WORKING WOMEN IN THEIR MULTIPLE ROLE ENVIRONMENT:

A SALUTOGENIC PERSPECTIVE

by

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DECLARATION

I declare that "Working women in their multiple role environment: a salutogenic perspective", is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.
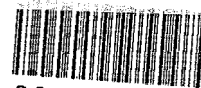
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CHAPTER 1

INTRODUCTION TO THE RESEARCH

This dissertation outlines the roles of working women from a salutogenic perspective. The paradigmatic perspective will serve as the point of departure, while the salutogenic constructs, will be integrated with the multiple roles in women's lives.

The first chapter provides a background to, and a motivation for the research, followed by a problem formulation. The general objective of the research is formulated, distinguishing between the specific theoretical and empirical objectives. The research model will be discussed followed by a paradigm perspective of the research, which will demarcate the boundaries of the research. The research design and methodology are outlined, indicating the procedure for execution. The outline of the chapters of this dissertation concludes this first chapter.

1.1   BACKGROUND TO AND MOTIVATION FOR THE RESEARCH

At lower levels of family income, or under inflation, more women feel the need to work in order to provide a margin for security. The socio-economic forces that affect family relations when the mother works outside the home are often complex because of the continuing normative pressures of women. Specifically, in early socialisation as in later social interaction, the role of mother and housewife is more central than any other role the woman plays. She is expected to continue her homemaking and maternal tasks even if she does work full-time. In addition, although studies generally find that working mothers do not spend as many hours on home tasks as women who stay at home, husbands do not assume other domestic tasks that are carried out. Even when both husband and wife work, domestic tasks are not shared equally. Home and children are still expected to be her responsibility (Goode, 1982: 131-132). Similarly, if the woman is divorced, a widow or a single-parent it is likely to affect her work behaviour.

Because the past two decades have witnessed a new effort on the part of women all around the world to achieve greater equality within the marketplace as within the home, it is important to consider the behaviour of working women in their multiple role environment. The wife, mother and homemaker roles

are extraordinarily demanding and often sources of more demand than strength. On average, women do as well in the labour force as men and like men, they are strengthened by that role when it is available to them (that is consequences appear). An understanding of why and how some people find the strength to withstand and overcome pressures toward increasing entropy, whereas others do not, is also likely to lead to ways of increasing the numbers of those who do (Strümpfer, 1995: 87).

In an effort to contribute to the debate, this research is aimed at the coping abilities of working women in their multiple role environment approached from a salutogenic paradigm perspective. In his salutogenic model Antonovsky (1979: 184-185), used the term the "health ease/dis-ease continuum". He also stated that other ease/disease continua exist and mentioned family-relations, social-relations and material-resources as examples. This implies that all people fall somewhere between two theoretical poles of total wellness and total terminal illness. In other words people fall somewhere between the healthy successful coper and the unhealthy, unsuccessful non-coper. Moreover Strümpfer (1995: 81), argues that Antonovsky's concept of 'salutogenesis', referring to the origins of health, should be broadened to 'fortigenesis', which refers to the origins of psychological strength in general.

1.2   PROBLEM STATEMENT

The problem concerns the affect that multiple roles have on the behaviour of women. If the woman is married, or a widow, or a single-parent there is increasing entropy in her work environment and at home, this can be considered from a macro-perspective, such as increasing entropy in her work environment and home would cause increased stress levels which would decrease her capacity to cope with the demands of everyday life.

Therefore we need to ask *whether or not women who take on full-time careers and those who take on traditional male-roles will be able to cope with the demands made by family and the demands made by work.* There is, however, no clear picture as to why some people cope and others do not in the same situation (Ashford, 1998: 20).

According to Sullivan and Bhagat (1992: 371), mainstream paradigms could be greatly enhanced by incorporating insights generated in related behavioural and social sciences. An interdisciplinary

orientation would yield benefits that would have far-reaching consequences for the state of theory development in this area.

Given this background, the research questions could be depicted as follows:

- What are demands and effects of work and roles within the work situation?

- Can salutogenic constructs be used to explain coping with the types of roles?

- How can the above salutogenic constructs be used to integrate coping with the various types of roles?

- Is there a correlation between life role experience and salutogenic constructs?

- What recommendations can be formulated for further research and employment development?

1.3   OBJECTIVES OF THE RESEARCH

The objectives of this research are discussed in terms of the general and the specific objectives.

The general objective of this research is to study working women in their multiple role environment from a salutogenic perspective.

The specific *literature objectives* of this research entail the following:

- To determine the demands and effect of work and roles within the work situation.

- To determine how salutogenic constructs can be used to explain coping with the types of roles.

- To determine how the above salutogenic constructs can be used to integrate coping with the types of roles.

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The specific *empirical objectives* of this research entail the following:

- To determine whether there is a correlation between life role experience and salutogenic constructs.

- To formulate recommendations in terms of further research and employment development.

In an effort to contribute to the debate, this research is aimed at copying abilities, as well as the behavioural and social affects of working women in their multiple role environment approached from a salutogenic paradigm perspective.

1.4   THE RESEARCH MODEL

According to Mouton and Marais (1988: 141), there are four characteristics of persecutive theoretic models namely:

- Models identify central problems or questions concerning the phenomenon that ought to be investigated.

- Models limit, isolate, simplify, and systematise the domain that is investigated.

- Models provide a new language game or universe of discourse within which the phenomenon may be discussed.

- Models provide explanation sketches and the means for making predictions.

Furthermore, the primary goal in the formulation of the model is to draw attention to the fact that a variety of perspectives on research exist. The determinants of research decisions may be defined as "those tasks or problem orientated beliefs which derive from a given paradigm which have been internalised" (Mouton & Marais, 1993: 23). This would therefore include certain assumptions about the

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research domain phenomena, model and methodological preferences.

Moreover, according to Mouton and Marais (1993) the decision-making steps in the research process should include five typical stages, namely choosing a research topic or theme, formulating the research problem, conceptualising and operationalising, data collection, analysis and interpretation of data. Thus, the model allows for different types of research in the formulation of problems, collation of the data and the process of analysis.

Figure 1.1 (p. 6) by Mouton and Marais (1993: 22), is an integrated model of social science research and it reflects the importance of the interaction between the researcher and research domain.

In terms of the model, research in the social sciences are best described as "a collaborative human activity in which social reality is studied objectively with the aim of gaining a valid understanding of it" (Mouton & Marais, 1988: 7). In addition they distinguish among the following dimensions of research in the social sciences namely:

- the sociological dimension: scientific research is a joint or collaborative activity;

- the ontological dimension: research in the social sciences is always directed at an aspect of social reality;

- the teleological dimension: as a human activity, research in the social sciences is intentional and purposive by definition, its main aim being the understanding of phenomena;

- the epistemological dimension: the aim is not merely to understand phenomena, but rather to provide valid statements about reality; and

- the methodological dimension: research in the social sciences may be regarded as objective by virtue of its being critical, balanced, unbiased, systematic and controllable.

Figure 1.1

An integrated model of social science research (Mouton & Marais (1988: 22)

INTELECTUAL CLIMATE
Meta-theoretical (ontological) assumptions

What is man ?

What is the nature of society/ culture/ economics/ history ?

MARKET OF INTELLECTUAL RESOURCES

Theoretical Beliefs

Methodological Beliefs

PROCESS OF SELECTIVE INTERNALIZATION

THE RESEARCH PROCESS

DETERMINANTS OF RESEARCH

DOMAIN ASSUMPTIONS

Assumptions about specific aspects of the research domain

THEORETICAL-METHODOLOGICAL FRAMEWORK

Theory (theories),model(s), methods and techniques

Research Strategy

Research Goal

RESEARCH DECISIONS

(I) Choice of research topic
(ii) Problem formulation
(iii) Conseptualization and operationalizing
(iv) Data collection
(v) Analysis and interpretation of data

INTERACTIVE OR DIALECTIC PROCESS

RESEARCH DOMAIN

1.5   THE PARADIGMATIC PERSPECTIVE OF THE RESEARCH

One of the characteristics of social sciences research is that different research traditions and paradigms are to be found within each of the disciplines, thus social sciences disciplines are multi-paradigmatic (Mouton & Marais,1988). According to Mouton and Marais (1988: 20) paradigms are collections of meta-theoretical, theoretical, and methodological beliefs which have been selected from the intellectual climate and the market of intellectual resources of a particular discipline. Paradigmatic research, therefore refers to research which is conducted within the framework of a given research tradition or paradigm (Mouton & Marais, 1988).

The paradigmatic perspective of this research will be described by discussing the intellectual climate and the market of intellectual resources.

1.5.1   The intellectual climate

The intellectual climate reflects the variety of metatheoretical values and beliefs held by those practising within the discipline at any given stage. For the purpose of this research the following values and beliefs (statements) will be concentrated on: industrial psychology, coping, multiple roles, salutogenis and salutogenis constructs.

From a discipline perspective, this research focuses primarily on *industrial psychology* which according to (Benjamin, Hopkins & Nation, 1990: 5) is the scientific study of human behaviour in an endeavour to improve productivity and the quality of working life. Moreover, industrial psychology aims at improving organisational goals in terms of productivity and satisfaction by studying, explaining and predicting behaviour of people in the workplace. The sub-discipline followed in the field of industrial psychology is industrial-organisational psychology. A primary objective in this area is to determine the relationship between specific individual and situational variables on the one hand, and relevant job-related behaviours on the other (McCormick & Ilgen, 1985).

Coping consists of behavioural and cognitive efforts to manage specific internal and/or external demands that are appraised as taxing or exceeding the resources of the person (Monat & Lazarus, 1991).

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Interactive models according to Parkes (1990), describe coping as a moderator variable, which influences relations between stress and outcome while, main effect models describe relations between coping and outcomes as independent of the level of stress. When internal and/or external demands exceed the resources of the individual, and the situation cannot be mastered, moderated, reduced or tolerated through his/her cognitive and behavioural efforts, such an individual is not coping because homeostasis is not maintained (Folkman, Lazarus, Gruen & De Longis, 1986). Thus, people are not merely passive targets of problems that arise in their lives, but they actively respond to them in an effort to avoid being harmed by them (Monat & Lazarus, 1991).

The late Aaron Antonovsky, professor of Medical Sociology at the Ben Gurion University of the Negev, introduced the term *salutogenesis*. This concept salutogenesis originated from the Latin: salus (health) and the Greek: genesis (origin), emphasising the origins of health or wellness (Strümpfer, 1995: 81). He sought to unravel 'the mystery of health' and to find answers to the question 'how people manage stress and stay well'. Thus, the main thrust of his writing evolved around sources of health (Strümpfer, 1995: 81).

Salutogenetic constructs are different theoretical perspectives, which developed independently, but are still part of the overall salutogenesis paradigm, illustrating the potential of salutogenic thinking. Salutogenic strengths or constructs are known to be linked to stressors, coping and health (Antonovsky, 1991: 69). The salutogenic constructs all deal with "how people manage stress and stay well" (Strümpfer, 1990: 264).

One major paradigm of the connection between work and family suggests that these spheres compete for employees' time and energy. In this view, work and family roles are viewed as incompatible, leading to interrole conflict. Yet interrole conflict may also result from role overload or competing time constraints, which do not necessarily signal incompatibility. Furthermore, some researchers argue that multiple role have a positive influence in peoples lives (Greenhaus & Beutell, 1985; Hall, 1972; Marks, 1977 as quoted by Loscocco & Roschelle, 1991: 208).

1.5.2   Market of intellectual resources

Mouton and Marais (1998: 20), refers to the market of intellectual resources as the collection of beliefs which has a direct bearing upon the epistemic status of scientific statements. The two major types are: theoretical beliefs about the nature and structure of domain phenomena and methodological beliefs concerning the nature and structure of the research process.

1.5.2.1   Theoretical beliefs

Those beliefs of which testable statements about social phenomena are made are known as theoretical beliefs (Mouton & Marais, 1998: 20). As far as this research is concerned, the theoretical beliefs include the *central thesis* and the *theoretical models* of this research.

The *central thesis* is that there is a relationship between the strength of working women's salutogenetic construct scores and their ability to cope with multiple roles.

The *theoretical models* which will be applied in this research are discussed from a salutogenic paradigm perspective. Since salutogenesis has been described as a new paradigm emphasising the origins of health it would be worthwhile to delve in this area of research.

The salutogenic paradigm, has three orientations (Antonovsky & Bernstein, 1986: 53), which include the following:

- *Orientation towards health and disease.* The salutogenic orientation proposes that we study the location of each person, at any continuum (Antonovsky, 1987a: 50). Two consequences of this orientation are that questions are asked about the whole continuum and that the total population becomes subject to study, rather than small samples of people who show particular forms of disease (Strümpfer, 1995: 81).

- *Orientation towards the deviant case.* Strümpfer (1990: 266) states that an implication of the salutogenic orientation is that the "deviant case" should also be studied. The salutogenecist

without overlooking the importance of what has been learned looks as the "deviant case", for example: "who are the working women who cope with multiple roles?" (Antonovsky, 1987a: 54). Thus the "deviants" are those who make it against the high odds posed by human existence (Antonovsky, 1984: 117).

- *Orientation towards stressors.* From a salutogenic point of view, tension does not automatically imply stress (Antonovsky,1979: 96). Although stressors are endemic and most people have a high stressor load, some maintain their position on the above continuum, and do even better, turning the existence of stress into an advantage. "How can we learn to live well with stressors, and possibly even turn their existence to our advantage?" is a question that every salutogenecist should ask (Antonovsky, 1984:116).

The following theoretical models will be discussed from a salutogenic perspective as part of the literature review:

- Sense of coherence

- Hardiness

- Learned resourcefulness

- Potency

- Locus of control

- Self-efficacy

1.5.2.2   Methodological beliefs

Methodological beliefs are beliefs about the nature of social science and scientific research with the inclusion of different types of traditions or schools in the philosophy of the social sciences and the

methodological models such as quantitative and qualitative models (Mouton & Marais 1988, 20).

According to Nowack (1991: 118), what appears increasingly clear from the diverse literature on health psychology and behavioural medicine is that a wide variety of individual difference factors may play a role in the development of both chronic and acute illness. What is not clear is whether these psychosocial factors exert an independent influence on well-being, or whether they have a common feature which underlines them. For example, some of these psychosocial predictors (stressful events or Type A behaviour) may directly produce pathogenic psychophysiological changes. Other factors, such as coping style, may directly influence health enhancing or health damaging behaviours which result in specific psychophysiologic reactions. Of these numerous issues warranting further exploration, a major concern is whether these psychosocial factors represent common predisposing psychophysiological states, or whether they exert their impact on well-being in interaction with each other.

The literature components fall within the *humanistic school* of thought. The basic assumption of humanism is that people are free agents, with a free will, are conscious and creative and are born with the inner motivation to fulfil their potential (Dowretzky, 1988: 16). Maslow, Allport and Rogers are some of the exponents of the humanistic model approach which looks at mental health from a positive point of view. Human beings are fundamentally good, have a basic ability for growth and self-actualisation and are able to solve their own problems. The emphasis is on the self-image as the central concept, and on striving towards self-actualisation and personal values. Moreover, according to Morgan (1980: 609) the radical humanist paradigm, emphasises how reality is socially created and socially sustained but ties the analysis to an interest in what may be described as the pathology of consciousness, by which human beings become imprisoned within the bounds of the reality that they create and sustain. This perspective is based on the view that the process of reality creation may be influenced by psychic and social processes which channel, constrain, and control the minds of human beings, in ways which alienate them from the potentialities inherent in their true nature as humans.

The empirical component falls within the *functionalist paradigm.* This paradigm is based upon the assumption that society has a concrete, real existence, and a systemic character oriented to produce an ordered and regulated state of affairs. It encourages an approach to social theory that focuses upon understanding the role of human beings in society. In the case of this research attention will be focussed

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on working women in their multiple role environment. Behaviour is always seen as being contextually bound in a real world of concrete and tangible social relationships. The ontological assumptions encourage a belief in the possibility of an objective and value-free social science in which the scientist is distanced from the scene which he/she is analysing through the rigor and technique of the scientific method. Thus, the functionalist perspective is primarily regulative and pragmatic in its basic orientation, concerned with understanding society in a way which generates useful empirical knowledge (Morgan, 1980: 608).

1.6   THE RESEARCH DESIGN

According to Mouton and Marais (1988: 32), research design implies that research is planned and, the aim of research design is to align the pursuit of a research goal with the practical considerations and limitations of the project. Thus, the aim of a research design is to plan and structure a given research project in such a manner that the eventual validity of the research findings is maximised.

1.6.1   Typology of the research

There are three basic types of research goals namely: exploratory, descriptive and explanatory. The goal pursued in exploratory studies is the exploration of a relatively unknown research area which usually leads to insight and comprehension rather than the collection of accurate and replicable data. The aim of explanatory studies is to indicate causality between variables or events, thus explaining a given phenomenon in terms of specific causes. Descriptive research focuses on the in-depth description of a specific individual, situation, organisation, group, tribe, sub-culture, interaction or social object and the frequency with which a specific characteristic or variable occurs in a sample is emphasised. There is a direct relationship between explanatory research and predictive and evaluative research (Mouton & Marais, 1988: 43-45). Thus *descriptive research* is used in this study.

The major types of research design include first-order phenomena which are all phenomena in the experiential reality of man. Second-order phenomena refer to those constructs through which individuals try to come to grips with the first-order phenomena, such as concepts and models for example. The

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second type of design distinguishes between the collection of new data and the use of available data (Mouton & Marais, 1988).

Available data are found in documentary sources such as books, letters, tape and video recordings. New data are primarily collected by means of direct observations of human behaviour or by means of indirect observations such as interviews, and psychological tests for example.

Finally, there are those studies with a more general interest and those with a more contextual interest. This distinction in research strategy is also associated with the three basic types of research goals, namely exploratory, descriptive and explanatory studies (Mouton & Marais, 1988: 121-122).

As this research concentrates on the salutogenic model and constructs, it can be categorised as a second-order research design (Mouton & Marais, 1988), and since this research is designed to make use of available documentary source material for the literature review, while new data will be collected by means of questionnaires, it can be classified as a research design which will make use of available data as well as the collection of new material. Moreover, since this research is designed to make use of questionnaires and as well as the secondary analysis of existing data, it implies that the research strategy is of general interest and the research goal is therefore descriptive.

1.6.2   The reliability of the research project

Reliability requires that the application of a valid measuring instrument of different groups under different sets of circumstances, should lead to the same observation. To ensures maximum reliability, the researcher will make use of valid and reliable structured instruments. Thus, the central consideration of validity in the process of data collection is that of reliability (Mouton & Marais,1988: 79). The working women who participate in this research study, all work in similar work environments with varying family structures.

1.6.3   The validity of the research project

The primary aim of research in the social sciences is to generate valid findings, meaning that the findings should approximate reality as closely as possible. Internal validity refers to the fact that a study has generated accurate and valid findings of the specific phenomena which have been studied. It may therefore refer to a project as having produced internally valid results if the constructs were measured in a valid manner, the collected data are accurate and reliable, the analyses are relevant for the type of data, and the final conclusions are adequately supported by the data. The term external validity refers to a further stage in the research process, and that the findings of a given project are generalizable to all similar cases. Furthermore, internal validity precedes external validity. In other words, it would not be possible to claim that research findings are externally valid unless they can be shown to be internally valid (Mouton & Marais, 1988: 50-51).

In this research internal validity will be ensured by the use of cross-reference of topics involved, the use of valid instruments and scales to measure the salutogenic personality constructs of working women. The participants for this study includes a racially diverse sample of 100 working women although most of them are Indian, the possibility of the results being generalised to the broader South African population, is not excluded.

1.6.4   Variables

The independent variable in this research is the salutogenic constructs and the dependent variables are: the coping ability of working women, the demand of work roles and integrating coping within the multiple role environment, which will be measured, described and interpreted in terms of the research problems.

1.6.5   The unit of analysis

The unit of analysis is working women.

As an individual she serves as an employee, mother, housewife, and single-parent. As respondent she

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will react to salutogenic construct instruments, after which reference will be made to women as a group of individuals.

1.6.6   Role of the researcher

For the purpose of this research, the student will fulfil the role of researcher and psychometrist. As researcher, the research methodology will be designed, as psychometrist the salutogenic construct instruments will be applied, after which the student will again serve as a researcher to interpret the results and draw the necessary conclusions.

