The Effect of Gender Role Orientation on Work Interference with Family (WIF) and Family Interference with Work (FIW) among Married Female Nurses in Shiraz-Iran

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Abstract

The present study highlights the significance of gender role orientation as one of the most important individual factors on WIF and FIW. Furthermore, this paper also examines the effects of some of the essential personal backgrounds such as age, job experience and duration of marriage on WIF and FIW. This study consists of 198 married female nurses in Shiraz-Iran. The findings revealed that married female nurses who adopt more egalitarian gender role attitude are associated with higher WIF. Unlike previous studies, the finding also indicates that respondents who adopt a more egalitarian gender role attitude experienced higher FIW, which may be explained by the specific cultural context in Iran. This study also established that female nurses with older age, more years of job experience, and longer duration of marriage, perceived lower level of WIF and FIW. Implications are discussed and recommendations are made regarding future researches in this area.

Keywords: Gender role orientation, Work interference with family (WIF), Family interference with work (FIW)

1. Introduction

For a long time it was the men who worked to make money while women took care of the household responsibilities and accomplished the tasks of raising the children (Abbott, Wallace, & Tyler, 2005).However the scenario has changed. Women's participation in the workforce have increased all around the world (Davidson & Burke, 2004). Davidson and Burke further noted that this increase has significantly effects families. Women's involvement in paid work contributed to the rise of dual-earner family and has become the norm in many societies. These changes may impose some significant impact on women in implementing their roles at work place and in the family.

Similar to western countries, Iranian society is also experiencing its socio-demographic changes in the workforce (Karimi & Nouri, 2009). Over the years following the Islamic revolution in Iran in 1979, more and more women continue to pursue formal education and to involve themselves in paid work (O'Shea, 1999).In reviewing women's employment, the existing evidence showed that from 1956 to 1986, 9% of Iranian women were employed (Iran: Statistics,1994).While in 2004, the Statistical Bureau of Iran (2004) documented that 79.5% of women were employed. The increase in the number of women in the formal employment sector may be related

more with an increase in the number of highly educated women and the need to enhance family economy due to high cost of living (Karimi & Nouri, 2009) rather than a change in the traditional way of thought. This is because the majority of Iranians is Muslims and still practiced traditional Islamic values that prescribe a sharp sexual division of labor. Men are primarily breadwinners and women are the homemaker and child caretakers. In the same line, Rastegarkhaled (2004) emphasized that Iranian women who already have their traditional function as housewives, have to do additional responsibilities as an employee out of the home. In addition, Karimi and Nouri (2009) also supported this notion when expressed that most of Iranian women are solely responsible for domestic tasks, and at the same time have to bear pressures from both home and work responsibilities.

Nurses, like other female employees are faced with the demands of work and home responsibilities as their main daily tasks. According to Ministry of Health, nurses in Iran are mainly women. As of 2009, it was reported that 79.5% of Iranian nurses are female (ISNA, 2009). Female nurses that work in a critical situation in hospitals encounter higher conflict in their lives due to long hours of work per week, working overtime, high workloads, time pressures, death and life situation of the patients, and stressful and demanding responsibilities (Adibhajbagheri, Mehnosh & Fazlallah, 2004).

Working outside and inside the house formed two central domains in women's life, and each domain contains its own duties. According to Pleck (1977), work and family are two fundamental and interdependent systems for dual-career life that inconsistency in any one system may consequently influence the other one as well. These bidirectional influences of work and family can lead to two types of conflict, namely, work interference with family (WIF) and family interference with work (FIW).

Extensive researches have been carried out to investigate the WIF and FIW issues (e.g. Greenhaus, & Beutell, 1985; Bacharach, Bamberger, & Conley, 1991; Gignac, 1996; Anderson, Coffey, & Byerly, 2002;Voydanoff , 2005;Richey-Strickland, 2006; Yildirim & Aycan, 2008;Namasivayam & Zhao, 2007; Karatepe & Bekteshi, 2008; Livingston,&Judge, 2008). Nevertheless, based on Karimi (2008) most of these studies were conducted in Western countries and only a few in a Middle Eastern countries, such as Iran (e.g. Karimi, 2008). In addition, the outcomes of the investigations in developed countries are not necessarily applicable to the developing countries due to the influence of cultural beliefs (Aryee, 1992; Grzywacz *et al.,* 2007). For instance, individuals from more collectivistic cultures may experience fewer conflicts between work and family compare to those from individualistic cultures (Grzywacz *et al.,* 2007). Thus to illuminate this issue, it seems that more researches in this area are needed particularly in Middle Eastern countries with different cultural backgrounds. Overall, the present study intends to examine selected variables, which might disclose correlates of WIF and FIW among married female nurses.

