solving with someone at work	2.0	0.95
Get moral support from a member of the family	3.2	1.05
Get moral support from someone at work	2.3	0.99
Negotiate or plan with someone at work, so their expectations of you are more in line with your own needs or requirements	2.4	1.09
Integrate or combine roles (e.g., combine work and family life in some ways)	2.5	1.18
Attempt to change societal definition of sex roles, work roles, or family roles	2.2	1.13
Negotiate or plan with members of your family, so their expectations of you are more in line with your own needs or requirements	3.2	1.10

TABLE 4
Means and standard deviations of items measuring type II coping

Items	M	SD
Establish priorities among your different roles, so that you are sure the most important activities are done	4.1	0.74
Partition and separate your roles. Devote full attention to each role when you are in it	3.9	1.02
Overlook or relax certain standards for how you do certain activities (let less important things slide a bit sometimes, such as dusting or lawn care)	3.6	0.95
Modify your attitudes toward certain roles or activities (e.g. coming to the conclusion that the quality of time spent with a spouse or children is more important than the quantity of time spent)	3.8	1.00
Rotate attention from one role to another. Handle each role in turn as it comes up	3.6	1.02
Develop self and own interests (e.g. spend time on leisure or self-development)	3.1	1.04

TABLE 5
Means and standard deviations of items measuring type III coping

Items	M	SD
Plan, schedule, and organise carefully	4.0	0.85
Work hard to meet all role demands. Devote more time and energy so you can do everything expected of you	3.8	0.95

TABLE 6
Means and standard deviations of respondents' scores for coping types

Type of Coping	M	SD
Type I Structural Role Redefinition	2.5	0.49
Type II Personal Role Redefinition	3.7	0.59
Type III Reactive Role Behaviour	3.9	0.78

TABLE 7
Values for the difference in the use of coping types

Type of Coping	df	t	p
Type I and Type II	68	-4.44	0.00
Type I and Type III	70	-12.72	0.00
Type II and Type III	77	-2.04	0.02

they involve pressures to dominate the time of the focal person and interfere with fulfilling the expectations associated with the other role (Katz and Kahn 1978). The multiple role expectations can lead to feelings of work overload, that is the feeling that there is too much to do on the job (Katz and Kahn 1978) since each of these roles imposes demands requiring time, energy, and commitment. The fact that women in this study experienced work-family conflict with varying intensities as they performed different roles as a wife, mother, homemaker and employee are supportive of the role theory and findings of studies by Beutell and Greenhaus (1983), Fatimah (1985), Gutek *et al.* (1991) and Higgins and Duxbury (1992).

To manage the conflict arising from the demands of work and family domains, the women in this study adopted most frequently Type III coping (reactive role behaviour). This behaviour involves attempts to meet all the role demands experienced. These strategies probably present considerable strain on the women's energies since they involve attempting to do everything demanded, rather than attempting to reduce demands. Since the assumption is that all role expectations must be met, the women engaged in careful planning, scheduling and organising of their role activities, and working harder to meet all their role demands. Although results of a study by Gray (1983) showed that professional women used Type III coping least often, the study conducted by Skinner and McCubbin (1991) found that one of the coping strategies that women in dual employed families commonly used was maximising efficiency and organisation to meet the demands of work and family roles.

Although Type III coping is thought to be less effective (Hall 1972) and less successful (Beutell and Greenhouse 1983), the attempt to be a "supermother" appears to be a common strategy among married women with relatively more traditional attitudes (Beutell and Greenhaus 1983). Elman and Gilbert (1984) reported that reactive role behaviour, which involved working more efficiently and planning their time more carefully with the idea of trying to fit everything in, was the most highly endorsed coping strategy by the professional women in their study.

The second most frequently adopted coping type was Type III coping (personal role redefinition). Type II coping involves changing

the person's perceptions of his or her role demands rather than attempting to change the environment. In other words, the women in this study tended not to redefine the expectations held by other people and tended not to negotiate a new set of expectations from their role senders as would be the case with Type I coping. Instead, the women tried to change the perceived role by seeing their own behaviour or the external expectations in a different light. By doing so, they attempted to reduce the amount of conflict actually experienced. Specific examples of Type II coping strategies commonly used by the women in this study included establishing priorities, partitioning and separating roles, reducing standards or choosing not to meet certain role demands, changing attitudes toward certain roles and rotating attention from one role to another. Compromising as a way of reducing strain and making the lifestyle manageable is a common behavioural response (Skinner and McCubbin 1991). Domestic overload, for instance, may be managed through compromise by deliberately lowering standards. An individual compromises household standards because of the constraints of time and energy to achieve them (Holmstrom 1973).

Type I coping (structural role redefinition) was the least frequently adopted coping type among the women. It involves redefining the expectations held by other people so that fewer conflicting demands are placed upon the person and a new set of role behaviours is expected from that person by members of the role set. Such coping requires communicating with one's role senders and negotiating a new set of expectations which will be mutually agreed upon. This means changing the received role as opposed to changing the perceived role alone, as would be the case with Type II coping. The lack of help obtained from family members in reducing work loads and resolving conflict suggests that the redistribution of roles within the family to match increased role responsibilities outside the home has not been widely practised.

The less frequent use of Type I coping could, to a certain extent, be due to the notion that Type I coping seems more directly related to long-term conflict reduction and satisfaction than Type II or Type III coping. More convincingly, the literature on sex-role socialisation indicates that the universal culture, through what Bem and Bem (1971) call a

nonconscious ideology, rewards more reactive, less confronting and aggressive coping in women of all ages. A study by Long (1989) found that sex-role socialisation relates to differences in coping and occupational strain among working women. The fact that girls, through early socialisation, are trained to be less venturesome, independent, and aggressive than boys of the same age (Lewis 1972) could also possibly bear some relation with the type of coping women adopt.

CONCLUSION

Married working women experience work-family conflict in trying to meet the expectations of work and family roles. In managing the conflict arising from the expectations of multiple roles, the women tended to cope through reactive role behaviour and personal role redefinition more than structural role redefinition. Hall's (1972) model of coping with role conflict was found to be useful in analysing the coping behaviour of a focal person experiencing work-family role conflict.

One of the implications of the prevalence of work-family conflict among married working women is that women will need assistance in terms of facilities, education, and advisory and support services in trying to cope with the conflict. Extension planners need to consider the problems in managing multiple roles among dual-career families when planning non-formal educational programmes. Family development practitioners should be responsive to dual-career families in need of assistance in managing work-family conflict. A knowledge of various coping strategies and their consequences is essential. Family development educators concerned with effective management of contemporary family stressors are encouraged to include more extensive coverage of the work-family interface in the curriculum.

Acknowledging that married working women experience work-family conflict, it is pertinent that employers and policy makers pay special attention to improve the welfare of employees through improved facilities and support services such as day-care on site, flex-time and 90-day maternity leave, to help them cope with their multiple roles. Besides employers, policy makers, extension planners and family development practitioners and educators, husbands also have a role to play since spousal support is a crucial

variable for the reduction of interrole conflict for working women (Holahan and Gilbert 1979).

It is important that researchers concerned with the problems of married career women avoid seeing the problem of work in isolation from the total life space of women. Another stream of research that warrants continued investigation is that of role conflict experienced by other groups of working women and their coping behaviour, and how organisations can facilitate the development of individual coping strategies through human resource development programmes. Further research concerning work-family conflict needs to address the manipulation of organisational policies to reduce the strain produced by dual roles of the home and work environments. Researchers need to investigate adjustments made by organisations which actually reduce the stresses arising from the mutual demands of the work and family domains.

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