1.7   RESEARCH METHODOLOGY

The following represents the selected research methodology which, in correspondence with the specific literature and empirical objectives of this research, will be administered in two phases: phase 1 the literature review and phase 2 the empirical study of this research.

1.7.1   Phase 1: Literature review

Step 1.   Literature review of the demands and effects of work and role within the work situation.

Step 2.   Literature review on coping and coping mechanisms, as well as the selection and discussion of salutogenic constructs to be used for the purposes of the empirical study.

Step 3.   Integrating coping with multiple roles.

1.7.2   Phase 2: Empirical study

Step 1.   Selecting the population and sample.

Step 2.   Compilation and discussion of and justification for the measuring battery.

Step 3.   Data gathering.

Step 4.   Data processing.

Step 5.   Formulating a central hypothesis.

Step 6.   Reporting and interpreting of results.

Step 7.   Formulation of the conclusions.

Step 8.   Discussion of the limitations of the research.

Step 9:   Formulation of the recommendations.

1.8   OUTLINE OF CHAPTERS

The chapters of this research will be presented as follows:

Chapter 2:   Work and role

Chapter 3:   Coping and coping mechanisms

Integration: How can the above coping strategies (salutogenic constructs) be used to integrate coping with the types of roles?

Chapter 4:   Empirical study

Chapter 5:   Results

Chapter 6:   Conclusions, limitations and recommendations

1.9 CHAPTER SUMMARY

In this chapter, the background to and motivation for the research as well as the problem statement and objectives of the research are given. Moreover, an integrated model of social science research is provided, as well as the paradigmatic perspective and research design. This chapter concludes with the research methodology, which includes the literature review, empirical study, and an outline of chapters.

CHAPTER 2

WORK AND ROLE

The objective of this chapter is to determine the demands and effect of work and roles within the work situation. To reach this objective work and role will be conceptualised. The types of roles will be discussed together with coping with multiple roles. The chapter will conclude with a chapter summary.

2.1   PSYCHOLOGY OF WORK

Work-family research has demonstrated that a significant proportion of employed parents experience some or a great deal of difficulty coordinating employment and family demands. This is especially true for the working woman.

2.1.1   Definition of work

According to the Oxford English Dictionary (Tultoch, 1993), work may be defined as performing a task, using mental or physical effort. Yet when work or work stressors are considered in the literature, the term 'work' is used to denote the performance of a task for financial gain (Barling, 1990: 19).

Work may also be defined as purposive activity directed toward meeting physical and social needs satisfying to those who either produce or consume goods and services (Long & Khan, 1993). The Tikopians' definition of work is complex and the mandate for the study of work is deepened. The Tikopia have one term that covers activities that are not rest or recreation, including participation in ritual acts as well as daily production. This definition includes work such as household work and kin work (Long & Khan, 1993). Kin work is another domain of women's work and experience that is neglected and distorted by the opposition of the realm of paid employment and the realm of responsibility for their household and family of procreation. This work includes the labour necessary to maintain cross-household kin ties and the thought that goes into deciding which ties to strengthen and which ties to abandon. Kin work is heavily dependent on women; often this work is left undone when there is no adult woman in a household. Thus, the Tikopian definition of work, because it is not dependent on payment

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as a defining element, encourages one to look at women's work in a different light. For example we are compelled to ask questions such as, "how do women cope with the challenges in their lives?" "what difference does it make when the work a woman does is paid?"(Long & Khan, 1993).

Looking at the definition of work from a functionalist perspective, which focuses on understanding the role of human beings in society, work may be defined as performing a task, using mental and physical effort, directed toward meeting physical, psychological and social needs (Long & Khan, 1993).

Facione (1994) explores common English-language and found that in the case of the role title *mother*, we have the corresponding work category names *child care* and *parenting*. In the case of the role title *wife*, we do not have a corresponding work category name of *husbandcare* or *wifing*. Similarly, the work category name *housework* has no corresponding title such as *houseworker*, but *domestic laborer* is mentioned, with its connotation of "hired female laborer other than wife." Also the term *homemaker* implies that the categories of housework, child care and the work of wifing belongs to one person. Thus, our common language vocabulary captures the social assumptions that work in the home differs in significant ways from wage labour. It also reflects the assumption that it is not necessary to attend carefully to job titles in the home or to the assurance that these jobs will be filled.

Both men and women need the satisfaction of interpersonal relationships, with family and friends, but also the satisfaction of achievement in the outside world (Betz, 1993). Thus working holds an important place both in society and in the lives of individuals and life without productive work is terrible (Betz, 1993).

2.1.2 The demands and effects of work

Women are faced with certain demands at work(eg. noxious work sites), which have certain effects (eg. distress) on them.

Work-family research has demonstrated that structural work demands, such as the amount of work time and scheduling of the work week, are related to difficulties associated with work-family coordination (Warren & Johnson, 1995). When job demands are too great people do not feel able to perform their jobs effectively and symptoms of negative health result. Specifically, excessive workloads, forced overtime and ambiguous and conflicting demands cause emotional distress. Noisy and noxious work-sites also cause distress (Loscocco & Roschelle, 1991). Work schedule characteristics inlcude work schedule inflexibility and work-related travel. The more inflexible an employee's work schedule, the less freedom she will have to meet the demands of the family role and therefore the higher the level of work family conflict. Employees who travel extensively will experience high levels of work-family conflict. Extensive work-related travel not only leaves fewer hours to attend to family role responsibilities but also may produce considerable stress and fatigue (Greenhaus, Granrose, Rabinowits & Beutell, 1989). Working non-day, weekend, and variable shifts are also associated with higher levels of work-family role conflict. Psychological demands of the work role have also been identified as predictors of work family outcomes (Warren & Johnson, 1995). Research has shown that psychological work demands such as heavy workloads and pressure for output are related to work-family role conflict and work-family role strain (Warren & Johnson, 1995). Moreover, time-pressure demands such as attempts to meet deadlines also cause strain on women. A shortage of workers and the problem of a lack of new technology also makes the amount of work demanded unreasonable (Long & Khan, 1993).

2.1.2.2   *Physical demands and effects*

In a study by Long and Khan (1993), the most common physical demands reported were eye strain and muscle strain, exhaustion and "nerves." Periods of instability or anger, depression and skin rashes were somewhat less common, though consistently reported. Many of these symptoms have been associated with the physical demands of spending long hours before video display terminals. Psychological feelings such as nerves, anger, depression, and psychosomatic reactions such as skin rashes, exhaustion have been found to result from the physical demands and the psychological pressure to produce a certain amount of work under a certain type of work arrangement. Also, when workers were not included in the setting of deadlines, when the time spent with the technology was excessive and other supervisors requested

utilisation of the technology, the workers tended to report nearly all of the health problems considered.

2.1.2.3   *Multiple role demands and effects*

Employed mothers most often suffer form multiple role demands. Even though more mothers are now employed outside the home, fathers have not significantly increased their participation in child care and household responsibilities (Glass & Fujimoto, 1994).

(a)   *Role overload and role strain*

Strains associated with competing roles of income level, in today's working family is great. However, the strain placed on lower-income employed mothers, particularly if they are single, is greatly intensified, thus leading to role strain and overload. Because financial resources limit their options to purchase support services, such as domestic help and child care, these mothers must of necessity fulfill responsibilities associated with many different roles. Role overload, along with a low income and inadequate standard of living, predicts stress in the lives of single employed mothers. How they handle this strain depends on the social support system available to them (Frankel, 1993). Moreover, high levels of job performance in high-pressure environments may be associated with personal unhappiness and difficulties interacting with family members in a nurturing manner (Greenhaus et al, 1987). One form of role strain is role conflict, which results when the demands of various roles are highly disparate. Employed women are more likely to experience role conflict when they are deeply committed to both roles of mother and employee, when the demands of both roles are simultaneous and continuous (DeMeis & Perkins, 1996). Interrole conflict may also result from role overload of competing time constraints which do not necessarily signal incompatibility. It was also found that women whose work-role salience was similar to their husband's experienced less conflict than women whose work-role salience was lower or higher than that of their husbands. Thus, spouses who are both high in work-salience may have a mutual understanding of their partner's career aspirations and a system of mutual accommodation. However, when the husband is highly work oriented, a wife experiences more conflict as the number of children living at home increases (Loscocco & Roschelle, 1991).

Women, more often that men, also are expected to fulfil the majority of the demands associated with the domestic roles. Although women managers are less likely to be married or to have children than their male counterparts, they are more likely to report that the combined demands of their professional and family roles are stressful (Long & Khan, 1993). In one study (Long & Khan, 1993), it was found that women managers experienced career-family conflict and that it resulted in job anxiety and depression. In another study it was found that when employed women were forced to perform much or all of the work of the second shift, accommodating the demands of multiple roles in a limited time frame, they became "women with flying hair." In order to handle the demands of the second shift, women cut back on the amount of parenting a child actually needed to better fit what could be provided in the context of their multiple roles. The necessity of carrying out multiple roles to meet ones' own demands and those of others is likely to cause distress, which may be associated with poorer health (Facione, 1994). In addition, it is possible that employed mothers may adopt a less stringent definition of the maternal role making it possible for them to view themselves as exemplary mothers even if they do less household work and child care than homemaker others. Adopting these types of attitudes may be an important way for employed women to cope with the possibility of role overload and role conflict. If they do not alter their definition, they may be more likely to experience difficulty meeting role demands and consequently, be less satisfied with their performance (DeMeis & Perkins, 1996). Greenhaus et al (1991), also explain that there are three forms of work-family conflict namely: time-based conflict, in which the time devoted to one role makes it difficult to participate in the other role; strain-based conflict, in which strain symptom (eg. fatigue) experienced within one role intrudes into the other role and interferes with participation in that role; and behaviour-based conflict, in which specific behaviours required in one role are incompatible with behavioural expectations within the other role. Moreover, women's household work makes it more difficult for her to achieve labour market success and women are more likely than men to choose jobs which accommodate work to family. Studies have shown that women tend to work part-time, or sporadically, when they have children and that women choose jobs with hours and locations that suit the execution of home responsibilities (Loscocco & Roschelle, 1991). In this regard, Barling (1990), reviewed an example of a sick child at home who negatively influences a mother's work performance. The latter found that mothers with young children are likely to report that family factors spill over into the work situation.

2.1.2.4　　　*Gender difference demands and effects*

Women are also faced with gender difference demands and effects (Long & Khan, 1993).

(a)　　　Prejudice and discrimination

When male and female managers are similar in age, experience and work status, women are paid less than men. This inequity in pay is a significant source of stress for women managers. Women are also more likely than men to report stress because of the prejudiced attitudes of others and because colleagues of the opposite gender are treated more favourably in their organisations (Long & Khan, 1993).

(b)　　　Stereotypes

Female managers report stress from having stereotyped roles imposed on them by others in the organisation. In addition, they experience role conflict because the executive role is perceived as more appropriate for men than for women. Women also find it more difficult to be assertive in employment situations because such behaviour is inconsistent with societal stereotypes about appropriate behaviour for women. Such stereotypes also may make it more difficult for male subordinates to accept supervision by women (Long & Khan, 1993).

(c)　　　Social isolation

Women managers suffer from social isolation because they are much more likely than men to be in minority or token positions. Women in such positions are under a lot of stress. Moreover, these stressors have been linked to low organisational commitment, low job satisfaction and high propensity for turnover among women managers (Long & Khan, 1993).

2.2　　　ROLE

The psychological consequences of role accumulation depend not only on the number of roles occupied but on the nature of the particular roles, because roles differ in social value and in the patterning of

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privileges and obligations associated with them (Barnett & Baruch, 1985). Moreover, involvement in the same number of roles may have different consequences, depending on the particular roles included and on the nature of one's experiences within each role (Barnett & Baruch, 1985).

2.2.1   Definition of role

The concept of role is very important to the understanding of organisational and individual behaviour. Role refers to the expected behaviour patterns attributed to a particular position in an organisation, or outside an organisation (Ivancevich & Matteson, 1993: 302). The role of wife and husband are familiar to everyone. Those roles are culturally defined expectations associated with particular positions. A role may include attitudes and values as well as specific kinds of behaviour. It is what an individual must do in order to validate his or her occupancy of a particular position (Ivancevich & Matteson, 1993: 302).

The structural tradition defines role as an element of culture associated with a given social status position. On the other hand, the interactionist perspective lays major emphasis on the emergent quality of roles (Frankel, 1993). Thus the structural perspective focuses on cultural and normative prescriptions and proscriptions that dictate the "appropriate" behaviour of wives and mothers, whereas the interactionist perspective would emphasise the developmental and creative aspects of roles. Moreover, individuals create their own reality through roles. The organisation of the family provides an arena for both structuralist and interactionist interpretations of roles because families usually subscribe to both formal roles and informal roles (Frankel, 1993).

One study (Perry-Jenkins, 1993) suggests that roles are the basic unit of socialisation in society and that it is by understanding these roles that individuals come to organise their behaviour in accordance with expectations. Two concepts of role theory that are hypothesised to be related to why individuals take on certain roles, namely role attachment and role commitment. An individual becomes committed to a role when , because of the "fixed and independent character of institutional arrangements," he/she is forced to take on a certain course of action. Here an individual becomes locked into a position and is required to live up to the promises and sacrifices built into that role. A person only becomes deeply committed to a role he/she performs routinely. Role attachment, refers to one's becoming effectively and

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cognitively enamoured with a role but not necessarily being committed to it. Here an individual may become attached to a role if he/she is a committed and regular performer of it (Frankel, 1993).

In addition, the term "multiple roles" needs to be explored. Multiple roles means having both job and family roles (Barnett & Baruch, 1985). The family role may be marriage, or parenthood or both. This definition focuses on the combination of roles in two domains, not on the number of roles people have. Thus, people with multiple roles include employed married parents, employed married people without children, and employed non-married people with children (Barnett & Baruch, 1985).

2.2.2   Types of roles

Roles may be classified into gender based roles and social roles.

2.2.2.1   Gender based roles

Gender-role ideology is the product of a socialisation process by which families transmit to their members the cultural and family values that are organised around biosocial issues (Frankel, 1993). Gender role identity specifies one's self-definition in terms of these biosocial issues (Frankel, 1993). Interactions between men and women may be simplified by the carry over of other gender-based roles in the work place. One such aspect of the female role has been called the 'stroking function'. In society at large, women are expected to be the suppliers of socio-emotional support rather than direct achievers. The spillover of the female helping role into the occupational setting operates to keep women in peripheral positions (Nieva & Gutek, 1981). Thus, women who have talent and training are often pushed into gender-role niches where, although they are "allowed" to contribute, their work is not identified as their own. Women frequently become fixed in gender-role associated help and service roles and do not move on to independent command roles. This phenomenon is called the "dependency status"characterising many women's jobs (Nieva & Gutek, 1981). In such jobs, performance is assessed on the assistance extended to another rather than on the demonstration of skills that suggest a capacity to assume a higher ranking job (Nieva & Gutek, 1981).

Women employees in a male setting face the basic challenge of finding a comfortable fit between the demands of their gender roles and their work roles (Nieva & Gutek, 1981). Performing successfully in the female gender role and in the work role can be seen as a mutually exclusive, zero-sum game. If a woman is successful at work, she becomes, almost by definition, less successful at being a woman (Nieva & Gutek, 1981). She is expected to fulfil the demands of work and family roles simultaneously, while employed fathers are afforded the luxury of fulfilling the same two roles sequentially. This means that in terms of everyday behaviour, employed mothers are required to deal with problems relating to their employment role while at home and their home role while at work (Barling, 1990).

In understanding roles within families, it is important to recognise that gender permeates all levels of the establishment of roles (Frankel, 1993). Consequently, it is women's and men's notions about gender that ultimately define and give meaning to their roles as providers and home caretakers. It is this symbolic construction of roles that holds implications for how a role is enacted within the family (Frankel, 1993).

2.2.2.2   Social roles

There are a number of social roles that women have namely, as *paid worker, housewife* and *mother.*

(a)   Paid worker/provider role

There is growing evidence that employment per se may have positive psychological consequences for women, either as a primary source of well-being or as a buffer against stress experienced in other roles (Barnett & Baruch, 1985). Despite these positive findings, the literature on dual roles focus on work-family conflict and persistently treats employment as the added on role, the catalyst for feelings of role overload, role conflict and hence for psychological distress and decrements in well-being (Barnett & Baruch, 1985). The role of paid worker appears to be a source of self-esteem, purposefulness and inherent interest that may serve to mitigate negative effects of other stressors for women, even under conditions of role conflict and role overload. Thus, among employed women, overload and conflict may be less strongly associated with psychological symptomatology than among nonemployed women (Barnett & Baruch, 1985). Frankel (1993), also mentions that women are faced not only with reconciling behaviour with the attitude of those with whom they must live and work, but must also struggle with

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their own internalised beliefs about the inappropriateness of maternal employment, no matter how desperately they and their families may need the financial support. She also states that employed mothers are physically healthier and enjoy a more positive self-image when compared to housewives. Working women have also been found to have a greater power in their marital relationship and a larger degree of influence on fertility and child rearing decisions (Frankel, 1993). In addition, a large body of research points to the small but positive effects of employment on women's well-being, suggesting that enacting the provider role is related to women's sense of self. Long and Khan (1993), also mention that in the case of sole-support mothers, having a paid job may not make an enormous financial difference to their families in the short term. The difference between a woman's income on state assistance and her income from a minimum or low wage job may not be much, once child care and other expenses have been paid. All the same, these women felt that for them to have a job was essential to their children's welfare. They looked for jobs because they wanted their children to be proud of them and because they wanted to set an example for their children. It was important for them to give their children the assurance of having a self-supporting and self-respecting mother (Long & Khan, 1993).

(b)   *Housewife and mother role*

Research (Frankel, 1993) on women's roles as gatekeepers to their husbands' involvement in family work, however, points to the importance of women's commitment to their homecaretaker role as well. For women, although employment is usually positively linked to their well-being, they may remain reluctant to relinquish responsibility for their housewife/mother role because, traditionally it has been this role that has offered women their greatest sense of worth (Frankel, 1993). Here too there is evidence to suggest that women have something to lose by relinquishing housewife/mother responsibilities and assuming provider responsibilities (Frankel, 1993). Moreover, being responsible for the majority of housework, without any realistic assistance from family members or paid help, contributes to the role strain felt by employed mothers, who instead of feeling that they"have it all," must surely feel at times that they must "do it all"(Frankel, 1993). Furthermore, perhaps because of the tendency to see the roles of housewife and mother as given and the role of paid worker as added on and atypical, it has been assumed that the role of mother per se and the combination of the housewife and mother roles are less stressful than the paid worker role and the paid worker/mother combination. However, evidence is accumulating (Barnett & Baruch, 1985) that being a mother may be the most important source of stress

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in women's lives. In our culture, the role of mother is associated with many more obligations than privileges. Also, the demands of young children and the difficulties associated with rearing adolescents are intensified by the sense of responsibility that mothers bear for their children's health and welfare (Barnett & Baruch , 1985). Moreover, single mothers, lack the resources often associated with well-being. They have little opportunity to develop their education and work experiences, and they lack partners to help maintain the home environment and to provide financial and emotional support (Frankel, 1993). The simultaneous demands of parenting, employment and home care often result in isolation and insufficient social support. Financial difficulties is one of the greatest difficulties for single mothers and it is correlated with psychological distress. Single mothers who felt they have been forced into full-time employment were tense and unhappy, while for others, tensions were due to logistics of getting to work and arranging for child care. At the same time, employment has been associated with increased self-esteem in single mothers, and may provide them with the opportunity to decrease their isolation and to establish social support (Frankel, 1993).

2.2.3 Coping with multiple roles

Coping is a stabilising factor that can help individuals maintain psychological adaptation during stressful periods and it encompasses cognitive and behavioural efforts to reduce or eliminate stressful conditions and associated emotional distress (Holahan, Moos & Schaefer, 1996). Social, psychological, and biological effects of coping with one stressor may influence a person's ability to cope with concurrent or subsequent stressors.