2. Gender Role Theory

Gender roles are shared cultural expectations which are performed by individuals based on their socially-identified gender (Eagly & Karau, 1991; Kidder, 2002). Gender role theory suggests that ''individuals internalize cultural expectations about their gender because social pressures external to the individual favor behavior consistent with their prescribed gender role" (Kidder, 2002, p. 630). People, normally apply such expectations to characterize themselves and others; therefore, such factors lead individuals toward their own individual and more general social identities. These categorizations play essential part on individuals' lives and relationships (Donaghue & Fallon, 2003;Williams, Consalvo, Caplan, & Yee, 2009). Gender role theory proposes that women are encouraged to maintain relationships and be social and caring; hence society generally avoids them to perform activities defined as masculine (Williams, Consalvo, Caplan, & Yee, 2009).

Gender role theory would be enhanced by the definition of the construct of gender role orientation (Lucke, 1998). Gender role orientation is explained as a form of compliance with these expectations, or the degree to which one identifies with the traditional conceptions (i.e., expectations) of his or her gender role (Livingston & Judge, 2008).The work and family domains have been traditionally described along gender lines. Thus it is important and even critical to examine gender role attitude and its impact on WIF and FIW. Two points of view related to gender role attitudes are traditional gender role orientation and egalitarian gender role orientation (MaCarthy, 1999).Traditional individuals prefer men to identify with the work sphere and women with the home sphere, while those with egalitarian individuals believe that men and women should be equally acknowledge for their participations both in work and home (Hochschild, 1989).

3. Gender Role Orientation and (WIF) and (FIW)

In this study, gender role orientation refers to the beliefs individuals hold about normal roles of men and women in meeting family and work responsibilities (Harris & Firestone, 1998).A few researchers have confirmed the correlation between gender role orientation with both WIF and FIW. According to an investigation by Kim and

Ling (2001) a more egalitarian believe about gender role would help reduce family demand on married women entrepreneur in Singapore. In another study, Livingston and Judge (2008) examined the emotional responses to work–family conflict in relation to gender role orientation among men and women employees. The respondents of the study were 196, in which 124 (63%) were women and 72 (37%) were men from a wide variety of jobs from central Florida. The results showed that individuals who practiced more traditional gender roles experienced a stronger relationship with FIW; while individuals who adopted more egalitarian gender roles experienced a stronger positive relationship between (WIF). In another study, Ahmad (1999) examined the relationship between husbands' gender role orientation and wives' work-family conflict among 125 pairs of nurses and their husbands in dual-earner families. This study found a significant negative relationship between husbands' gender role orientation and wives' work-family conflict. The result indicates that women whose husbands hold more egalitarian orientation tend to experience less work-family conflict.

Somech and Drach-Zahavy (2007) examined strategies for coping with work-family conflict (W-FC) and the distinctive contribution of gender role ideology. The respondents of the study were 266 employed parents working in industrial, health care, education, and financial organizations in Israel. Somech and Drach-Zahavy suggested that the effectiveness of coping styles (i.e., good enough at home, good enough at work, and delegation at work) in reducing W-FC is related to socialization and gender role attitudes. In other words, gender role attitude might influence the extent to which the preferred coping strategy is successful in reducing W-FC. The results of the study by Somech and Drach-Zahavy showed those traditional women who believe that their main role in life is to be mothers and wives, any coping strategy that allows them to meet their roles expectations might be effective to lessen W-FC. Traditional women who use coping techniques that contradict their values and beliefs (such as delegating some family duties to others) will experience greater W-FC. Similarly, women who try to cope with the conflict by investing extra efforts at work may experience more W-FC.

The study by Somech and Drach-Zahavy (2007) also indicated that for nontraditional women, W-FC can be effectively handled by lowering the performance of family responsibilities or delegating some of the family activities to others. However, reducing the work performance leads to a higher level of W-FC among nontraditional women. The more time one spends on roles associated with one domain, the less time is available for other roles. Thus, working women might balance the demands from two domains by lowering their performance at home or at work depending on their gender role attitude (Somech, & Drach-Zahavy, 2007).