Exposure to some stressors may inoculate people or help them to develop coping resources and mechanisms so that they are less harmed by subsequent stressors (Holahan, Moss & Schaefer, 1996) presumably, the more past experience individuals have in coping with stressors, the better equipped they will be at coping with subsequent stressors. In contrast, there are direct and indirect costs of coping with multiple roles (stressors). Coping with one role might deplete a person's resources or otherwise attenuate his or her ability to cope with the subsequent role. Although coping is not the only factor that influences adjustment to multiple stressors, it is central to understanding whether multiple stressors will have an additive or multiplicative effect on adjustment (Holahan, Moos & Schaefer, 1996).

Crosby (1987), states one factor that seems to contribute to the successful combination of multiple life roles, namely emotional support of significant others. If a woman is to experience success at work and at home, it appears crucial that those on whom she relies for support encourage her strivings and applaud her accomplishment. Whether a person feels stressed or happily busy depends on the combination of roles she has. Society makes it easy or hard for the individual to fulfill the expectations attached to different roles, which may result in role strain (Crosby, 1987). Role strain can result not only from having a large number of roles to play but also from holding a combination of statuses that is not familiar to most people, or of which they do not approve. It also seems that women who appear to suffer from role strain may actually be suffering from the negative aspects of one or more of their roles. Moreover, the acquisition of some roles makes acquisition to others easy or difficult. In addition, women in different roles use different coping resources, either they exploit satisfaction or they learn to buffer stress.

There are two general positions used to evaluate the impact of work stressors and coping on women's psychological adjustment (Wethington & Kessler, 1993). These two positions have their origins in research on multiple roles and health among women. The first position is based on the role-stress perspective, which argue that the combination of family and employment demands creates role overloads and role conflicts. This increased exposure to stress is thought to create higher psychological distress among women workers. This distress is presumed to come about because the build-up of competing demands of time and energy overwhelms most women's coping capacities at work and at home. The second position is based on the role-expansion perspective which argues that multiple roles have positive effects on health and well-being and consequently that the combination of family and work roles should be associated with improved mental health. Acknowledging that multiple roles increase exposure to role-related overloads and conflicts, alternative resources provided by multiple roles outweigh these stressors and help dampen their negative emotional effects. One of the most important resources thought to derive from maintaining multiple roles is increased exposure to social and personal situations that enhance successful coping, such as social support, personal validation and opportunities to develop self-efficacy (Long & Khan, 1993).

Alternative explanations include selection (Long & Khan, 1993). The essence of the selection argument is that the relationship between multiple roles and emotional functioning is due to prior emotional characteristics of the individual. There are three variants of selection explanations that are relevant to

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the study of coping with work stress among women (Long & Khan, 1993). The first is that prior emotional functioning plays a part in determining level and consistency of participation in the labour force across time, with women in poor mental health less likely to undertake additional role demands. The second is self-selection, which is that other emotional and attitudinal characteristics, such as socialised commitment to less traditional gender related roles, make it more likely for some women to combine work and family roles than others and to cope successfully with work and work-family stressors. A third variant of the selection perspective is that prior emotional and attitudinal characteristics affect how people typically cope with demands from work roles. This can mean that women's experience and perception of role stressors are partly determined by "failed" or inadequate coping related to and underlying emotional disturbance. It also means that some women engage in preventative coping to avoid stresses arising from combining work and family demands by reducing work hours at points in their lives when family demands are high (Long & Khan, 1993).

Loscocco and Roschelle (1991), moreover, suggest that there is some empirical evidence that suggests that social support buffers or diminishes the deleterious effects of job demands and deprivations, whereas, employees who work in a nonsupportive environment are likely to experience higher levels of stress and lower levels of personal and marital well-being. Household assistance from partners was related to women reporting greater tedium and work-related stress. There are several possibilities that may account for this finding (Loscocco & Roschelle, 1991). First, the support that is provided to women by their partners must correspond to their needs. It may be that the household assistance women receive is too low to meet their needs, or another aspect of support, such as emotional support, is needed and expected, but not provided. The stress experienced by many women may also be so great that the household support may come too late to be effective. When resources are overtaxed, social support reserves may be less effective. If partner assistance does not fit the needs of women adequately, this may actually result in great strain. Another possibility is that women who report receiving the greatest amounts of household assistance may be receiving "high hassle support." Although women may be receiving assistance, the positive aspects may be associated with stress and may overshadow the perceived helpfulness of the support. Receiving a great deal of assistance may be interpreted by working women to mean they are failing at their 'real' role as wife and mother. Feelings of guilt and failure may contribute to the experience of great strain (Schabracq, Winnubst & Cooper, 1996). In addition, Strümpfer (1995) maintains that women exposed to a mixture of family role stress and work stress

seemed less vulnerable to the destructive impact of either. A possible explanation for this occurrence is that married woman with both children and a career could use each situation as a resource for coping with the other. Therefore, the emotional support provided by her family may enable her to tolerate work stress, while the experience of personal control and instrumentality at work may help her to accept her relative lack of control over family stress. Thus, resources provided in one set of role activities can be used to meet obligations in other role domains (Crosby, 1987). Thus, a clearly 'deviant trend' has been illustrated here.

The more supportive mothers perceived their work environment to be when they had work-family difficulties, the less difficult they felt it was to adequately fulfill their work and family demands. Employed mothers who perceived their supervisors as supportive reported lower levels of strain between work and family roles (Warren & Johnson, 1995). Moreover, flexibility in work scheduling and permitting employees to come in late or leave early to take occasional days off without pay and to receive phone calls from family at work were the most beneficial in terms of reducing work-family strain. Thus, employed mothers who perceive their supervisors as flexible may perceive less strain because they are able to alter their work demands in order to meet their family demands, or they are able to let family demands overlap with work demands. Such perceived latitude when family emergencies arise is likely to reduce feelings of anxiety when co-ordinating work and family responsibilities (Warren & Johnson, 1995).

Emmons, Biernat, Tiedje, Lang and Wortman (1990), asked career women with pre-school children about the ways they cope with the competing demands of job and home. According to the women's self-reports, their most frequent response was to work as hard and efficiently as possible (i.e., to be a supermom and continue to meet all of their responsibilities at both home and the work place), and the least frequent response was to reduce their obligations by assigning their work to others. Moreover, higher expectations for homemaker mothers may help to legitimise the need to remain at home, whereas lower expectations for employed mothers may help to solidify their commitment to employment. Also, employed women coped with the stress of combining motherhood and employment more effectively when they reframed their attitudes to more positive interpretations than when they changed their behaviour. Thus, it appears that changes in the interpretation of mothering may be an efficient strategy for employed women to cope with their multiple roles (DeMeis & Perkins, 1996).

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2.3   CHAPTER SUMMARY

In this chapter the terms work and role were defined. The demands and effects of work were discussed and the research concluded that working women experience both positive and negative aspects in her multiple role environment. Moreover, the types of roles were also discussed namely, gender-based roles and social roles. This chapter concludes with a discussion in coping with multiple roles.

Herewith the first literature review objective, namely to determine the demands and effect of work and roles within the work situation is reached.

CHAPTER 3

COPING

The objective of this chapter is to determine how salutogenic constructs can be used to explain coping with the types of roles. To reach this aim coping and coping mechanisms are conceptualised and discussed. The chapter concludes with a summary.

3.1 DEFINITION OF COPING

Coping may be defined as the cognitive and behavioural efforts to master, reduce or tolerate the internal and/or external demands of the person-environment transaction that is appraised as taxing or exceeding the individual's resources (Folkman, Lazarus, Gruen & De Longis, 1986: 572). It follows that coping does not carry negative connotations for the person. All forms of coping represent effective means of reducing stress, depending on the demands and the context. Failure to reduce stress means that the demands exceed the resources. Coping efforts can therefore be conceptually distinguished from the success of these efforts (Long & Khan, 1993). The coping process also affects a person's energy level. He/she becomes tired and exhausted after even minor activities at work or at home. Normal interest in significant other or activities decreases, and trivial problems with the spouse or the children very easily evoke impatience and aggression. Coping takes time. Gradually the event is fitted into the life of the person concerned (Schabracq, Winnubst & Cooper, 1996).

At a general level, conceptualisations of coping may be categorised according to their assumptions about the primary determinants of coping responses (Zeidner & Endler, 1996). The dispositional approaches assumes that stable person-based factors underlie the selection of coping behaviours. This approach taps generalizable, preferred coping styles that transcend particular situational influences. The contextual approach on the other hand, assumes that more transitory situation-based factors shape people's choices of coping responses. This approach reflects how a person copes with a particular type of stressful event and are responsive to changes in coping efforts during a stressful episode. Thus, both dispositional and contextual approaches have complementary strengths in describing the coping process (Zeidner & Endler, 1996).

Coping mechanisms are those aspects of the self that provide personal resources for maintaining equilibrium (Billings & Moos, 1984). Long and Khan (1993) define coping mechanisms as antecedent moderators that may be physical, material, social, psychological, or intellectual in nature, which are those tools that individuals use in order to cope. There are five important categories of coping mechanism, namely: utilitarian, health, energy and morale; social networks; general and specific beliefs and problem solving skills. The extent to which an employed woman is stressed by events varies and includes complex interactions among her appraisals of the event, the coping efforts when undertaken, and the personal and coping mechanisms that she perceives to be available to deal with the event (Long & Kahn, 1993: 299). Moreover, Zeidner and Endler (1996) distinguish between two coping-based models namely: personal coping mechanisms and social coping mechanisms. The first mechanism includes relatively stable personality and cognitive characteristics that shape the appraisal and coping process. A variety of dispositional factors that relate to personal control appear especially important as coping mechanisms, including self-efficacy, optimism, hardiness, a sense of coherence and an internal locus of control. Social coping mechanisms can strengthen coping efforts by providing emotional support that bolsters feelings of self-esteem and self-confidence, as well as by providing informational guidance that aids in assessing threat and in the planning of coping mechanisms.

Thus, the purpose of implementing coping mechanisms is to reduce tension, and in so doing to restore emotional equilibrium, as well as to deal with the problems causing distress. This is referred to as problem-focussed coping (Folkman & Lazarus, 1980: 221). Emotion-focussed coping aims at dealing with emotional distress through either controlling emotions or by discharging them, while avoidance-coping aims at avoiding the problem altogether (Zeidner & Endler,1996: 207). Power is another moderator that affects womens' ways of coping with the demands of work (Long & Kahn, 1993). Lack of power often means that women may have more difficulty than their male colleagues in accomplishing tasks or influencing important persons. Another moderator that needs to be looked at is individual characteristics, like social support and interpersonal competence. Although both men and women find instrumental support helpful in dealing with work stress, women find empathy to be an important form of support. Perceived social support is usually considered to be a positive coping resource for women, but research (Long & Khan, 1993) has documented the high cost of caring. This cost suggests that social networks can become sources of stress for women. Furthermore, a woman's interpersonal competence

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is another important coping mechanism, and a woman's ability to seek and receive interpersonal support is more highly developed than man's (Long & Kahn, 1993).

Exposure to and coping with the demands of life comprise the essence of human life (Ben-Sira, 1984). Inadequate coping with these demands can be viewed as demands that exceed the resources of the system, thus a failure in coping results in a disturbance of homeostasis (Ben-Sira, 1984). Human coping entails an ongoing process of reappraising one's coping abilities in the face of unremitting bombardment of stressors (Wiedenfield, Bandura, Levine, O'Leary, Brown & Raska, 1990).

3.2   COPING MECHANISMS

In light of the above discussion it is important to determine why some individuals cope so much better than others. Coping mechanisms include the available resources that are available to the individual for developing their coping abilities. Therefore, coping mechanisms are factors that help to maintain health (Billing & Moos, 1984). Since a sense of coherence, locus of control, potency, self-efficacy learned resourcefulness, and hardiness are properties of individuals, their social environment and physical environment that enable individuals to respond to the internal and external demands made by cognitive and behavioural factors, it may be concluded that they may be regarded as coping mechanisms (Lepore & Evans, 1996).

The following coping mechanisms will be discussed namely: sense of coherence (SOC), hardiness, learned resourcefulness, potency, locus of control and self-efficacy. These types of coping mechanisms may be classified as personal coping resources which according to Holahan, Moos and Schaefer (1996), include relatively stable personality and cognitive characteristics that shape the appraisal and coping process.

3.2.1   Sense of coherence (SOC) (Antonovsky)

The sense of coherence is the central concept of the salutogenic model and it assumes paramount importance in the movement of individuals along the health continuum. According to Antonovsky (1979), this may be defined as a global orientation that expresses the extent to which one has a pervasive,

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enduring though dynamic feeling of confidence that one's internal and external environments are predictable and that there is a high probability that things will work out as well as can be reasonably expected.

The sense of coherence is a dynamic aspect of the personality which is formed throughout childhood and adolescence and it influences behaviour in such a way that consistency and stability are maximised (Sullivan, 1993). It's developed as a single dimension of the individual's personality, consisting of three interwoven components namely: comprehensibility, manageability and meaningfulness (Antonovsky, 1991).

- **Comprehensibility**

Comprehensibility refers to the extent to which individuals perceive stimuli that confront them as making cognitive sense, as information that is ordered, consistent, structured and clear, rather than as noisy, chaotic, disordered, random, accidental and unpredictable (Antonovsky, 1984). Comprehensibility thus means, that the individual finds a certain logic in the sequence of events, that there is a degree of consistency from one experience to another, as a general rule, unexplainable events do not occur (Sullivan, 1993).

- **Manageability**

Manageability refers to the extent to which people perceive that resources are at their disposal and are adequate to meet the demands imposed by stimuli (Antonovsky, 1984). Having resources at one's disposal does not necessarily mean that those resources are under one's direct control, but that control may also rest with legitimate others, i.e. with parents, peers or with God. Thus, when direct control is lacking, life doesn't become unmanageable, but rather we expect to be able to endure it and not to be overwhelmed by it (Sullivan, 1993).

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- **Meaningfulness**

Meaningfulness refers to the degree of commitment one has to various life domains. High on meaningfulness includes feeling that life makes sense emotionally. Meaningfulness is the emotional part to comprehensibility (Antonovsky, 1984).

Thus, Antonovsky (1996), maintains that a person with a strong SOC will wish to be motivated to cope (meaningfulness); believe that the challenge is understood (comprehensibility); and believe that resources to cope are available (manageability).

Although the above components are conceptually distinguishable from one another, they are interrelated as facets of the sense of coherence. For example, an individual who has a strong belief that the world makes sense (comprehensibility) is probably more likely to view him-/herself as being equal to the demands of living (manageability) compared to an individual who sees the world as a place without rhythm or reason. By the same token, a person who lacks commitment to the activities of life (meaningfulness) is not likely to be motivated to participate in shaping events, even if the situation is perceived to be manageable (Sullivan, 1993). The strength of the SOC is shaped by three kinds of life experiences, namely consistency, underload-overload balance, and participation in socially valued decision-making. The extent of such experiences is moulded by one's position in the social structure, by one's culture, by the kind of work one does and by one's family structure, with input from many other factors, ranging from gender and ethnicity to chance, and genetics (Antonovsky, 1996).

3.2.2   Hardiness (Kobasa)

The concept of hardiness was developed by Kobasa and her co-workers (Strümpfer, 1990: 269). Hardiness is an individual predisposition which has been found to moderate the impact of stress and existentialism was used as the base for it (Sergay, 1990). Existentialism supports the image of man as accepting the challenge of creating a meaningful life in a generally stressful world, with the potential of creating opportunities for growth and fulfilment (Sullivan, 1993).

People who believe that they can control events, who are deeply committed to the people and activities in which they are involved, and who accept change as a challenge, tend to remain healthier under stress than those who believe that they are powerless to shape events, that life's activities and social ties lack importance, and who experience change as threatening (Sullivan, 1993). Thus, the hardy personalities find opportunities to exercise decision making, set goals, confirm life's priorities, and other complex activities that they appreciate as important human capabilities (Kobasa & Pucetti, 1983). Kobasa, has thus demonstrated that many individuals do not become ill, despite leading stressful lives and her study provides a basis for understanding how individuals can encounter great stress and still be healthy (Kobasa, Maddi & Kahn, 1982).

Three existential concepts were chosen as integral to the stress resistance resource of hardiness. They are commitment, control and challenge (Kobasa, 1979a). Persons high on hardiness involve themselves in whatever they are doing (commitment), believe and act as if they can influence the events forming their lives (control), and consider change to be not only normal but also a stimulus to development (challenge) (Kobasa, Maddi & Zola, 1983).

- **Commitment**

The commitment (vs. alienation) component of hardiness incorporates the recognition of one's own goals and priorities, allowing for a valid assessment of one's self in terms of values and ability. Rather than feeling alienated, committed persons feel an integral and important part of the situation they find themselves in because they identify with, and appreciate, the meaning of events and the environment in which they have become actively involved in. Moreover, they have the skill to know how to cope with other people or with problems. Together with having a sense of community to others, committed persons have a sense of commitment to self (Sergay, 1990).

- **Control**

The second hardiness characteristic is control (vs. powerlessness). Hardy individuals believe and act as if they influence the course of events (Kobasa, 1979b). They have a feeling of responsibility for what is happening around them and they see events as a consequence of their own actions. Even if an event or

situation in not under their control, they incorporate the event, through thought processes and actions, into a longer term plan and as such, the situation seems consistent with their overview of life (Kobasa, 1979a).

• **Challenge**

The third component of hardiness is challenge (vs. threat). Challenge involves seeing change as a necessary and integral part of life. Hardy individuals feel positively about change, are catalysts in their environment and are well practised in responding to the unexpected. They are stimulated by, rather than afraid of, the unknown for they are sufficiently aware of their own environment and where to turn to for needed resources (Kobasa, 1979a). Hardy persons see change to be the norm, and regard it as an important challenge to development (Kobasa, Maddi & Puccetti, 1982). Challenge mitigates the stressfulness of events and the perceptual side by colouring events as stimulating rather than threatening.

3.2.3   Learned resourcefulness (Rosenbaum)

Learned resourcefulness is an acquired repertoire of behavioural skills (mostly cognitive) according to which a person self-regulates internal responses that interfere with the smooth execution of a target behaviour (Rosenbaum & Jaffe, 1983). It describes the belief of individuals, and also the skills and self-central behaviours, which all people learn in different degrees through informal training from the moment of birth (Strümpfer, 1990).

Two important components of learned resourcefulness need to be highlighted namely, learned resourcefulness as a personality repertoire and learned resourcefulness as self-controlled behaviour.

• **Learned resourcefulness as a personality repertoire**

Learned resourcefulness is not a personality trait, but a personality repertoire, which is a set of complex behaviours, cognitions and effects that an individual uses when confronted by situations that call for self-control. The repertoires are not only in constant interaction with the person's physical and social environment and are evoked by many situations, but also provide the basis for further learning

(Rosenbaum & Palmon, 1984). Individuals may differ in the extent to which they have acquired the basic behavioural repertoire of learned resourcefulness. For example two individuals who have to go for an interview and who are equally anxious may differ in their resourcefulness. The resourceful individual may employ various repertoires to minimise the effects of his/her anxiety while the less resourceful individual may succumb to his/her anxiety (Rosenbaum & Jaffe, 1983).

- **Learned resourcefulness as a self-controlled behaviour**

Learned resourcefulness is an effective repertoire of self-controlled behaviour (Rosenbaum & Ben-Ari, 1985). By using acquired repertoires of behaviours and skills, the individual self-regulates internal responses that interfere with desired responses. Thus an individual will pursue the initial goal, despite breakdown or anxiety using self-statements about self-control such as "get a grip of yourself." Effective self-control behaviour may help subjects to sustain goal-directed behaviour even when external reinforces are not available or are non-contingent and negative.

3.2.4   Potency (Ben-Sira)

The term potency as a salutogenic construct is viewed by Ben-Sira as a mechanism that prevents the tension which follows occasional inadequate coping from turning into lasting stress (Strümpfer, 1990). According to Ben-Sira (1989), the crucial question which needs to be asked is: "if the resources at the disposal of a person were inadequate for meeting of demands, how then will they have the power of restoring the homeostasis which they were unable to maintain in the first place?" Thus, this concept of potency is introduced as a stress-buffering mechanism which will limit the homeostasis-disturbing impact of an occasional failure in meeting a demand because of resource inadequacy.

Thus, potency implies that a person has enduring confidence in his own capacity as well as confidence in and commitment to his/her social environment, which is perceived as being characterised by a basically meaningful and predictable order and by a reliable and just distribution of rewards.

• Coping and homeostasis

There are two stages in the coping process namely: the primary stage of responding to a demand upon confrontation with it, and the secondary stage of restoring homeostasis if coping in the initial stage was inadequate. Moreover, there has to be a homeostasis-stabilising mechanism over and above the normal resources of individuals that is sufficiently powerful to moderate the impact of inadequate coping, hence preventing occasional disturbances of emotional homeostasis from deteriorating into stress (Ben-Sira, 1989). For example, the tension of an individual following failure on a driver's test should consider the following: What are the factors that will generate second thoughts evoking a feeling that ultimately things will work out reasonably well? On the other hand, what are the factors that will convince the individual that he/she is a failure, and thus aggravate his/her tension to turn into lasting stress?

• **Potency as a stress-buffering link in the coping process**

A crucial question that needs to be asked here is, if the initial resources were inadequate for maintaining homeostasis, how could they become efficacious in its restoration, considering the greater effort needed for restoring than maintaining homeostasis in the face of stressors?

A possible answer to the above question is that environmental resources such as social support could most definitely serve as a stress-buffering link in the coping process. Other possibilities include Antonovsky's sense of coherence, Kobasa's hardiness, Rotter's locus of control or Bandura's referral to mastery. Ben-Sira points out that it is difficult to attribute a homeostasis restoring function to these constructs in view on their initial failure in successfully meeting the demand. The best conceptualisation of a delayed tension-relieving mechanism would be to view it as a feeling of potency – a sensation resulting from a successful coping experience in the past.

An underlying basic sense of self-confidence in one's capacity to overcome the demands of life is not viewed in isolation from the environment and coping is considered as a product of interaction between the individual and his/her environment (Ben-Sira, 1985;1989). Thus potency comprises the mechanisms of self-appreciation and commitment to society as well as a perception of society as meaningful and ordered.

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3.2.5 Locus of control (Rotter)

Locus of control and coping has been predominant throughout the past two decades, reflecting the more general impact of the locus of control construct.

Julian B. Rotter devised the concept of locus of control which involves individual differences in beliefs about control and reinforcement (Cartwright & Cooper, 1996). Individuals with an internal locus of control perceive personal mastery over outcomes, that is, they perceive that situational outcomes are contingent upon their own actions. Individuals with an external locus of control perceive that reinforcements are due to external factors, that is, they perceive situational outcomes as dependent of chance, fate or actions of others (Sullivan, 1993).

Because individuals with a high internal locus of control believe that they are able to control stressors they encounter, their perception of the threat they pose is lessened. Generalised control expectancies affect the individual's ability to cope with novel and ambiguous situations. High internals are more likely to appraise such situations as controllable, whereas externals will tend to doubt their self-efficacy to deal with the situation effectively. Thus, in terms of coping behaviour, it is suggested that compared with externals, internals will display a bias for action and are more likely to adopt active-problem solving behaviours (i.e. overt behavioural attempts made by the individual to deal directly with the stressful event) (Cartwright & Cooper, 1996).

In addition, the concept of locus of control may be divided under four headings namely: internality as a reflection of the objective situations, internality and culture, the concept of powerful others and responsible versus defensive internality (Antonovsky, 1991).

- **Internality as a reflection of the objective situation**

There is a close relationship in an individual's locus of control and his/her objective situation. When an individual's world is overwhelmingly controlled by hostile powerful others for example, then, because it is truly more functional in the long run, he/she comes to have externalized beliefs. From this one learns that such beliefs indeed facilitate survival (Antonovsky, 1991). Rotter (1992), confirms that objective

situations such as severe aversive or traumatic events clearly form part of the origin of locus of control, but he emphasizes that the attribution of external or internal causality involves something more than just expectations that an individual can or cannot control events.

- **Internality and culture**

There seems to be some sort of relationship between the individual's locus of control, be it internal or external and how he/she views the world (Rotter, 1966). Some cultures foster and castigate internality as it is understood in western society. This is often caused by rules laid down by culture with the subsequent result that individuals believe that if they follow the rule, whatever their substance, things will work out well. However, in other cultures there is room for the individual to affect his/her environment and fate (Antonovsky, 1991).

- **The concept of powerful others**

There is a clear link between the question of culture and the 'powerful others'. The individual often feels unable to control his/her own destiny because " he sees himself as a small cog in a big machine and at the mercy of forces too strong or too vague to control" (Rotter, 1966: 3). There are some family structures and health care settings, which could encourage proactive or passive behaviour. Growing up and living in such socio-cultural settings might well foster strong 'powerful other' beliefs, which correlate positively with externality.

- **Responsive versus defensive internality**

An important question that must be asked here is "which is the cognitive foundation of internal well-being – a sense of personal responsibility or a sense of self-justification?" (Antonovsky, 1991). Thus, internality could facilitate coping with stressors because it means taking credit for good outcomes while rejecting blame for unfortunate ones (defence). It could also do so because it expresses a willingness to assume responsibility, whatever the outcome. However, the absence of control over outcomes (self-blamers) could enhance externality (Antonovsky, 1991). On the other hand, there are the "defensive externals" who are individuals who verbally give external reasons for past failures but who clearly act

as if their behaviour will determine outcomes (Rotter, 1992).

3.2.6 Self-efficacy (Bandura)

Albert Bandura formulated the concept self-efficacy. He postulates that individuals do not behave optimally, even though they know full well what to do. This is because self-referent thought also mediates the relationships between knowledge and action. Self-efficacy is thus concerned with how individuals judge their capabilities and how, through their self-perception of efficacy, they affect their motivation and behaviour. The basic phenomenon being addressed relies on individual's sense of personal efficacy to produce and regulate events in their lives (Bandura, 1982).

Perceived self-efficacy promotes more vigorous and persistent efforts to master new tasks. Persons with higher levels of self-efficacy tend to approach challenging situations in an active and persistent style, whereas those with lower levels of self-efficacy are less active and tend to avoid such situations (Holahan, Moos & Schaefer, 1996).

Bandura (1988:1) refers to self-efficacy as individuals' belief in their capacity to mobilise cognition resources and to take action to exercise control over task demands. According to Bandura (1986) individuals have unique capacities such as symbolising, vicarious learning, forethought, self-regulation and self-reflection. By using one of these capacities one can come to achieve a high level of self-efficacy in four ways, namely performance attainments, vicarious experiences, verbal persuasion and social influence, and psychological state.

* **Performance attainments**

Performance attainments or inactive mastery refer to "doing something competently" (Antonovsky, 1991). There is no possibility of learning from a mastery experience if an individual is simply not allowed to engage in the experience by whoever or whatever is the gatekeeper of such experiences. The mastery experience, as a source of information to build self-efficacy, will be determined, not only by the availability of appropriate sources to be successful in that activity, but also by the absence of or barriers to engage in a given activity.

- **Vicarious experiences**

When we look at people around us in our daily lives "their relative statuses are guidelines for most of us, most of the time, for what we believe we can do" (Antonovsky, 1991). Thus, according to Bandura (1988) seeing people similar to oneself succeed by sustained effort, raises observers beliefs about their own efficacy. Observers benefit from seeing their role models overcome difficulties by determined coping efforts (Bandura et al, 1980).

- **Verbal persuasion and social influence**

Bandura (1986), emphasises the decisive role of those who seek to persuade others about their capabilities of performing a task. When a persuader is an expert in the matter, his/her credibility is easily accepted. If the persuader is far from the reality, his/her efforts could boomerang. The crucial issue conveyed by the mass media and reference groups, is that societal norms can only be ignored at one's own peril (Antonovsky, 1991).

- **Physiological states**

Emotions (tensions, fear) tend to bring the memory network into play. This is especially true of anxiety and stress reactions to unfamiliar or potentially aversive events. Perceptions of self-efficacy, however, affect emotional reactions as well as behaviour. Everyone has a history of emotions. If this history is one of consistent association between the emotion and coping success, arousal in the new situation is likely to be predictive of high self-efficacy. Emotions, both distressful and positive, result from real, anticipated, recollected or imagined outcomes of power and status relations. Thus emotions may be the proximal source of self-efficacy (Bandura, 1982).

3.3 CHAPTER SUMMARY

In this chapter the concept coping was defined and the different coping mechanisms were analysed. The coping mechanisms namely: sense of coherence, hardiness, learned resourcefulness, potency, locus of control and self-efficacy were explained in detail.

Herewith, the second literature review objective, namely to determine how salutogenic constructs can be used to explain coping with the types of roles is reached.

INTEGRATING WORK AND ROLE WITH COPING

The objective of this section is to determine how the salutogenic constructs can be used to integrate coping with the types of roles.

Conducting research that is integrative is important because it allows a researcher to describe and test relationships among variables and to determine the relative strength of multiple predictors (Long & Kahn, 1993). Thus the purpose of this section is to integrate coping with multiple roles.

Research on stress indicates that women are more likely than men to cope by seeking social support (potency as a stress-buffering link) or by venting their emotions (physiological states of self-efficacy). Thus, emotion focussed coping is more characteristic of women. Moreover, women are more likely than men to adopt a rationalisation/resignation coping strategy (the control component in hardiness). Also women more often than men engage in "adaptive" coping behaviours, such as planning, organising, prioritising assignments and requesting needed resources (the comprehensibility and manageability components of a sense of coherence) (Long & Kahn, 1993).

- **Gender based roles**

In society at large women are expected to be the suppliers of socio-emotional support rather than direct achievers (Long & Khan, 1993). One means of reducing the effects of gender based roles is to shift organisational power structures. Women employees can increase their power within the organisation structure if management invests more in women employees' career development at the top levels of the corporate hierarchy. Reducing structural segregation that results from perceived gender differences can also help women employees cope (internality as a reflection of the objective situation-locus of control) (Long & Khan, 1993).

Moreover, self-selection, which is an emotional and attitudinal characteristic, such as socialised commitment to less traditional gender-based roles, make it more likely for some women to combine work and family roles than others and to cope successfully with work and work-family stressors (learned resourcefulness and the challenge component of hardiness) (Long & Khan, 1993). In addition, if a

woman were distressed because she perceived herself as the target of verbal harassment from co-workers, the evaluation of her ability to reduce/eliminate the harassment through any available means (eg. complaining to a supervisor) reflects problem-focussed coping. Thus, instead of ignoring the situation, something is done about it (learned resourcefulness as a personality repertoire) (Long & Khan, 1993).

Although there are no consistent gender differences in locus of control among managers and managerial students, it is possible that locus of control and gender interact in some way, so that for women even moderate levels of internal locus of control may result in higher levels of managerial effectiveness. Women's organisational effectiveness will in the long run, undoubtedly increase their status, which will, in turn increase their interpersonal power (Long & Khan, 1993). As their interpersonal power increase, women cannot fail to become even more organisationally effective, for the ability to mobilise resources is often dependent on the ability to influence others (Long & Khan, 1993).

• **The provider role**

The role of paid worker appears to be a source of self-esteem, purposefulness and inherent interest that may serve to mitigate negative effects of other stressors for women, even under conditions of role conflict and role overload. Thus, the provider role gives women a sense of meaningfulness (sense of coherence and the commitment component of hardiness). Moreover, Frankel (1993) mentions that employed women are physically more healthier and enjoy a more positive self-image when compared to housewives (internal locus of control and self-efficacy).

In one study (Barnett & Baruch, 1985) it was found that women in different roles use different coping resources. Either they exploit satisfaction or they learn to buffer stress (learned resourcefulness). In addition, since women are more likely to earn less than their husbands, their bargaining power is lower, and they are usually left with the lion's share of family responsibility (locus of control and the control component in hardiness).

Finally, with regard to sole-provider mothers it was found that women are motivated to find employment because of their children and their hopes for their children (comprehensibility component of a sense of coherence and the control component of hardiness) (Long & Khan, 1993). Further, in coping with stress,

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single mothers accepted more responsibilities, relied more on positive reappraisals and tried to manage their time more effectively than did married mothers (the manageability component of a sense of coherence and learned resourcefulness as self-controlled behaviour) (Frankel, 1993).

• **Housewife and mother roles**

Research on women's roles as gatekeepers to their husband's involvement in family work, point to the importance of women's commitment to their homecaretaker role (sense of coherence) (Frankel, 1993). If a woman is to experience success at work and at home, it appears crucial that those on whom she relies for support encourage her strivings and applaud her accomplishment (the stress-buffering component of potency) (Crosby, 1987).

In addition, supermoms perceive themselves as "super" based on their subjective impressions of what mothers actually do, easing their guilt and anxiety about being away from their children while they are employed (self-controlled behaviour as a component of learned resourcefulness) (Emmons, et al. 1990).

BEHAVIOUR OF COPING WOMEN

Integrating the above literature findings and linking it to the research by Schabracq, Winnubst and Cooper (1996), it seems that women who are copers:

(a)   tend to interpret their environment as basically benign. That is they expect things to go well perceive the world with (optimism) and they do not expect other people to intend harm (trust others).

(b)   tend to accept setbacks and failures (and thus, stressful experiences) as normal, not necessarily indicative of their own incompetence or indicative of a basically hostile world. Negative experiences are therefore put into perspective and not personalised. They are interpreted as part of a larger experience, as having meaning beyond the present situation. Their sense of coherence seems to be relevant here, especially with regard to the dimensions of comprehensibility and

meaningfulness, as is the commitment dimension of hardiness, which includes an overall sense of purpose.

(c)   they also see life as something that can be influenced and acted upon (from an internal locus of control) and see themselves as capable of doing so (self-efficacy, the manageability dimension of a sense of coherence). Related to this is the ability to see stressful events as a challenge (the challenge dimension of hardiness, the challenge aspect of meaningful dimension of a sense coherence).

With reference to the above discussion it would seem that there is common ground between the roles that women play (the "what") on the one hand and the coping mechanisms on the other hand (the "how"). Based on the similarities between the roles that women play and the coping mechanisms, this integration will serve as the basis for the central thesis due to the fact that the empirical study centres around this integration.

Herewith the third literature review objective, namely to determine how salutogenic constructs can be used to integrate coping with the types of roles is reached.

CHAPTER 4

EMPIRICAL STUDY

The objective of this chapter is to discuss the empirical study of the research. To achieve this goal, the empirical objectives of the quantitative research, are stated finally. The population and selection of the sample for the research are discussed followed by a compilation and discussion of and motivation for the measuring battery. The data gathering and processing are then discussed, followed by the formulation of a central thesis of the research. The chapter ends with a summary.

4.1 EMPIRICAL OBJECTIVES

With reference to the research methodology, the empirical objectives for this study are given namely:

- To determine whether there is a correlation between life role experience and salutogenic constructs.

- To formulate recommendations in terms of further research and employment development.

4.2 POPULATION AND SAMPLE

The population for this research is females employed in retail organisations, schools and banks in Pretoria. From this an accidental sample (according to Kerlinger, 1986: 120, the "most frequently used" sample) of 100 was drawn. From this, a working sample of 55 responded to the invitation to participate in the research, representing 55 percent of the accidental sample. Not all of the 55 respondents completed the questionnaires fully.

The following descriptive statistics provide a profile of the respondents in terms of their qualification, occupation, religion, community and income as measured in the biographical questionnaire (Appendix).

4.2.1 Qualifications

Figure 4.1 shows the qualifications of the respondents

Figure 4.1 *Qualification of respondents (N = 52)*
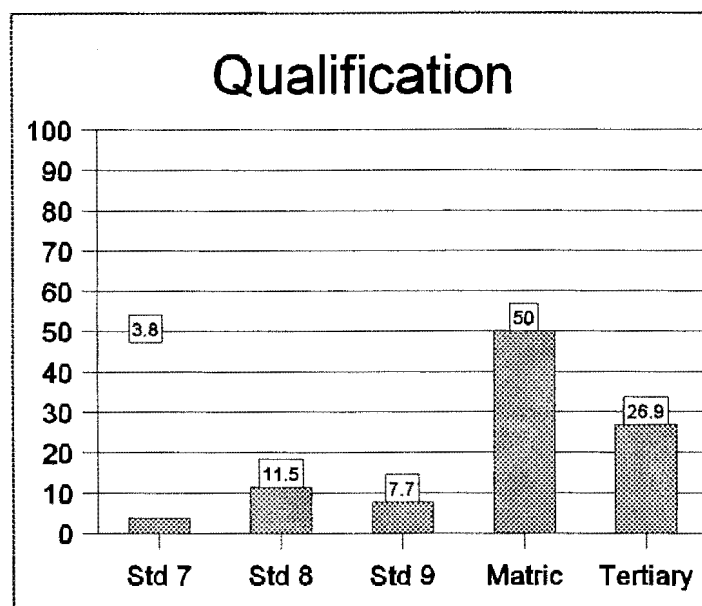
The data from figure 4.1 shows that 50 percent of the sample obtained matric, and obtained some tertiary qualification.

4.2.2 Occupation

Table 4.1 shows the occupations of the respondents

Table 4.1

Occupation of respondents (N = 52)

Occupation	Frequency	Percentage
Teacher	12	23,1
Saleslady	13	25,0
Manageress/supervisor	4	7,7

Occupation	Frequency	Percentage
Secretary/personal assistant	1	1,9
Administrative worker	2	3,8
Cashier	2	3,8
Accountant	3	5,8
Price analyst	1	1,9
Credit controller	3	5,8
Journalist	1	1,9
Self-employed	2	3,8
Data capturer	3	5,8
Wage/credit clerk	3	5,8
Receptionist	1	1,9
Bank staff	1	1,9

The data from table 4.1 shows that 23,1 percent of the sample occupy the teacher position, while 25 percent of the sample occupy a saleslady position.

4.2.3 Religion

Figure 4.2 shows the distribution of the respondent's religion.

Figure 4.2

Distribution of respondents's religion (N =53)
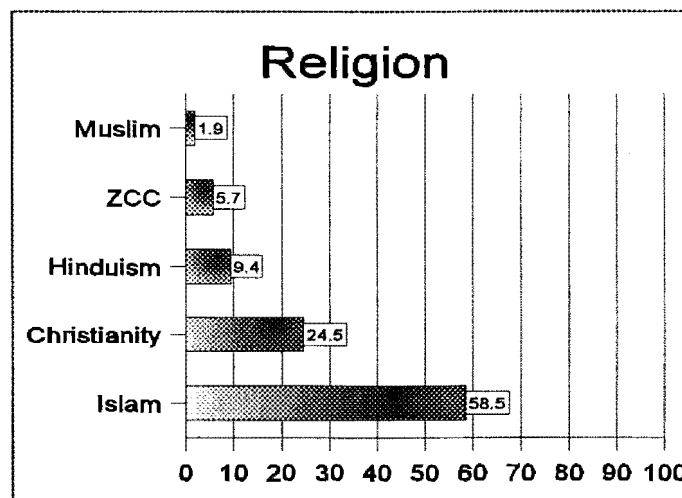
The data from figure 4.2 shows that 60,4 percent of the sample comes from the Islamic faith. This is not representative of the population.

4.2.4   Community

Figure 4.3 shows the distribution of the respondent's community.

Figure 4.3

Community (N= 29)
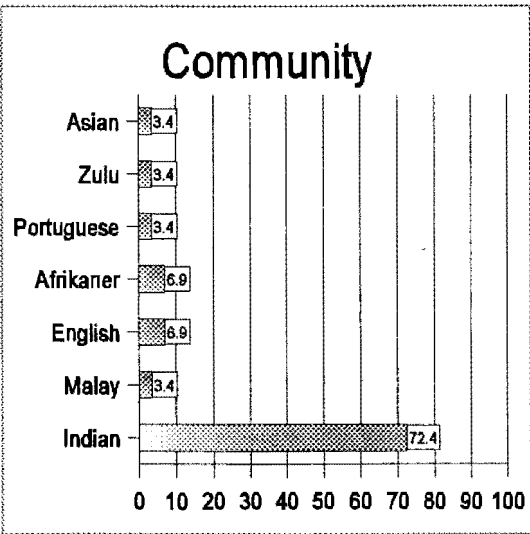
Figure 4.3 shows the distribution of the respondent's community. Most of the sample comes from the Indian community.