As mentioned earlier, the study about WIF and FIW and gender role orientation is scarce especially in contexts other than the advanced country. Livingston and Judge (2008) also put forth that the previous work-family conflict research has not investigated gender role orientation specifically. The present paper intends to investigate the association between gender role orientation with WIF and FIW among nurses in Shiraz-Iran.

4. Methodology

The main objective of this study is to determine the relationship between personal background, such as age, job experience, duration of marriage, and (WIF) and (FIW), among married female nurses in Shiraz-Iran. This study also, attempts to examine the relationships between gender role attitude and (WIF) and (FIW).The population of the study consists of 647 married female nurses in 13 public hospitals in Shiraz. There were four criteria established for the selection of the population of this research; firstly, married female nurses who work for public hospital; secondly, the married female nurses who live together with their husbands; thirdly, married female nurses who have a minimum of 6 months job experience and have at least one child.

The method of data collection used was self-administered questionnaire and the study is correlation in nature. The respondents were selected by using simple random sampling technique. Initially, the identified and eligible sample size was n = 323 and approximately 198 questionnaires were returned. Pilot study was conducted before the actual data collection to assess the adequacy of the questionnaire. In the present study, the Cronbach's Alpha for all measures used are mostly more than 0.70 indicating that the instruments are reliable to be used.

5. Measures

5.1 Work Interference with Family and Family Interference with Work

Work interference with family (WIF) and family interference with work (FIW) scale developed by Netemeyer, Bolesand McMurrian (1996) which consisted of 10 items was used to measure WIF and FIW. Responses were obtained using a seven point Likert type scale where 1=strongly disagree to 7=strongly agree. A sample item from this scale is "The amount of time that my job takes up makes it difficult to fulfill family responsibilities". The scale score range from 7 to 35 with high score indicating a high level of perceived WIF and FIW. The Cronbach's Alpha estimate in the present study for WIF scale is .88 and for FIW is .95.

5.2 Gender Role Orientation

A measure developed by Larsen and Long (1988) was used to assess gender role orientation. One item was dropped from this scale because it was deemed to have sexual nature (women should have as much sexual freedom as men). Thus, this study utilized only 19 items concerning traditional/egalitarian sex-roles. Responses to the items are on a 5-point likert scale from 1=strongly disagree to 5=strongly agree. The scale score range from 19 to 95 in which high score represents an egalitarian or contemporary gender role attitude and a low score represents a traditional gender role attitude. The reliability Cronbach's Alpha estimate for the scale in this study is .76.

6. Results of the Study

Table 1 presents descriptive data which includes mean, standard deviations, minimum and maximum scores and categories of scores for all variables of the study. The respondents' age ranged from 23 to 59 years old (mean=36.50, standard deviation=7.15). Most of the participants (56.1%) are below 36.50 years old. More than half of the respondents (56.1%) have been married for less than 11.68 years. Moreover, more than half of the respondents (56.6%) have less than 12.49 years job experience.

The first question examined the relationship between age, job experience, duration of marriage and (WIF) and (FIW). The finding from Pearson Correlation analyses showed that there were significant negative relationships between the respondents' age and WIF ($r = -.219$, $p \leq .01$) and FIW ($r = -.144$, $p \leq .05$). Likewise, the findings also suggested that there were notable negative relationship between the respondents' job experience and WIF ($r = -.218$, $p \leq .01$) and FIW ($r = -.170$, $p \leq .05$). Furthermore, there were significant negative relationships between the respondents' duration of marriage with WIF ($r = -.215$, $p \leq .01$) and FIW ($r = -.180$, $p \leq .05$). The findings imply that respondents with older age, more years of job experience and longer duration of marriage perceived lower level of WIF and FIW.

The second question examined the extent of relationships between gender role orientation and WIF and FIW. The results demonstrated that there was a significant positive relationship between the respondents' gender role orientation with WIF ($r = .145$, $p \leq .05$). It means that respondents who adopt more egalitarian gender role attitude tend to experience higher work interference with family. The results also showed that there was a significant positive relationships between gender role orientation and FIW ($r = .144$, $p \leq .05$). The finding indicates that respondents who adopt a more egalitarian gender role attitude also experienced higher family interference with work.