4.2.5   Income per month

Figure 4.4 shows the current income per individual per month of the sample

Figure 4.4

Current income per individual per month (N = 53)
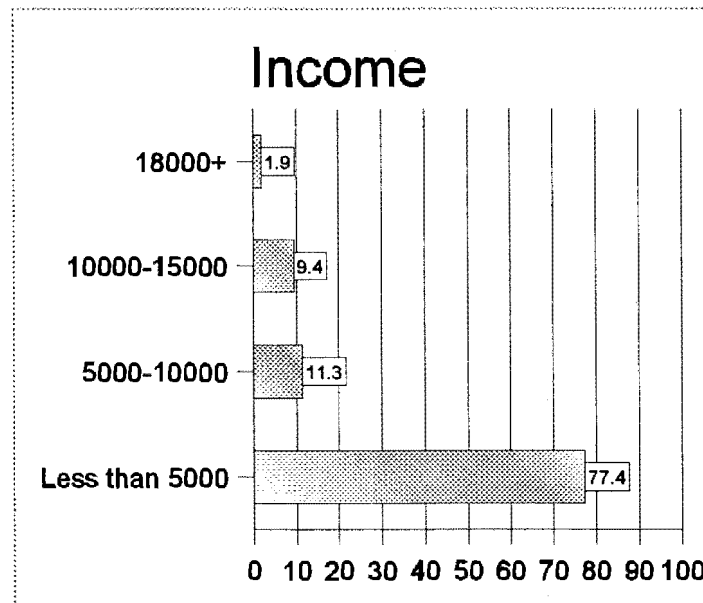
The data from figure 4.4 shows that 77,4 percent of the sample earns an income of less than R5000,00.

From the above the typical respondent in this research is an Indian lady, from the Islamic faith, who passed matric, is working as either a teacher or saleslady and earns an income of less than R5000,00 per month.

4.3   MEASURING INSTRUMENTS

The measuring instruments used for the purposes of this study include quantitative instruments measuring six salutogenic constructs and the Life Role Inventory.

These include the following: The Life Role Inventory; The Orientation to Life Questionnaire (OLQ); Personal Views Survey (PVS); Internal-External Control (I-E Scale), Self-efficacy Scale (SS); Potency

Scale (PS); and the Self-Control Schedule (SCS). The latter six instruments measure the salutogenic personality construct scores of individuals, while the Life Role Inventory measures the effects of various roles on one another.

4.3.1 Life Role Inventory (LRI)

According to Langley (1993), the LRI was developed by the HSRC with the objective to assess the relative importance of the work role in the context of life roles and the values that individuals seek through their work and other roles. A study was conducted to determine whether the LRI had acceptable psychometric properties for use in the African, Asian and Western cultures of South Africa and to perform item analysis of the LRI with a view to standardizing this instrument for South African use. The results revealed that the LRI had acceptable psychometric properties for the major language and cultural groups in South Africa (Langley, 1993).

The LRI can also be used in determining the effect of the various roles on one another. When individuals attempt to fulfill more than one role simultaneously, they might find that they have to satisfy multiple sets of expectations. For example a saleslady (worker role), taking an advanced business course (student role) and who is and active member of a welfare group (community role), might have difficulty in meeting time demands of the aforementioned roles. In addition, she may find it difficult to maintain an active relationship with her husband and children (home and family role) and thus she may have no time left for her favourite sport or hobbies (leisure role). Thus, used in conjunction with other instrument measures the LRI could help counsellors and researchers to obtain a better understanding of the variables which contribute to the nature and extent of multiple role demands (Langley, 1993: 35).

The reliability coefficients (Kuder-Richardson Formula 8) for the subscales reveal reliability coefficients higher than 0,80. In addition, the item selection process included item-scale correlations and factor-analytic procedures, designed to enhance internal consistency and appropriate scale independence (content validity). Construct and concurrent validity are shown by the intercorrelations of the scales

with each other as well as with other instruments (Langley, 1993).

• **Administration**

The LRI is a 170-item instrument divided into three components, namely participation, commitment and value expectations, each examining the importance of five life-career roles: student, worker, community service, homemaker and leisure activities. The LRI can be administered in 30 to 50 minutes depending on the educational level of the testees. The LRI can be used for high school pupils, students and adult populations in South Africa from Western, African or Asian oriented cultures. There are no correct or incorrect items on the LRI (Langley, 1993). The scale consists of ten items with five roles for each item, rated on a 4-point scale. For example a score of 1 indicates the extent to which the respondent participates in a particular activity, that is never/rarely/little or none. A score of 4 indicates the other extreme, that is, that the respondent has always/almost always/many/ a great deal participated in a particular activity. The instrument is an additive one and the items are comparable to one another (Langley, 1993).

• **Interpretation**

The LRI can be used to determine the effect of various roles on one another. The importance of life roles can be judged in three ways, namely by the behaviour of the individual, attitudes and emotions of the individual and knowledge the individual has of the different life roles (Langley, 1993).

Participation is the behavioural component of the importance of a role. It denotes action. It can be measures by the amount of time given to a particular role. Participation does not, however, measure how a person feels about a particular role, or how much the person knows about it.

Commitment is the attitudinal or the affective aspect of the importance of a role. It is emotional attachment to a role, such as one's work, and commitment to the things that one is expected to do and expects to do in the role. It is identification with the role and its activities.

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The third component of the LRI, Value Expectations, is also affective in content. It assesses that attitudes towards roles by using ratings of the degree to which major life satisfactions or values are expected to be found in the role.

The five major life roles evaluated in the LRI are the following:

(1)   *Student role.* It covers all the work one does to prepare for classes, for example, assignments and studying. It also includes any form of self-motivated study in the form of hobbies or the acquiring of new skills.

(2)   *Worker role.* A person works for a set salary or is self-employed.

(3)   *Community service role.* A person helps as a volunteer in the community.

(4)   *Homemaker role.* A person takes care of the home and family.

(5)   *Leisure role.* A person does something for fun or relaxation.

The three components of the LRI, namely participation, commitment and value expectations, each examine the importance of five life-career roles: student, worker, community service, homemaker and leisure activities, as in table 5.10. P stands for 'participation', hence PSTUDY, PWORK, PCOMM, PHOME and PLEIS. C stands for commitment, hence CSTUDY, CWORK, CCOMM, CHOME and CLEIS and V stands for values, hence VWORK, VSTUDY, VCOMM, VHOME and VLEIS.

When ipsative interpretation is used the person is only compared with him/herself (the raw scores of an individual on different subscales are compared). The total for participation, commitment and value expectations can be calculated and gives a clear indication of which role is most important to a person. If the subtotals for each of the components, that is, participation, commitment and value expectations are compared, then one obtains an indication of whether the three components are balanced (intra-role comparison). In the case of normative interpretation each score of an individual person is compared with the norms of a comparative sample (Langley, 1993).

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Antonovsky (1987b:77; 1993:725) developed the OLQ by using experimental subjects who had experienced serious irreversible trauma in their lives, such as the death of a loved one or serious financial problems. A precondition for the inclusion of any of the experimental subjects was that they had to be characterised by other people as individuals who functioned remarkably well in spite of the trauma they had experienced. The OLQ was developed to operationalise the construct sense of coherence. The higher the score on the OLQ is the stronger the sense of coherence of the respondent will be.

Moreover, Antonovsky (1993:727) reports that this instrument has been tested internationally. A consistently high correlation coefficient ranging between 0,83 and 0,93 has been reported, indicating an internal consistency and reliability of the coherence scale. The fact that a high internal consistency has been found in a considerable variety of populations, in different language groups and cultures, is of significance (Antonovsky, 1993). Another important point is that although the instrument included three sense of coherence components the internal consistency is not lowered. Furthermore, each item was included in the questionnaire only after three colleagues, familiar with the theory, had independently concurred that it indeed referred clearly to one of the three SOC components (Antonovsky, 1993). Despite the fact that construct validity varied between 0,38 and 0,72, in general the available publications on the OLQ support the validity of the scale (Antonovsky, 1993:727). In addition Antonovsky (1993) also postulates that the OLQ is based on good theory and is a sound instrument as it was empirically tested on a large scale. It also is universally meaningful, and cuts across lines of gender, social class, region and culture.

•   **Administration**

The OLQ consists of 29 five-facet items. There are 11 items measuring comprehensibility, ten manageability and eight meaningfulness. The respondent is provided with a series of 29 self-completion questions on various aspects of life and each question has seven possible answers (Antonovsky, 1998 7b, 1993). The respondent is requested to mark the number which best expresses the extent to which the

statements are applicable to him/her with number 1 and 7 being the extreme answers. Only one answer must be given to each question and there is no time limit (Antonovsky, 1987b, 1993). Moreover, the instrument is an additive one.

• **Interpretation**

The sense of coherence is a dynamic aspect of the personality which is formed throughout childhood and adolescence and it influences behaviour in such a way that consistency and stability are maximised (Sullivan, 1993). It is developed as a single dimension of the individual's personality, consisting of three interwoven components, namely: comprehensibility, manageability and meaningfulness (Antonovsky, 1991). Comprehensibility means that the individual finds a certain logic in the sequence of events (Sullivan, 1993). Manageability refers to the extent to which people perceive that resources are at their disposal and are adequate to meet the demands imposed by stimuli (Antonovsky, 1984). Meaningfulness refers to the degree of commitment one has to various life domains (Antonovsky, 1984).

A high score represents a strong sense of coherence and a person with a strong sense of coherence is less likely to perceive many stressful situations as threatening and anxiety-provoking than one with a weak sense of coherence (Antonovsky & Sagy,1986). Thus, someone with a strong SOC is more likely than someone with a weak sense of coherence to comprehend the nature and dimensions of an acute or chronic stressor and define or redefine it as one to which the individual need to succumb; to perceive stressors as manageable and therefore select appropriate resources from those under his/her own control or available from others, rather than react with helplessness; and to be motivated to approach stressors as challenges worthy of engagement and investment of energy and as promising meaningful awards, rather than threats, and then to react negatively based on self-efficacy prophecies (Strümpfer, 1990).

4.3.3   Personal Views Survey (PVS) (Kobasa)

An adapted version of Kobasa's Hardiness Questionnaire (Kobasa, 1979a), the PVS, is used for the purpose to measure hardiness. The 50-item PVS was developed by the Hardiness Institute in order to

replace the previous instruments and to prevent further problems arising from the existence of the numerous instruments. The hardiness construct was developed to clarify why some individuals under high levels of stress do not succumb to illness (Manning, Williams & Wolfe, 1988). Thus, this scale is relevant to the research since the focus lies on working women coping with multiple roles. The instrument measures individuals' ability to believe that they can control or influence the events of their experience, the ability to feel committed to the activities of their lives and to anticipate change as an exciting challenge (Kobasa, 1979b:3).

Kobasa (1979a) reported that hardiness does significantly moderate stress and illness relationships. She reports a significant correlation of 0,85 for commitment, 0,70, for challenge, which is consistent with most of the available research reports on reliability (Kobasa, 1982:6). The sub-scales of the PVS show a significant internal validity of 0,85 for commitment, 0,70 for control and 0,71 for challenge. The combination of the sub-scales showed a stable correlation of 0,61 over a period of five years.

- **Administration**

The PVS consists of 50 items. Fifteen measure commitment, 17 measure control, and 18 measure challenge. The respondent is provided with a self-completion instrument. Each question has four possible answers ranging from 0 (not at all true) to 3 (completely true). The respondents are requested to answer all statements on the basis of the way they feel at that moment. The instrument is an additive one (Kobasa, 1982).

- **Interpretation**

Hardiness is an individual predisposition which has been found to moderate the impact of stress (Sergay, 1990). Three existential concepts were chosen as integral to the stress resistance resource of hardiness, namely commitment, control and challenge (Kobasa, 1979a). The commitment component of hardiness incorporates the recognition of one's own goals and priorities, allowing for a valid assessment of one's self in terms of values and ability (Sergay, 1990). Control means that handy individuals believe and act

as if they influence the course of events (Kobasa, 1979b). Challenge involves seeing change as a necessary and integral part of life (Kobasa, 1979a).

A high score represents a strong sense of hardiness which serves as a predictor of the extent to which stress and illness will be buffered by hardiness (Kobasa et al, 1982). Strümpfer (1990) stated that someone with a high score is more likely than someone with a low score: to involve him/herself actively in many situations if life, for example work, family, community and leisure, the extent of involvement varies between commitment and alienation: influence the events of his/her life through what he/she imagines, say and does, with the emphasis on personal responsibility, the tendency to believe and act as if one can influence events of life varies from control to powerlessness; and view changing circumstances as an exciting challenge to further personal development, the tendency to view change rather than stability as the norm in life varies from challenge to threat.

4.3.4   Self-control Schedule (SCS) (Rosenbaum)

The SCS is used for the purposes of this empirical study to measure learned resourcefulness. Rosenbaum set out to develop the SCS as the assessment of individual differences in the ability to employ self-control procedures had been given very little attention in the literature. The objective of the SCS is to assess individuals' tendencies to apply self-control methods to the solution of behaviourial problems (Rosenbaum, 1989). Since these methods refer to coping skill, they thus appear to be a useful instrument to assess the coping skills used by working women in their multiple role environment. The SCS includes the use of cognitions to control emotional and psychological responses, the application of problem-solving strategies, the ability to delay immediate gratification and a general belief in ones ability to self-regulate internal events (Rosenbaum & Palmon, 1984).

Rosenbaum and Palmon (1984: 246) established the reliability of the SCS in a number of studies involving more than 600 subjects. Test-retest reliability after four weeks indicated that the SCS is fairly stable over time (r=0,96). An alpha coefficient computed on six different samples of subjects ranged from 0,78 to 0,86, indicating high internal consistency among the items. Moreover, Rosenbaum (1990:

115) postulates that the validation of the SCS is a complex task as self-control behaviours, are mostly covert and must be inferred from the behaviour of individuals under specific circumstances, or from self-reports. Criterion-related validity was determined by comparing test scores of experiments that were run by experimenters not associated with the actual development of the instrument, and in a context unrelated to previous experiments. Moreover, the convergent and discriminant validity of the SCS was examined by comparing scores obtained on a number of existing scales such as Rotter's I-E scale. Thus, the SCS was found to be a valid instrument for assessing learned resourcefulness (Rosenbaum & Ben-Ari, 1985).

- **Administration**

The SCS consists of 36 items of which 12 refer to the control of emotional and psychological sensations, 11 refer to the respondents' tendency to employ problem solving strategies, four relate to the respondents perceived ability to delay immediate gratification and nine are indicative of general expectations for self-efficacy. The SCS is a self-report instrument rated on a six-point scale ranging from +3 to −3. A +3 score indicates the extent to which the respondent evaluates the item as extremely descriptive of him/herself and a −3 score as extremely undescriptive and uncharacteristic of him/herself. The instrument is an additive one and items are not comparable (Rosenbaum, 1980: 113-114).

- **Interpretation**

Learned resourcefulness is an acquired repertoire of behavioural skills according to which a person self-regulates internal responses that interfere with the smooth execution of a target behaviour (Rosenbaum & Jaffe, 1983). Learned resourcefulness is a personality repertoire, which is a set of complex behaviours, cognitions and effects that an individual uses when confronted by situations that call for self-control (Rosenbaum & Palmon, 1984). By using acquired repertoires of behaviour and skills, the individual self-regulates internal responses that interfere with desired responses (Rosenbaum & Ben-Ari, 1985).

A high score represents a strong tendency of the respondent to apply self-management methods to the solution of common behaviourial problems. An individual who measures strongly on the SCS is more

likely than someone with a weak score to: use cognitions and "self-statements" to control emotional and physiological responses; apply problem-solving strategies; have the ability to delay immediate gratification; believe that he/she can control his/her own behaviour without outside help (Rosenbaum,1980; 1989: 253).

4.3.5   Potency Scale (PS) (Ben-Sira)

The potency scale is used to measure the potency constructs of individuals. Ben-Sira developed the potency scale in 1982 and considers this scale to be his first step in illuminating and additional viewpoint in the understanding of the coping-health relationship (Ben-Sira, 1985). The objectives of the potency scale are to measure self-appreciation and mastery, on the one hand, and commitment to society on the other hand. These factors are significant determinants of location and movement in the coping-stress-disease continuum (Ben-Sira, 1985: 397-399). Thus, this scale is relevant to this research.

Ben-Sira reports a correlation of 0,40 between potency and coping and between potency and homeostasis 0,43, which is a moderate indication of the reliability of the Potency Scale. The fact that a longitudinal study is required to verify the inferences of the potency scale is a weakness of the scale (Ben-Sira, 1985: 402-404).

•   **Administration**

In section 1 the respondent is provided with a series of 19 self completion questions and each question has six possible answers ranging from 1, which indicates strong agreement to 6, which indicates strong disagreement. There is no time restriction and only one answer to each question must be given. In section 2, the respondent must indicate whether a physician diagnosed any of a list of 15 diseases pertaining to the individuals health (Ben-Sira, 1985). Because this is a qualitative measurement, it was not included in the data processing of this study.

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- **Interpretation**

Potency is a mechanism that prevents the tension which follows occasional inadequate coping from turning into lasting stress (Strümpfer, 1990).

An individual strong in potency will have confidence in both him/herself and in the social environment. Thus strong potency implies that: the health of the individual will be less affected by an occasional disturbance of emotional homeostasis and the latter will be less affected by resource deficiency; the emotional stability of the individual will be less affected by failure in coping, as well as by specific resource deficiencies; and the individual will be less hesitant in mobilizing primary social support (Ben-Sira, 1985).

4.3.6 Internal-External locus of control scale (I-E scale) (Rotter)

The I-E scale (Rotter, 1966) is used for measuring the internal and external locus of control. The I-E scale was developed to measure the extent to which the individual perceives that events are contingent upon his/her own behaviour or his/her own relatively permanent characteristics. This belief is termed internal control. As far as working women are concerned, this implies that internals ought to be able to cope with the multiple roles as they have the "mastery, control and competence to deal with life" (Lefcourt, 1966: 206). This construct also measures the extent to which the individual perceives that events are not contingent upon his/her own actions but rather a result of external factors such as luck, chance, fate and powerful others. This belief is termed external control. The higher the score, the stronger the indication that the individual has an internal locus of control (Rotter, 1966: 1-10).

Research was conducted in different kinds of laboratories, with different populations and sometimes different methods of measurements and techniques. A moderated to high correlation coefficient ranging between 0,49 to 0,83 was reported. The test-retest reliability is consistent in different samples and is satisfactory. The split-half reliability also proves to be satisfactory, while an item analysis and factor analysis show a high internal consistency. Differences in means of selection populations are generally

a weak criterion of validity. If taken into account that the differences obtained for different types of populations are consistent, this is an indication of strong validity (Rotter, 1966:10-24).

- **Administration**

The respondent is provided with a self-completing instrument and requested to select one statement of each pair of which he/she strongly believes to be more true. It is pointed out that there is no right or wrong answers and the respondent must be sure to select the one he/she believes to be the case as far as he/she is concerned (Rotter, 1966). The instrument is an additive one and items are not comparable.

- **Interpretation**

Locus of control involved individual differences in beliefs about control and reinforcement (Cartwright & Cooper, 1996). Individuals with an internal locus of control perceive that situational outcomes are contingent upon their own actions, while individuals with an external locus of control perceive situational outcomes as dependent of chance, fate or actions of others (Sullivan, 1993).

Individuals who believe strongly that they can control their own destiny and thus score highly on internal locus of control, are likely to: be more alert to those aspects of the environment that provide useful information for future behaviour; make an effort to improve environmental conditions; place great value on skill or achievement reinforcement and are more concerned with their abilities, particularly their failures; and resist subtle attempts to influence them (Rotter, 1966: 28).

4.3.7 Self-efficacy scale (SS) (Bandura)

Individuals often do not behave optimally even though they know full well what to do. This is because self-referent thought also mediates the relationship between knowledge and action. The self-efficacy scale is concerned with how people judge their capabilities and how self-percepts of efficacy affect their

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motivation and behaviour. Furthermore, this scale is relevant to this study since it is a vital dimension of working womens' salutogenic strengths, thus affecting their coping ability.

The Cronbach alpha reliability coefficient of 0,71 and 0,86 were obtained when tested by the JCJ mine in Johannesburg (Marais, 1997). Reports from the company are that the reliability of the instrument is satisfactory for research purposes (Marais, 1997). Items were constructed to cover the behavioural implications of self-efficacy, assuring content validity. Results confirmed the hypothesized relationships between scores on the self-efficacy sub-scales and other personality constructs, as well as criteria of past successes in a variety of areas. These results provide evidence of the construct and the criterion validity of the scale.

- **Administration**

The self-efficacy instrument consists of 27 items based on the respondents' attitude to and feelings they might have about a variety of tasks. The sum total of the items is an indication of self-efficacy. The respondent is asked in a self-completion instrument to indicate the extent to which he/she agrees/disagrees with each of the 27 statements on a scale of 1 to 7. A score of one indicates that the respondent agrees completely and a score of seven is an indication that the respondent disagrees completely (Bandura, 1989).

- **Interpretation**

Self-efficacy is concerned with how individuals judge their capabilities and how, through their self-perception of efficacy, they affect their motivation and behaviour (Bandura, 1989).

When interpreting, the total score is used as an indication of self-efficacy. The stronger the self-efficacy, the bolder the behaviour of the individual will be. An individual who is strong in self-efficacy is more likely than someone with a weak perception of self-efficacy to: be motivated to do things competently;

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withstand failures by viewing tasks as challenges rather than concentrating on his/her shortfalls; deploy attention and effort to the demands of a given situation; and be spurred on to greater efforts by obstacles (Bandura, 1989).

4.4   DATA GATHERING

A discussion of the data gathering and processing in terms of the quantitative procedures will follow.

One of the most important considerations in descriptive statistics is to collect accurate data on the domain phenomena under investigation (Mouton & Marais, 1990).

Respondents voluntarily participated in the research and information on personal and psychological variables were obtained from the biographical questionnaire.

The psychometric battery comprising the eight questionnaires and answer sheets were bound together in a booklet. The respondents were assessed under exactly the same conditions and following exactly the same procedures. Clear oral instructions, defined time limits, rapport and a standard psychometric environment were provided for the sample (Anastasi, 1990). The other respondents (about 2 percent) who did not want to be assessed at work took their booklets home. The telephone number of the researcher was left on the booklet in case any problems arose.

Once the data had been gathered it was analysed statistically.

4.5   DATA PROCESSING

Data processing includes the reliability analysis of questionnaires, correlation and factor analysis on the psychometric data as well as the biographical data.

4.5.1   Reliability analysis of questionnaires

The present study calculates the Cronbach Alpha coefficient as a measure of the internal consistency reliability of each of the scales (the sub-dimensions of the various scales) (Lemke & Wiersman, 1976). Before this can be done however, a decision must be taken as to the direction in which an item is scaled. Thus, a single factor was extracted using the factor analysis technique. The following basic strategy was used when studying the factor loadings:

- If some items loaded negatively while others loaded positively, a decision was taken as to which items should be reverse scored so that all items are positively inter-correlated and a high score on the test are indicative of positive "health."

- Items with loadings smaller than 0,1 in absolute size were excluded. This criterion could easily have been 0,25 or 0,30 but because of the small sample size and the fact that the selected scales are established tests which have been used by other researchers, a conservative approach was used so that items were not easily excluded.

- Once items were selected and all were scaled in the correct direction, a Cronbach Alpha coefficient was computed as an index of the internal consistency reliability of the scale.

- Finally, a scale total score was computed for each scale by computing a respondent's mean score on all the items comprising a particular scale. Thereafter, this total score was mathematically rescaled to score from 0 to 100. The latter step was necessary to facilitate the comparison of

mean sample scores across different scales. In the case of the LRI stanine scores were also calculated to make a comparison with the standardization group possible.

4.5.2   Correlation

In this study Pearson product moment correlations (Hays, 1981) are calculated between variables which are measured on a continuous scale. A correlation statistic varies between –1 (a perfect negative correlation) and +1 (a perfect positive correlation). The closer the value is to 0, the more certain the researcher is that there is no correlation between the two constructs involved.

In the present study, correlations are computed between the following variables:

- Correlations between the items of a scale as part of the procedure analysis and reliability analysis. The correlations are not reported however. The correlations are not reported however, because the actual intercorrelation between every pair of items was not the goal of the study.

- Correlations are also computed between the salutogenic constructs and lifestyle factors.

Conventionally, the levels 0,05 and 0,01 are used by most researchers as levels of significance for statistical tests performed. In choosing a level of significance for the present study, the following view points were taken into account:

- In the human sciences, one is as concerned with missing a significant result or making a type-II error as one is about falsely concluding a significant result. Hays (1981) and Winer (1971) point out that when both types of errors (type I and II) are equally important, significance levels such as 0,20 are more appropriate than the conventionally used 0,05 and 0,01 levels.

- As the total number of statistical test to be performed on the same sample increase, the

probability of a type I error also increases. One approach to counter this accumulating effect is to set the level of significance smaller for the individual statistical test so as to compensate for the overall type I error effect. Say the overall research significance level is 0,30, then the significance level for the individual test might be 0,05 or 0,01. There is no easy way to come to a decision as to what exactly this level of significance should be.

- The sample size of the present study is on the small side (N=55) so that statistical tests lack power (the ability to detect significant results) (Hays, 1981).

In view of all these considerations, it was decided to use a significance level of 0,05 for any one particular statistical test in the present study.

4.5.3 Factor analysis

An appropriate statistical technique for the investigation of the underlying structure of a questionnaire, is "factor analysis" (Kerlinger, 1984). Factor analysis is especially useful when the purpose is to uncover dimensions in a questionnaire. Those items that refer to the same dimension or share the same dimension, should correlate highly with one another and factor analysis uses this to uncover factors or dimensions. On the other hand, if all the items of Antonovsky's three subscales namely comprehension, manageability and meaningfulness should be subjected to a factor analysis one would expect that factor analysis would identify three factors, that is three sub-dimensions.

Kerlinger (1986: 56), describes factor analysis as follows:

"Factor analysis serves the cause of scientific parsimony, It reduces the multiplicity of test or measures to greater simplicity. It tells us, in effect what test belong together – which ones virtually measure the same thing, in other words, and how much they do so. It thus reduces the number of variables with which the scientist must cope. It also helps the scientist locate and identify unities or fundamental

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properties underlying tests and measures."

In the present study, factor analysis is used as an exploratory and descriptive tool in view of the small sample size. Special care is taken to consider results more as suggesting hypothesis, rather than testing hypothesis. Nevertheless, as results make theoretical sense or confirm theoretical notions one might have had prior to the study, scientific progress is being made.

In the present study factor analysis is used for the following purposes:

- *Item analysis of sub-scales*

The items of subscales such as Antonovsky's "comprehension" are subjected to factor analysis and a single factor forced so that the performance of the items can be evaluated. The question to be answered is: do all the items belong to a single factor or dimension?

- *Relationships between the salutogenic and LRI constructs*

Although Pearson product moment correlations give the direct relationship between any two constructs, it is difficult to make sense from a large correlation matrix. This refers to factor analysis which can again play an important role as it can help identify possible dimensions underlying the correlations between the constructs. Again, the researcher is mindful of the small sample size and views results in an exploratory and descriptive size.

The factor analysis program PROC FACTOR of the statistical software package SAS (Statistical Analysis Systems) was used. The method of factor analysis used was Principle Factor Analysis (Mulaik, 1972).

The steps followed in the factor analysis were as follows:

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(1)   First a matrix on inter-correlations between variables are constructed.

(2)   Secondly, a decision is made on the number of factors (dimension) to be extracted. (This was not
        necessary in the case of the item analysis of sub-scales as the researcher forced a single-factor
        solution on to the data.)

        For the latter purpose, the eigenvalues associated with underlying factors, are plotted against the
        factors numbers and Cattell's so-called "scree test" (Glass & Stanley, 1970) was performed
        which involved studying the scope of the plotted eigenvalues. The "eigenvalue" of a factor
        indicates the amount of variance that factor explains of the data. The larger the eigenvalue of a
        factor, relative to the size of the eigenvalues of the other factors, the more variance the factor
        explains. Cattell (Glass & Stanley, 1970) suggested that one extract factors that account for the
        majority of the variability in the original data. An inspection of the eigenvalues usually reveals
        that the initial drop in the eigenvalues of the first one or two consecutive factors (factor 1 and
        2 for instance) is large but grows less and less as more factors are considered. When the drop
        in eigenvalues appears to have become insignificant one should note the number of the factor
        where this happens. This then gives a clue as to the number of factors to be extracted.

(3)   Finally, the factor solutions are rotated obliquely according to the promax criterion (Cureton &
        Mulaik, 1975) to obtain interpretable solutions. The promax oblique rotation results in two
        factor solution matrices namely a "structure" and a factor pattern solution matrix. The values
        in these factor solution matrices are called factor loadings and lies the regression of the items on
        the factors in the case of the factor structure, and the correlations between original items and
        derived factors in the case of the factor pattern. In the present study only the factor structure
        matrices are reported as these are sufficient for the purposes of interpreting the factors. These
        regression coefficients will also be referred to as factor loadings. By studying all those items that
        have high loading on a particular factor, and asking oneself what the "common" nature of these
        items are, one might be able to infer the nature of the factor. In the present study all factor

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loadings =>0,25 are considered significant. This cut-off point of 0,25 is to a large extent arbitrary and possibly too lenient as most researchers appear to use 0,30 as the cut-off.

4.6 CENTRAL HYPOTHESIS OF THE RESEARCH

Next, the central thesis for the research is formulated.

The literature integration of chapter 3 between multiple roles and the salutogenic constructs, indicated that certain similarities existed between the life/roles and the salutogenic constructs. Therefore, the purpose of the central thesis is to confirm the relationship and to indicate to what extent this relationship actually exists. Thus, the central thesis, serving as the guideline for this research is:

There is a relationship between the strength of working women's salutogenic construct scores and their ability to cope with multiple roles.

4.7 CHAPTER SUMMARY

In this chapter the empirical objectives were formulated after which the population and sample have been discussed. The measuring battery, the procedures and statistical techniques were also discussed. The chapter concluded with the formulation of a central thesis of the research.

Herewith, the first empirical objective, namely: To determine, whether there is a correlation between life role experience and salutogenic constructs is reached.

CHAPTER 5

RESULTS

The objective of this chapter is to report as well as to interpret the results. The findings will be presented according to the various statistical procedures used.

5.1 REPORTING OF RESULTS

Reliabilities of the LRI factors and the salutogenic constructs, correlations and factor analysis are given. Personal and psychological results are also provided at the end of the chapter.

5.1.1 Reliability of the measuring instruments

The results of the reliability of the salutogenic constructs and LRI factors follow.

5.1.1.1 Reliability of the salutogenic constructs

The tables that follow indicate the reliability of the salutogenic constructs.

- *Sense of coherence (Antonovsky)*

Table 5.1 shows the single factor loadings and Cronbach Alphas of Antonovsky's dimensions: comprehension, manageability and meaningfulness.

Table 5.1

Single factor loadings and Cronbach Alphas of Antonovsky's dimensions of SOC

(51≤ N ≤ N52)

Comprehension		Manageability		Meaningfulness	
Item	Factor loading	Item	Factor loading	Item	Factor loading
1	0,42	2	0,39	4	0,38
3	0,39	6	0,60	7	0,68
5	0,54	9	0,78	8	0,53
10	0,76	13	0,80	11	0,49
12	0,76	18	0,73	14	0,75
15	0,72	20	0,49	16	0,67
17	0,26	23	0,27	22	0,56
19	0,61	27	0,79	28	0,72
21	0,76	29	0,67		
24	0,82				
26	0,4				
Cronbach Alpha = 0,83		Cronbach Alpha = 0,80		Cronbach Alpha = 0,74	

The data from table 5.1 shows the highest and lowest scores of the three variables: 0,82 and 0,26 for comprehension; 0,80 and 0,27 for manageability and 0,75 and 0,38 for meaningfulness (51 ≤ N ≤52).

• *Personal views survey (Kobasa)*

Table 5.2 shows the single factor loadings and Cronbach Alpha's of Kobasa's Personal Views Survey according to the following dimensions: commitment/alienation; control/powerlessness and challenge/threat.

Table 5.2

Single factor loadings and Cronbach Alphas of Kobasa's Personal views survey dimensions

(34 ≤ N ≤ 48)

Commitment/ alienation		Control/ powerlessness		Challenge/ threat	
Item	Factor loading	Item	Factor loading	Item	Factor loading
1	-0,45	3	0,31	2	0,07
8	0,54	4	0,70	6	0,37
11	0,02	5	0,49	9	0,35
14	0,75	7	-0,32	12	0,41
17	0,66	10	0,12	15	0,18
20	0,28	13	-0,30	18	0,46
23	-0,39	16	-0,51	21	0,12
26	-0,31	19	-0,58	24	0,22
29	0,43	22	0,52	27	-0,46
32	0,72	25	0,72	30	0,76
38	0,79	28	0,24	33	0,43
39	0,54	31	0,52	36	0,60
44	0,64	34	-0,68	37	0,55
47	0,61	35	-0,34	40	0,36
50	0,46	42	-0,24	43	0,53
		45	-0,41	46	0,35
		48	0,00	49	0,60
Cronbach = 0,82[1] Alpha		Cronbach = 0,74[2] Alpha		Cronbach = 0,72[3] Alpha	

1   Item excluded is 11 and items reversed scored are 1, 23 and 26

2   Item excluded is 48 and items reversed scored are 7, 13, 16, 19, 24, 35, 42, 45

3   Item excluded is 2 and item reversed scored is 27

The data from Table 5.2 shows the highest and lowest scores for the three variables: 0,79 and –0,31 for commitment/alienation, 0,72 and –0,24 for control/powerlessness and 0,76 and –0,46 for challenge/threat.

- *Self-control questionnaire (Rosenbaum)*

Table 5.3 shows the single factor loadings and Cronbach Alphas of Rosenbaum's self-control questionnaire (N = 42).

Table 5.3

Single factor loadings and Cronbach Alpha of Rosenbaum's self-control questionnaire (N = 42)

Item	Factor loading
1	0,40
2	0,30
3	0,56
4	-0,20
5	0,50
6	-0,26
7	0,43
8	0,03
9	-0,41
10	0,31
11	0,81
12	0,62
13	0,75
14	0,02
15	0,78
16	-0,23
17	0,67
18	-0,30

19	-0,49
20	0,44
21	-0,21
22	0,63
23	0,66
24	0,63
25	0,80
26	0,67
27	0,62
28	0,49
29	-0,03
30	0,45
31	0,84
32	0,72
33	0,54
34	0,57
35	-0,23
36	0,26
Cronbach Alpha = 0,91*	

- Items excluded are 8, 14, and 29 while items 4, 6, 9, 16, 18, 19, 21 and 35 are reversed scored so that all the items measure in the same direction and a high score indicates high "self control".

Item 11 has a high score of 0,81, while item 29 has the lowest score of –0,03.

- *Potency scale (Ben-Sira)*

Table 5.4 shows the single factor loadings and Cronbach Alphas of Ben-Sira's Potency scale.

Table 5.4

Single factor loadings and Cronbach Alphas of Ben-Sira's Potency scale,

part I and II (N = 55)

Potency part I		Potency part II	
Item	Factor loading	Item	Factor loading
1	0,40	1	0,30
2	0,55	2	0,58
3	-0,24	3	0,75
4	0,51	4	0,68
5	-0,62	5	0,96
6	0,74	6	0,85
7	0,66	7	0,61
8	0,64	8	0,56
9	-0,07	9	0,73
10	0,05	10	0,82
11	0,22	11	0,70
12	0,47	12	0,96
13	0,27	13	0,96
14	0,63	14	0,73
15	0,32	15	0,72
16	0,57		
17	0,67		
18	0,48		
19	0,46		
Cronbach Alpha = 0,82*		Cronbach Alpha = 0,91	

•   Items rescaled are 3 and 5 while items excluded are 9 and 10

Item 6 in potency part I have a score of 0,74, while items 5, 12 and 13 in potency part II have a higher score of 0,96.

•   *Locus of control (Rotter)*

Table 5.5 shows single factor loadings and Cronbach Alphas of Rotter's Locus of control (N = 54).

Table 5.5

Single factor loadings and Cronbach Alphas of Rotter's locus of control (N = 54)

Item	Factor loading
2	0,48
3	0,32
4	-0,52
5	0,36
6	0,26
7	-0,03
9	-0,05
10	0,29
11	0,17
12	-0,38
13	-0,43
15	0,07
16	-0,09
17	0,56
18	0,31
20	0,11
21	0,10
22	-0,58
23	0,44
25	-0,23
26	0,38
28	-0,50
29	0,59
Cronbach Alpha = 0,68[1]	

• Items excluded are the fuller items 1, 8, 14,19 and 24 as well as items 7, 9, 15 and 16 while rest of items scaled in same direction so that a high score on the scale indicates internal Locus-of-Control.

The highest score here is 0,59, obtained by item 29, while item 7 reflects the lowest score of –0,03.

• *Self-efficacy scale (Bandura)*

Table 5.6 shows single factor loadings and Cronbach Alphas of Bandura'a self-efficacy scale (N = 45).

Table 5.6

Single factor loadings and Cronbach Alphas of Bandura's self-efficacy scale (N = 45)

Item	Factor loading
1	-0,01
2	-0,34
3	0,71
4	0,66
5	0,66
6	0,71
7	0,65
8	0,73
9	0,04
10	-0,20
11	-0,38
12	-0,08
13	0,42
14	0,67
15	0,79
16	0,34
17	0,73
18	0,42
19	0,62
20	0,63
21	0,70
22	-0,02
23	0,39
24	0,35
25	0,14
26	0,07
27	0,28
Cronbach = 0,89* Alpha	

- Items excluded are 1, 9, 12, 22 and 26 and items reversed scored are 2,10 and 11 so that all items measure in the same direction and a high score indicates high "self-efficacy".

Table 5.6 shows single factor loadings and Cronbach's Alphas and Bandura's self-efficacy scale (N = 45).

5.1.1.2   Reliability of the LRI factors

The tables that follow indicate the reliability of the LRI factors.

Table 5.7 shows single factor loadings and Cronbach Alphas for the "Participation" scale of the LRI (47 $\leq N \leq 51$).

Table 5.7

Single factor loadings and Cronbach Alphas for the "Participation" scale of the LRI (47 $\leq N \leq 51$)

Items	Factor loading				
	Studying	Working	Community service	Home and family	Leisure activities
A	0,73	0,16	0,74	0,57	0,80
B	0,44	0,34	0,78	0,64	0,56
C	0,86	0,56	0,80	0,67	087
D	0,81	0,33	0,74	0,71	0,76
E	0,63	0,09	0,86	0,80	0,71
F	0,84	0,66	0,86	0,82	0,89
G	0,88	0,78	0,89	0,69	0,91
H	0,62	0,78	0,84	0,65	0,86
I	0,85	0,62	0,83	0,70	0,87
J	0,81	0,58	0,74	0,78	0,80
Cronbach Alpha	0,91	0,70	0,94	0,88	0,94

The data from table 5.7 shows the highest and lowest scores for the five variables: 0,88 and 0,44 for studying; 0,78 and 0,09 for working; 0,89 and 0,74 for community service; 0,82 and 0,57 for home and family and 0,91 and 0,56 for Leisure activities. The high Cronbach Alpha score denotes a high internal reliability.

Table 5.8 shows single factor loadings and Cronbach Alphas for the "Commitment" scale of the LRI (47 $\leq$ N $\leq$ 51).

Table 5.8

Single factor loadings and Cronbach Alphas for the "Commitment" scales of the LRI (47 $\leq N \leq 51$)

Items	Factor loading				
	Studying	Working	Community service	Home and family	Leisure activities
A	0,84	0,61	0,76	0,56	0,78
B	0,87	0,61	0,76	0,59	0,87
C	0,76	0,59	067	0,74	0,76
D	0,80	0,78	0,89	0,74	0,86
E	0,85	0,64	0,80	0,81	0,86
F	0,83	0,62	0,79	052	0,85
G	0,89	072	0,77	0,81	0,83
H	0,60	0,64	0,78	0,74	0,69
I	0,89	0,60	0,80	0,34	0,82
J	0,89	0,55	0,90	0,61	0,88
Cronbach Alpha	0,94	0,83	0,93	0,85	0,94

The data from table 5.8 shows the highest and lowest scores for the five variables: 0,89 and 0,60 for studying; 0,78 and 0,55 for working, 0,90 and 0,67 for community service; 0,81 and 0,34 for home and family and 0,88 and 0,69 for leisure activities. The high Cronbach Alpha score denotes a high internal reliability.