7. Discussion and Implications

This study aims to determine the influence of age, job experience, duration of marriage, and gender role attitude on WIF and FIW among married female nurses in public hospitals in Shiraz-Iran. The current study established that the respondents with older age experienced lower level of WIF and FIW. The results are consistent with findings of past studies by Voydanoff (2005), Karatepe and Baddar (2006), Lambert, Hogan, Camp, and Ventura (2006) and Yang et al. (2000) which have successfully recognized that respondents with older age perceived lower level of WIF and FIW. The results also show that the respondents with more job experience perceived lower level of WIF and FIW. The findings of this study are also in line with the previous research carried out by Cinamon and Rich (2005) which revealed that teachers with less job experience demonstrated a significantly higher level of family-work conflict and work-family conflict. In contrast, Zhao and Qu (2009) demonstrated no significant relationships between work experience and work-family conflict and family-work conflict. Moreover, the results prove that female nurses who have been married for longer duration demonstrated lower WIF and FIW. These results are consistent with the rational view that the working women, with increasing age, gaining more years of job experience and additionally after passing of a few years of marriage, are more stable and able to develop strategies to prevent their family life from interfering with their work and also develop strategies to prevent their work from interfering with their family life.

The result of the study also shows that more egalitarian gender role attitude is associated with an increase in WIF. This direction of relationship is consistent with finding of past study by Livingston and Judge (2008) which emphasized that individuals who espoused more egalitarian gender roles, experienced a stronger work interference with family.

The finding also indicates that nurses with more egalitarian gender role attitude, reported higher FIW. This is inconsistent with the finding by Livingston and Judge (2008) that particularly indicated that individuals who adopt more traditional gender roles experienced a stronger family interference with work. The relationships between gender role attitude with WIF and FIW may depend on the cultural values and practices of the working

women. For example in Iran society, working women may have egalitarian attitude, but the traditional structure of believes about domestic responsibilities hardly changed. Therefore, no matter what gender role attitude held by women will not lessen their pressures from both family and work demands. Based on these findings, it can be concluded that gender role attitudes of other family members such as the husband could also typically affect the nurses perceived level of WIF and FIW. This conclusion is in line with Ahmad (1999) which noted that husbands' attitudes towards gender roles related to sharing or non-sharing of household labor is one of the important factors for female nurses.

Future research should investigate the effects of gender role orientation among spouses, and family members, in dual-earner families. The lack of flexibility of outlooks in such strict families which usually have traditional attitudes might lead to conflict between work and family; since these rigid families are mostly unable to adapt to change. Families are recommended to change traditional structure of beliefs and practice more egalitarian gender role attitudes. Undoubtedly, if family members adopt a more egalitarian gender role attitudes and share household responsibilities, married working women might be able to effectively balance their roles in both the work and family domains. Thus, married working women may lead a better and more successful life as a wife, mother and worker.

8. Conclusion and Recommendations for Future Study

In conclusion, considering the available evidences, it can be established that both WIF and FIW among married female nurses in this study are influenced by age, job experience, duration of marriage and gender role orientation. Largely, the findings were supported by relevant literature and also were consistent with the literature of previous researches in developed countries.

There are several recommendations and limitations that have been identified throughout this study which may direct future studies. Primarily, having a low response rate and relying on one city for data collection limit the generalizability of the findings. Also, findings cannot be attributed to nurses of private hospitals. Accordingly, the results are not generalizable to the entire nurse population in Iran. In addition, this study was conducted only on female nurses. Assessing the variables of the model across gender would contribute to the generalizability of the results. This study also needs to be replicated with a more heterogeneous population such as other ethnic groups, religions, occupational variations and different cultural values. More studies of this nature should be conducted especially among women in Middle Eastern countries. Finally, as this study used a self-report measure (questionnaire), future researches may be strengthened by using combined methods of data collection.

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Table 1. Distribution and means and standard deviations of variables

Variables	N	%	Min	Max	Mean	SD
Gender role attitude			34.00	86.00	60.78	10.27
1. Traditional attitude (19-44.33)	81	40.9				
2. Egalitarian attitude (69.67-95)	117	59.1				
Work family conflict (W-FC)			8.00	35.00	24.36	6.51
1. Low level of WFC (5-15)	24	12.1				
2. Moderate level of WFC (16-25)	85	42.9				
3. High level of WFC (26-35)	89	44.9				
Family work conflict(F-WC)			5.00	35.00	17.45	7.89
1. Low FWC (5-15)	95	48.0				
2. Moderate FWC (16-25)	64	32.3				
3. High FWC (26-35)	39	19.7				

Note: N= frequency; %= percent, S.D = Standard deviation; Min. = Minimum; Max = Maximum