Table 5.9 shows single factor loadings and Cronbach Alphas for the "value expectation" scale of the LRI $(47 \leq N \leq 51)$.

Table 5.9

Single factor loadings and Cronbach Alphas for the "Value expectation" scales of the LRI

(47 ≤ N ≤ 51)

Items	Factor loading				
	Studying	Working	Community service	Home and family	Leisure activities
A	0,85	0,80	0,67	0,57	0,74
B	0,82	0,78	0,81	0,72	0,81
C	0,81	0,68	0,74	0,72	0,78
D	0,81	0,56	0,84	0,63	0,58
E	0,87	0,62	0,87	0,56	0,90
F	0,82	0,65	0,87	0,75	087
G	0,87	0,69	0,85	0,66	0,90
H	0,78	0,70	0,78	0,73	0,89
I	0,87	0,83	0,86	0,67	0,88
J	0,89	0,77	0,84	0,72	0,88
K	0,76	0,30	0,84	0,67	0,77
L	0,83	0,70	0,84	0,63	0,78
M	0,80	0,59	0,91	0,61	0,81
N	0,81	0,85	0,77	0,71	0,82
Cronbach Alpha	0,96	0,91	0,96	0,90	0,96

The data from table 5.9 shows the highest and lowest scores for the five variables: 0,89 and 0,76 for studying; 0,85 and 0,30 for working; 0,91 and 0,67 for community service; 0,75 and 0,56 for home and family and 0,90 and 0,58 for leisure activities. The high Cronbach alpha score denotes a high internal reliability.

5.1.2 Correlations

The table that follows indicates the correlation of the liferole factors with the salutogenic constructs.

Table 5.10

Correlations of salutogenic constructs with lifestyle factors

Liferole factors	Salutogenic constructs										
	COMPREH	MANAGE	MEANING	BANDURA1	POTENCYA	POTENCYB	COMMIT	CONTROL	CHALLENGE	SCS	LOC
PSTUDY	0,33[1]	0,14	0,29	0,41	0,16	0,03	0,00	0,07	0,04	0,37	0,29
	0,015	0,315	0,030	0,002	0,250	0,782	0,989	0,595	0,747	0,005	0,034
PWORK	0,14[2]	0,18	0,15	0,35	0,16	0,10	0,16	0,29	-0,05	0,45	0,13
	0,289	0,189	0,255	0,008	0,235	0,439	0,247	0,031	0,678	0,000	0,318
PCOMM	0,08	-0,01	0,12	0,40	0,05	0,01	-0,08	0,13	0,07	0,34	0,16
	0,537	0,920	0,387	0,002	0,698	0,919	0,567	0,324	0,57	0,012	0,249
PHOME	-0,15	-0,24	-0,20	0,19	0,06	0,03	0,06	0,07	-0,21	0,23	0,11
	0,274	0,075	0,144	0,154	0,648	0,814	0,634	0,593	0,120	0,094	0,413
PLEIS	0,22	-0,05	0,02	0,19	0,07	-0,10	0,00	0,07	0,35	0,45	0,52
	0,180	0,711	0,856	0,157	0,597	0,461	0,995	0,583	0,008	0,000	0,000
CSTUDY	0,07	0,13	0,14	0,50	0,19	-0,00	0,04	0,14	-0,09	0,50	0,34
	0,585	0,332	0,310	0,000	0,156	0,974	0,748	0,308	0,500	0,000	0,011
CWORK	-0,09	-0,10	-0,02	0,15	0,16	0,05	0,12	0,20	-0,11	0,27	0,18
	0,495	0,454	0,878	0,260	0,252	0,692	0,371	0,148	0,431	0,049	0,189
CCOMM	0,06	-0,03	0,03	0,41	0,14	0,11	-0,10	0,11	-0,20	0,45	0,37
	0,657	0,825	0,823	0,002	0,421	0,421	0,452	0,415	0,143	0,000	0,006
CHOME	-0,00	-0,08	-0,12	0,06	0,15	0,12	0,04	0,10	-0,14	0,16	0,21
	0,947	0,563	0,359	0,667	0,277	0,366	0,748	0,469	0,286	0,224	0,130
CLEIS	0,04	-0,09	-0,03	0,27	0,14	-0,12	-0,00	0,17	0,40	0,52	0,50
	0,725	0,490	0,784	0,042	0,314	0,391	0,969	0,221	0,002	0,000	0,000
VSTUDY	0,06	0,08	0,07	0,48	0,17	-0,00	-0,04	0,07	-0,09	0,46	0,33
	0,633	0,530	0,615	0,000	0,214	0,964	0,738	0,598	0,494	0,000	0,014
VWORK	-0,15	-0,11	-0,07	0,18	0,03	-0,08	0,01	0,04	-0,11	0,21	0,19
	0,278	0,419	0,606	0,175	0,799	0,563	0,929	0,765	0,428	0,123	0,167
VCOMM	0,06	-0,01	-0,00	0,32	0,10	0,05	-0,08	0,05	-0,04	0,39	0,36
	0,630	0,913	0,973	0,016	0,444	0,669	0,552	0,692	0,737	0,003	0,006
VHOME	-0,02	-0,14	-0,11	0,16	0,08	-0,00	-0,08	-0,01	-0,12	0,19	0,28
	0,855	0,308	0,399	0,250	0,559	0,952	0,558	0,893	0,389	0,163	0,038
VLEIS	0,01	-0,14	-0,15	0,21	0,09	-0,13	-0,07	0,11	0,39	0,38	0,43
	0,938	0,304	0,264	0,124	0,503	0,3501	0,605	0,408	0,003	0,00	0,001

1. Correlation coefficient
2. P-value

The data from table 5.10 shows that from the p-values it can be seen that the salutogenic construct scores that correlate the strongest with the liferole factors come from the SCS scale and the I-E scale.

5.1.3 Factor analysis

The figures and tables that follow indicate the factor analysis results of the LRI factors and salutogenic constructs.

Figure 5.1 shows the scree plot of Eigenvalues of salutogenic constructs.

Figure 5.1

Scree Plot of Eigenvalues of salutogenic constructs
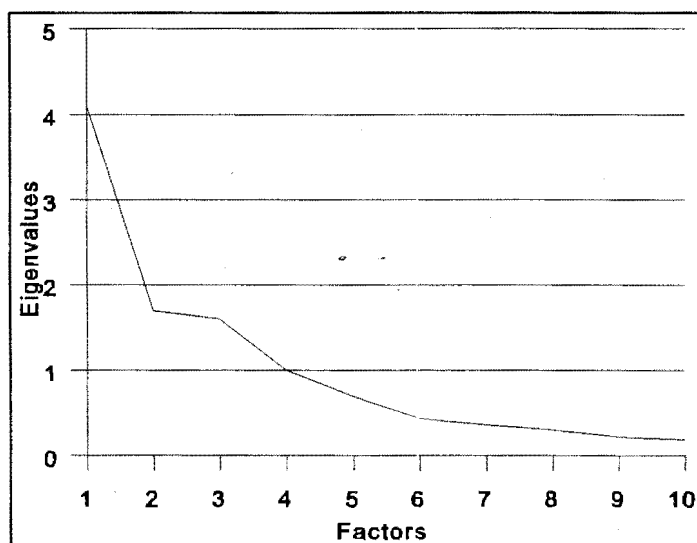
The data from figure 5.1 shows that the graph tends to level after 2 factors. The researcher consequently extracted factor solutions for 2 factors.

Table 5.11 shows a two-factor promax rotated solution for the salutogenic constructs.

Table 5.11

Two-factor rotated solution for the salutogenic constructs

CONSTRUCTS	FACTOR1	FACTOR2
BANDURA1	81[1]	-34
COMMIT	78[2]	.
CONTROL	78	.
POTENCYA	76	.
SCS	63	.
COMPREH	.	88
MANAGE	30	72
MEANING	38	67
CHALLENG	.	22
POTENCYB	.	.
LOC	.	.

1. Printed values are multiplied by 100 and rounded to the nearest integer.
2. Values less than 0.2 have been omitted to ease interpretation

The data from table 5.11 shows that the following constructs load highly with one another: on factor 1 Bandura1, commitment , control, potency A and SCS; on factor 2 comprehension, management and meaning.

Figure 5.2 shows the scree plot of Eigenvalues of lifestyle factors

Figure 5.2

Scree Plot of Eigenvalues of liferole factors

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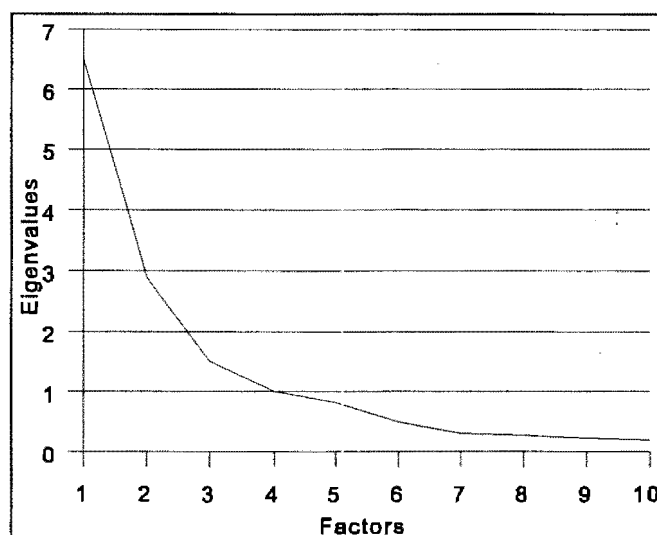
From figure 5.2 it appears that although there are 7 factors with eigenvalues larger than 1.0, the graph tends to level of (run more horizontally) after 4 factors. The researcher subsequently extracted factor solutions for 4 factors. Inspection showed that the four factor solution was slightly more interpretable.

Table 5.12 shows the four-factor promax rotated solution for the lifestyle constructs.

Table 5.12

Four-factor promax rotated solution for the liferole constructs

CONSTRUCTS	FACTOR1	FACTOR2	FACTOR3	FACTOR4
CWORK	93[1]	.	.	.
CHOME	82	.	.	.
VWORK	76	23	.	.
PHOME	75	-37	.	25
VHOME	74	.	.	.
PWORK	68	.	.	.
VSTUDY	.[2]	89	.	.
CSTUDY	.	87	.	.
PSTUDY	.	80	.	.
CLEIS	.	.	98	.
VLEIS	.	.	89	.
PLEIS	.	.	84	.
PCOMM	.	.	.	98
VCOMM	.	34	.	60
CCOMM	.	30	.	51

1.   Printed values are multiplied by 100 and rounded to the nearest integer.
2.   Values less than 0.2 have been omitted to ease interpretation.

The data from table 5.12 shows that the following constructs load highly with one another: on factor 1 Cwork, Chome, Vwork , Phome, Vhome, Pwork; on factor 2 Vstudy, Cstudy, Pstudy; on factor 3 Cleis, Vleis, Pleis and on factor 4 Pcomm and Vcomm.

5.1.4   Personal and psychological variables

The figures and table that follow indicate the results of the personal and psychological values.

Figure 5.3 shows the existence of an operating group of acquaintances that help out (N = 55).

Figure 5.3

The existence of an operating group of acquaintances that help out (N = 55)
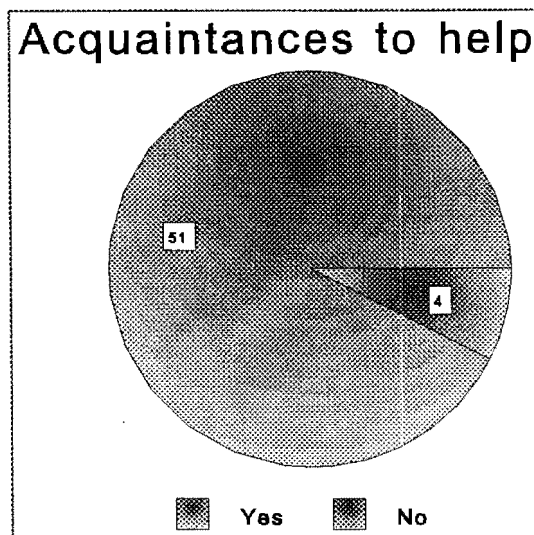
The data from figure 5.3 shows that 51 percent of the sample has an existing group of acquaintances that help out.

Figure5.4 shows the respondents' feelings toward work (N = 55)

Figure 5.4

Respondents' feelings toward work (N = 55)
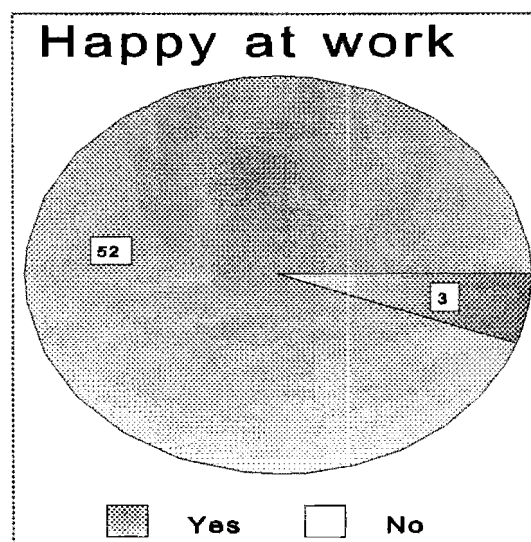
The data from figure 5.4 shows that 52 percent of the sample are happy at work.

Figure 5.5 shows the degree of relaxation in social situations (N = 55).

Figure 5.5

Degree of relaxation in social situations (N =55)
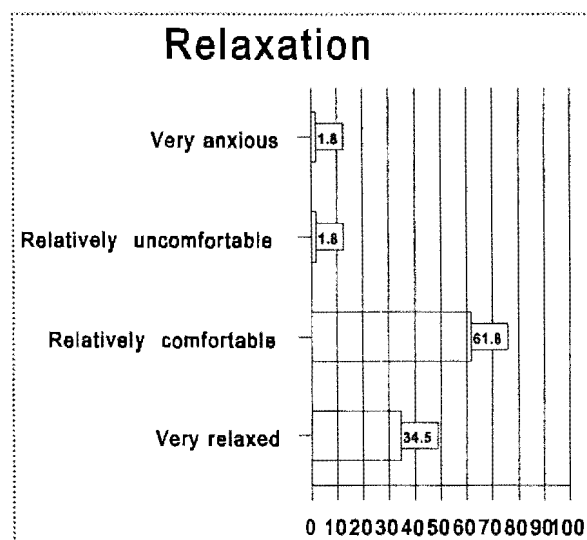
The data from figure 5.5 shows that 61,8 percent of the sample feel relatively comfortable in social situations.

Figure 5.6 shows the current health status of respondents (N = 55)

Figure 5.6

Current health status of respondents (N = 55)
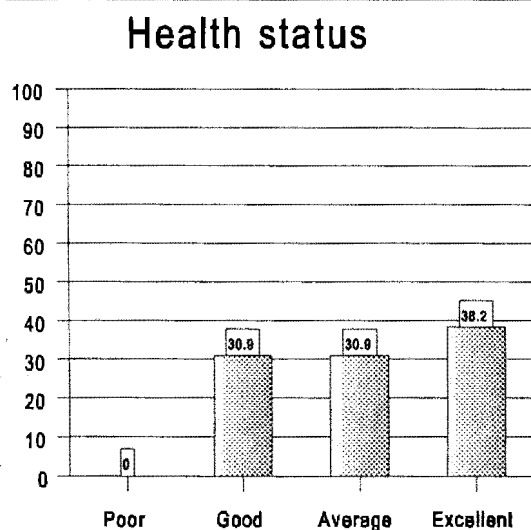
The data from figure 5.6 shows that 38,2 percent of the sample have an excellent health, 30,9 percent have an average health, while 30,9 of the sample have a good health status.

Table 5.13 shows the reasons for coping and for not coping with multiple roles in life.

Table 5.13

Coping with multiple roles in life

Reasons for coping	Coping with roles				Reasons for not coping
	Yes		No		
	Freq	Percentage	Freq	Percentage	
Family assistance	13	33,3	1	14,3	Breadwinner
BreadwinnerTrying	1 5	2,6	1	14,3	Low salary
best/content	2	12,8	1	14,3	Unorganized
Home comes second	3	5,1	1	14,3	No Time
Organized	2	7,7	1	14,3	Lots of
Children are older	1	5,1	1		responsibility
Self-employed	6	2,6	1	14,3	Too much stress
Good time management	2	15,4		14,3	Family and
Positive/optimistic	1	⁻5,1			career not easy
Job allows one to cope	3	2,6			
Balance/stability		7,7			
Total	39	100	7	100	

The data from table 5.13 shows that 39 percent of the respondents coped with multiple roles, while only 7 respondents did not cope.

5.2   INTERPRETATION OF RESULTS

Having described the results it is now necessary to interpret them in terms of the central thesis of the research, which is to determine whether there is a relationship between the strength of working women's

salutogenic construct scores and their ability to cope with multiple roles.

5.2.1 Reliability scores of the measuring instruments

Cronbach Alpha scores on the measuring instruments are relatively high, indicating that any given respondent will tend to perform consistently in the measuring battery. The measuring battery is thus accepted as internally consistent.

5.2.2 Correlations between the liferole factors and the salutogenic constructs.

The interpretation of the correlations between the liferole factors and the salutogenic constructs are given below.

SOC. Only comprehensibility as SOC construct correlated significantly with liferole factor pstudy. Thus, those respondents with a high comprehensibility score experience life as ordered and consistent, and it is more likely that they will partake in a student role in an active and systematic manner.

Hardiness (commitment, control and challenge). The control variable from the hardiness construct correlated significantly with the liferole factor pwork, while the challenge variable correlated significantly with lifestyle factors pleis, cleis and vleis. Since control enhances stress resistance and leads to actions aimed at transforming events into something consistent with an ongoing life plan, individuals high on the control variable partake actively in solving or influencing any problems associated with the work role (Kobasa, 1979b). Moreover, since change seekers have well explored their environment and know where to turn for resources to aid them in coping with stress, individuals high on challenge will participate, be committed and find major life satisfaction in the leisure role.

Learned resourcefulness (SCS). Learned resourcefulness correlated significantly with lifesrole factors pwork, pcomm, pleis, cstudy, ccomm, cleis, vstudy, vcomm and vleis. Since resourceful individuals self-regulate internal responses that interfere with desired responses by using personality repertoires (Rosenbaum & Jaffe, 1983), it is more likely that they will:

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- actively partake in work, community and leisure. This includes anything a person does to make life better (self-regulate) for those around him/herself.
- be committed to study, community and leisure.
- find major life satisfaction in the studying, community and leisure roles.

LOC (I-E scale). LOC correlated significantly with liferole factors pstudy, pleis, cstudy, ccomm, cleis, vleis, vcomm and vleis. Thus, those individuals with a high self-efficacy score are more likely to cope with the latter lifestyle factors. Since individuals high on internal locus of control perceive that situational outcomes are contingent upon their own actions (Sullivan, 1993), it is more likely that they will:

- participate in the study and leisure roles. Studying may enhance their well-being and life-style, while leisure activities will allow them to relax and have fun and thus they will be able to cope with situational outcomes.
- be committed to study, community and leisure, thus identifying with the particular role.
- find major life satisfaction in actively participating in the study, community and leisure roles.

Self-efficacy (Bandura 1). This construct correlated significantly with lifestyle factors pcomm, cstudy, ccomm, vstudy and vcomm. Thus those respondents with a high self-efficacy are more likely to be successful in the latter liferole factors. Since individuals high on self-efficacy mobilize cognition resources and take action to exercise control over task demands (Bandura, 1988), it is more likely that they will:

- actively participate in the community services roles.
- be committed to studying and the community, and
- find major life satisfaction (or value) in the student and community roles.

Potency (PS). The potency construct did not correlate significantly with any liferole factor.

5.2.3 Factor analysis

The factor analysis results may be interpreted by looking at the two-factor rotated solution for the salutogenic constructs and the four-factor rotated solution for the liferole factors.

5.2.3.1 Two factor rotated solution for the salutogenic constructs

Self-efficacy, the commitment and control variables of hardiness, potency A and learned resourcefulness loaded highly on factor 1. Thus, it appears that this factor is representative of successful coping with multiple roles. Findings in the literature review (Kobasa et al, 1982) indicate that hardy persons are healthier and cope better than non-hardy persons, encompassing an ability to cope and a basic sense of self-confidence in the capacity to overcome the demands of life. Hardy persons have a sense of control which leads to actions aimed at transforming events into something consistent with an ongoing life plan (Kobasa et al, 1982). Thus, the role of paid worker appears to be a source of self-esteem, purposefulness and inherent interest that may serve to mitigate negative effects of other stressors for women, even under conditions of role conflict and role overload. Thus, the provider role gives women a sense of meaningfulness. She learns to cope with multiple roles with a clear sense of values, goals and capabilities.

In addition, people high on self-efficacy believe in their capacity to mobilize cognition resources and to take action to exercise control over task demands (Bandura, 1988). Here the literature review (Bandura, 1988), indicates that women are more likely than men to cope by venting their emotions (physiological states of self-efficacy). Self-efficient women will tend to avoid activities that they believe will exceed their coping abilities, but they will undertake and perform with confidence those that they judge themselves capable of managing (Bandura, 1977). When beset with difficulties people who entertain serious doubts about their capabilities slacken their efforts or give up altogether, whereas those with a strong sense of efficacy exert greater effort to master the challenge (Bandura & Schunk, 1981). Thus, women with a strong sense of efficacy will exert greater effort to cope with multiple roles.

Potency is a mechanism that prevents the tension which follows occasional inadequate coping from turning into lasting stress (Ben-Sira, 1985). The literature review (Frankel, 1993) indicates that women are more likely then men to cope by seeking social support (potency as a stress-buffering link). Here coping has to be considered as a product of interaction between the individual and his/her environment (Ben-Sira, 1985). Moreover, if a woman were distressed because she perceived herself as the target of verbal harassment from co-workers, the evaluation of her ability to reduce or eliminate the harassment through available means (eg complaining to the supervisor) reflects problem-focussed coping. Thus, although the initial resources were inadequate for maintaining homeostasis, they have now become efficacious in its restoration (learned resourcefulness as a personality repertoire).

Self-control indicates an individual who can control his/her emotions and thoughts during adverse events (Rosenbaum, 1990). The resourceful individual may also employ various repertoires to minimize the effects of his/her anxiety (Rosenbaum & Jaffe, 1983). These findings in the literature review indicate that women in different roles use different coping resources. Either they exploit satisfaction or they learn to buffer stress. Further, single mothers accepted more responsibilities, relied more on positive reappraisals and tried to manage their time more effectively than did married mother (self-controlled behaviour). In addition, supermoms perceive themselves as "super" based on their subjective impression of what mothers actually do, easing their guilt and anxiety about being away from their children while they are employed (self-controlled behaviour). Thus, having self-control skills are likely to produce perceptions of self-efficacy (Rosenbaum, 1980).

The comprehensibility, manageability and meaningfulness variables of the SOC construct, and the challenge variable for the hardiness scale loaded highly on factor 2. Comprehensibility refers to the extent to which individuals perceive stimuli that confront them as making cognitive sense (Antonovsky, 1984). Manageability indicates that an individual perceives stressors as manageable. Meaningfulness indicates that the individual sees life as ordered, in emotional terms, it means that they care (Antonovsky, 1984). This literature indicates that women more often than men engage in "adaptive" coping behaviour, such as planning, organising, prioritising assignments and requesting needed resources (comprehensibility and manageability) (Long & Khan, 1993). Also, the provider role gives women a sense of meaningfulness. With regard to sole provider mothers it was found that women are motivated to find

employment because of their hope for their children (comprehensibility). Moreover, women's role as gatekeepers to their husband's involvement in family work, point to the importance of women's commitment to their homemaker role (Frankel, 1993). Finally, women who score high on hardiness feel positively about change, are catalysts in their environment and are well practised in responding to the unexpected (Kobasa, 1979a).

5.2.3.2 Four factor promax rotated solution for the lifestyle factors

Liferole factors loading highly on factor 1 are: cwork, chome, vwork, phome, vhome, pwork. Because women are committed to work and home and find life satisfaction in work and home and also participate actively in work and home it appears that this factor is representative of intrapersonal behaviour but more specifically successful coping in multiple role situations. Findings in the literature review (Long & Khan, 1993) indicate that self-election, which is an emotional and attitudinal characteristic, such as socialised commitment to less traditional gender-based roles, make it more likely for some women to combine work and family roles than others and to cope successfully with work and work-family stressors (learned resourcefulness and the challenge component of hardiness).

Liferole factors loading highly on factor 2 are: vstudy, cstudy and pstudy. Women are clearly committed, participate and find life satisfaction in a student role. This again reflects that women actively participate in ways to improve their lifestyle. Instead of not doing anything about the situation or ignoring the situation something is done about it (learned resourcefulness as a personality repertoire) (Long & Khan, 1993).

The following liferole factors have loaded highly on factor 3 namely: cleis, vleis and pleis. Women apart from focussing on the work and home role also participate, find life satisfaction and are committed to relax and find enjoyment in life. Not only are employed women physically more healthier and enjoy a more positive self-image when compared to housewives (internal locus of control and self-efficacy), but they also exploit satisfaction or they learn to buffer stress (learned resourcefulness) (Frankel, 1993).

The following liferole factors have loaded highly on factor 4 namely: pcomm, vcomm and ccomm. Women also participate find life satisfaction and are committed to the community role. From the literature review (Schabracq, Winnubst & Cooper, 1996), it is evident that women tend to interpret their environment as basically benign. That is, they expect things to go well (optimism) and they do not expect other people to intend harm. Thus, women aim to make life better or more interesting for those around them. Sense of coherence is relevant here, with regard to the dimensions of comprehensibility and meaningfulness, as is the commitment dimension of hardiness, which includes an overall sense of purpose.

5.2.4   Personal and psychological variables

Acquaintances to help. The results from figure 5.3 indicate that women are resourceful in that they use social support to minimize the effects of anxiety. Thus, this may be one of the answers to Antonovsky's question, 'how do people manage stress and stay well'? (Strümpfer, 1995).

Respondents feelings towards work. Figure 5.4 indicates that the provider role gives women a sense of meaningfulness. Thus, women are strengthened by that role when it is available to them (that is fortigenic consequences appear) (Strümpfer, 1995).

Degree of relaxation in social situations. Figure 5.5 confirms the view that women exploit satisfaction or learn to buffer stress (learned resourcefulness), and therefore, have a more positive self-image when compared to housewives (Frankel, 1993).

Current health status of respondents. From figure 5.6 it is clear that women in this sample who have multiple roles are also healthy, thus indicating that there is equilibrium in coping with multiple roles. Therefore, there is a clear link between women who are healthy and women who cope with multiple roles.

Coping with multiple roles. Table 5.13 indicates that 33,3 percent of the sample cited family assistance (social support) as the main reason for coping, while 15,4 percent of the sample cited good time

management as a reason for coping (learned resourcefulness). Therefore social support and good time management may be cited as factors that relate positively to coping with multiple roles (Frankel, 1993).

5.3 INTEGRATION

The following integrating remarks are made with reference to the correlation scores and the factor analysis score:

- Although the following salutogenic constructs correlate significantly with the liferole constructs: comprehension and pstudy; self-efficacy and pcomm, cstudy, ccomm, vstudy, vcomm; control and pwork; challenge and pleis, vleis, cleis, the SCS and I-E salutogenic factors correlate much more significantly with the liferole factors.

- The two and four factor promax rotated solutions for the salutogenic constructs and the liferole factors indicated whether certain factors and constructs loaded highly on the factors given, thus indicating the significance of a particular construct and factor.

- Lastly, personal and psychological variables indicated that women are resourceful in coping with multiple roles.

Thus, it may be concluded that working women tend to:

(a)   cognitively have a strong ability to view multiple roles as a normal process and to concentrate on actively participating in study to uplift themselves and their environment. Therefore, negative experiences are not personalised. Work, leisure and community roles provide interesting and enjoyable feelings of immediate control.

(b)   emotionally control negative emotions, that is they see stressful events as a challenge and perceive the world with optimism. Emotional equilibrium is maintained by placing a high premium on the community, leisure and home and family roles. The home and family role gives

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working women a great sense of worth. Moreover, social and emotional support assisted women to cope with multiple roles.

(c)   connatively to accept responsibility and actively participate in the various life roles. They also consider themselves to be copers and accept the responsibilities and challenges of the situation. They are committed individuals who apply self-control measures.

With reference to the above discussion it would seem that there is common ground between the life roles that women partake in and the salutogenic constructs.

5.4   CHAPTER SUMMARY

In this chapter the reporting of results and the interpretation of results were given. This was followed by integrating remarks on the correlation and the factor analysis scores.

Hence, the first empirical objective which is to determine whether there is a correlation between life role experience and salutogenic constructs is reached.

CHAPTER 6

CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS

With regard to the research methodology, the aim of this chapter is to formulate conclusions with regard to the objectives of the research and to discuss the limitations of the research. Finally, recommendations will be made with reference to the literature review and the empirical study.

6.1 CONCLUSIONS

The conclusions are discussed in terms of the specific literature review objectives and the specific empirical objectives and the central thesis of the research.

6.1.1 Conclusions pertaining to the literature review objectives

With reference to the literature objectives of this research, the following conclusions are drawn:

(1) The first literature review objective was to determine the demands and effect of work and roles within the work situation. The literature review confirmed that physical demands and structural work demands such as the amount of work time and scheduling of the work week, are related to difficulties associated with work-family co-ordination (Warren & Johnson, 1995). In addition, gender difference demands and effects such as prejudice, discrimination, stereotypes and social isolation have also been addressed. Multiple role demands of the employee and mother roles are simultaneous and continuous (DeMeis & Perkins, 1996). There are also certain characteristics and behavioural patterns individuals draw on to cope with multiple roles. Employed mothers also adopt a less stringent definition of the maternal role, thus enabling them to cope with the possibility of role overload and role conflict. If they do not alter their definition, they may be more likely to experience difficulty meeting role demands and consequently be less satisfied with their performance (DeMeis & Perkins, 1996). Employed mothers are also required to deal with problems relating to their employment role such as gender-role niches while at home and while at work (Barling, 1990). Moreover, it is women's and men's notions about gender that

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ultimately define and give meaning to their roles as providers and home caretakers. It is this symbolic construction of roles that holds implications for how a role is enacted within the family (Frankel, 1993). Some factors that contribute to the successful combination of multiple life roles are social support, emotional support, personal validation and opportunities to develop self-efficacy. Thus, the first literature objective has been addressed, and answers to the first problem statement have been provided.

(2)   The second literature objective was to determine how salutogenic constructs can be used to explain coping with the types of roles. A critical analysis of the terms coping and coping mechanisms was given, wherein certain coping mechanisms could be used to identify copers.

The literature review revealed that women find empathy to be an important form of support, and that a woman's ability to seek and receive interpersonal support is more highly developed than man's (Long & Khan, 1993). The development of the coping mechanisms, with its emphasis of the origin of health was discussed. Six coping mechanisms were motivated and selected, and in each case the selected mechanism complied with the most essential criterion Antonovsky (1991: 69) gave for the selection of the mechanism, namely that it must focus of successful coping. Moreover, since a sense of coherence, locus of control, learned resourcefulness, potency, self-efficacy and hardiness are properties of the individual, their social and physical environment that enable individuals to respond to the internal and external demands made by cognitive and behavioural factors, it may be concluded that they may be regarded as coping mechanisms (Lepore & Evans, 1996). Therefore, it may be concluded that the literature review and the subsequent selection of constructs, laid the foundation for the empirical study. Thus, the second literature review objective has been addressed and answers to the second problem statement have been provided.

(3)   The third literature review objective was to determine how the salutogenic constructs could be used to integrate coping with the types of roles. The integration confirmed Antonovsky's (1969: 91) statement that the focus on successful coping is the first and major criterion for the selection of salutogenic constructs. A comparison between the multiple roles and the coping mechanisms confirmed that there is common ground between the two and that coping corresponds with the

mechanisms associated with successful coping. The literature review confirmed that women who are copers are optimistic, accept stressful experiences as normal and also see life as something that can be influenced and acted upon (Schabracq, Winnubst & Cooper, 1996). Thus, the integration laid the foundation for the central thesis, namely that there is a relationship between the strength of working women's salutogenic construct scores and their ability to cope with multiple roles. Thus, the third literature review objective has been addressed and answers to the third problem statement have been provided.

6.1.2   Conclusions pertaining to the empirical study objective

With reference to the empirical objective of the research, the following conclusions are drawn:

(1)   Since the Cronbach Alphas on the salutogenic constructs are high, a high internal consistency of the study was reported, indicating that any given respondent performed consistently in the measuring battery.

(2)   Working women in this study have learned to apply self-control methods when confronted with behavioural problems. This is consistent with Rosenbaum's (1990) findings. They actively partake, are committed to and find major life satisfaction in performing multiple roles. They also believe that they are in control of their own behaviours and resultant outcomes and therefore are willing to put effort in coping with multiple roles. They are also committed to the leisure and study roles, so as to enhance their well-being. Findings in the empirical study also confirmed that women high on challenge will participate, be committed and find life satisfaction in the leisure role. Moreover, since women high on self-efficacy mobilize cognitive resources and take action to exercise control over task demands (Bandura, 1988), they actively partake in the community and student roles.

(3)   Working women who possess the following qualities or constructs such as self-efficacy, commitment, potency, learned resourcefulness and a sense of coherence are healthier, more confident, exert greater effort to master challenges, cope more effectively by seeking social support and exert greater effort to cope with multiple roles. These women also engage in

"adaptive" coping behaviour and are well practised in responding to the unexpected (Long & Khan, 1993).

The empirical study also indicates that working women are committed to, find life satisfaction in and actively participate in the work and home roles. They also actively participate in ways to improve their lifestyles, enjoy a more positive self-image when compared to housewives and they also learn to buffer stress (Frankel, 1993). Moreover, working women tend to interpret their environment as basically benign and aim to make life better and more interesting for those around them (Schabracq, Winnubst & Cooper, 1996). The provider role gives women a sense of meaningfulness, but women are still committed to their homemaker role. Therefore, working women are successful in coping with multiple roles.

(4)   Personal and psychological variables indicated that working women do cope with multiple roles. The latter findings are congruent with findings from a study by Waldon, Weiss and Hughes (1998), that multiple roles generally result in beneficial effects on women's physical health.

6.1.3   Conclusions pertaining to the central thesis

With reference to the central thesis of this research, it can be concluded that the results of the sample of working women in Pretoria, indicate that, within the specific population, there is a significant correlation between the strength of working women's salutogenic construct scores and their ability to cope with multiple roles.

Thus, the empirical objective: does liferoles correlate with salutogenic constructs, was achieved.

6.2   LIMITATIONS

The limitations of this research are now discussed.

6.2.1 Limitations in terms of the literature review

The availability of research on gender differences in coping and social support using managerial populations is very limited. This statement is confirmed by Billing and Moos (1984: 879) who postulate that the classification of coping responses is still in a preliminary stage, and Long and Khan (1993: 148) who posit that " we know very little about how women managers cope with occupational stressors and even less about their utilization of social support networks to help them alleviate stress."

6.2.2 Limitations in terms of the empirical study

The following limitations pertaining to the empirical study are presented:

(1)   The use of the LRI and six instruments measuring the salutogenic constructs, and a biographical questionnaire evoked a general reaction from the respondents that the completion of the instruments were time-consuming.

(2)   A larger sample size would have been much more beneficial to the overall empirical study, and the sample may not be representative of the entire population of working women with multiple roles, since the participation of blacks, whites and coloureds was quite low in this study.

6.3   RECOMMENDATIONS

The recommendations are discussed with reference to the literature and empirical objectives of the research.

6.3.1   Recommendations pertaining to the literature review

With reference to the literature objective, the following recommendations are made:

(1)   Future research must take into account individual differences among women, including their marital, parental, other family roles and differences in cultures of the organisations in which they

work (Long & Khan, 1993).

(2)   An extension of the description of salutogenesis to that of fortigenesis (Strümpfer, 1995) would be to the advantage of further development to salutogenesis and coping with multiple roles. Thus, an understanding of why and how some people find the strength to withstand and overcome pressures towards increasing entropy, whereas others do not, is also likely to lead to ways of increasing the numbers of those who do (Strümpfer, 1995: 87).

(3)   Research also needs to identify the circumstances in which multiple roles are especially difficult for both men and women (Verbrugge, 1983). Special attention should be focussed on the effect that multiple roles have on the behaviour of the children, because it is impractical if working mothers cope with multiple roles, but their children do not cope.

6.3.2   Recommendations pertaining to the empirical objectives

With reference to the empirical study, the following recommendations are made:

(1)   Since the sample included only working women, the inclusion of men would be advantageous to the study of coping with multiple roles. Even when males and females are in equivalent positions, they may not be equivalent in authority. Likewise, the presence or absence of other social roles (eg. parent) may affect male and female managers differently. Working women are also likely to be subject to special pressures like prejudice, that men are not. Thus, it is necessary to investigate these issues through research that compares women to men as well as research that concentrates solely on the issues most salient to women (Long & Khan, 1993). Also, an interdisciplinary orientation would yield far - reaching consequences for the state or theory development in this area (Sullivan & Bhagat, 1992).

(2)   Future research is needed that investigates the impact of work-place support on large and diverse samples of both mothers and fathers. Such samples should include parents in a variety of occupations with children in a range of child care options, as well as employed parents who are also providing care to aging relatives (Warren & Johnson, 1995). Descriptive accounts and in-

depth interviews would be useful in exploring the interactions between working women and their environments.

(3)   A comparison of copers and non-copers would also contribute significantly to the overall study. In addition, a more detailed biographical questionnaire could provide valuable insight into the personal, psychological and emotional background of the respondents.

6.4   CHAPTER SUMMARY

In this chapter, the conclusions have been formulated and the limitations of the research discussed. The chapter concluded with recommendations with reference to the literature review and the empirical study. Thus, the general and specific objectives of this research have been discussed.

Hence, the second empirical objective, which is to formulate recommendations in terms of further research and employment development has been reached.

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ANNEXURE

BIOGRAPHICAL QUESTIONNAIRE

General

This form is completed by: . . . .

Date: . . . .

Section 1:   Identifying characteristics

1.1   Name: . . . .

1.2   Date of birth: . . . .

1.3   Highest qualification: . . . .

1.4   Occupation . . . .

1.5   Religion: . . . .

1.6   Community: . . . .

1.7   Addresses: Postal: . . . .

. . . .

Home: . . . .

. . . .

Work: . . . .

. . . .

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1.8   Telephone numbers: Home: . . . .

                            Work: . . . .

Section 2:   Occupational history

2.1   Where are you currently employed and what position do you hold?

. . . .

2.2   Are you happy in your work?

Yes   ☐   No   ☐

2.3   Are you coping with the multiple roles in your life?

Yes   ☐   No   ☐

Describe briefly your reason:

. . . .

. . . .

Section 3:   Medical history

3.1   How is your current health situation?

Poor   ☐   Average   ☐

Good   ☐   Excellent   ☐

3.2   Which serious illness did you have and when?

. . . .

. . . .

. . . .

Section 4: Personal behaviour and emotional assessment

4.1 Rate the degree to which you generally feel comfortable and relaxed in social situations:

Very relaxed	☐	Relatively comfortable	☐
Relatively uncomfortable	☐	Very anxious	☐

4.2 Do you have any operating circle of acquaintances, friends, or neighbours who can help you out, and vice versa, when needed?

Yes ☐ No ☐

4.3 Does this group on occasion share with you some of the parenting of your children?

Yes ☐ No ☐

Section 5: Current circumstances

5.1 Please describe your current living conditions in detail (i.e. Do you live in a flat or house? What does your home consist of? ... etc.)

. . . .

. . . .

. . . .

. . . .

. . . .

5.2   What is your current income per month?

Less than R5 000   ☐

R5 000 to R10 000   ☐

R10000 to R15000   ☐

R18 000 and above   ☐

5.3   Pless complete the following:

Can you pay the rent, afford nourishing food, purchase adequate clothing?

Yes   ☐   No   ☐

Can you obtain and afford child care during the week?

Yes   ☐   No   ☐