

Health problems perceived by dual earner couples due to high role strain by multiple roles

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Abstract

In the dual earner families, where both husband and wife are earning, a different situation emerges. Dual earner couples have multiple roles i.e. paid work outside the home and unpaid labor inside the home. But the question is, are multiple roles good for health? The role strain theory suggests that the pressures and the demands of juggling multiple roles may exhaust individual's personal resources, damaging their physical and mental health. Thus keeping the above facts in mind the present study was conducted with following objective: To find out the relationship between role strain and perceived health problems among dual earner couples. The present study was carried out in Jaipur city of Rajasthan state. Total 200 dual earner couples (200 husbands + 200 wives = 400 respondents) were selected for study. In this study descriptive cross-sectional study with survey method was employed. Data were analyzed using SPSS 16.0. Bivariate analysis and Pearson Correlation Coefficient was used for assessing the relationship between aforesaid variables. The result shows that the correlation value between overall role strain and overall health problems was 0.164 among husbands and 0.315 among wives. The value obtained was significant at 0.05 and 0.01 level respectively. This clarifies that as the overall role strain increases the health problems also increases among both groups. Due to high role distress (aspect of role strain) wives perceived nine health problems i.e. upset, sad, irritation, anxiety, losing temper, tension, headache, tiredness and depression and husbands perceived four health problems i.e. upset, losing temper, tension and depression. It was also observed that as role enhancement increases the health problems decreases among females.

Keywords: Dual Earner couples, Role Strain, Perceived Health Problems and Multiple Roles

1. Introduction

Dual-earner couples are responsible for many different roles in their fast-paced lifestyles. These responsibilities range from child caregiving, to household maintenance, to working outside the home. This large number of responsibilities contributes to the hassles they encounter in an average day. Common sense would indicate that the more roles a person plays, the more stress they will encounter. Role theory suggests that the maintenance of multiple roles across work and family institutions is a source of strain (Voydonoff, 1988)^[17]. This role strain is a direct result of taking on a number of responsibilities and not being able to successfully balance them. Most of the studies on role functioning of dual earner couples have revealed high degree of role strain for the female spouses. Role strain can have serious physical consequences. The role strain perspective, or scarcity hypothesis, proposes that increased numbers of roles lead to overload and strain, which can translate into negative effects on health. Thus, the number of roles occupied is negatively related to individual health (Goode, 1960; Marks, 1977)^[2, 9].

The possible harmful effects of employment due to two types of overload, heavy job demands and multiple role strain. Job demands, such as fulltime and overtime, may be associated with increased risks for physical and mental health problems among dual-earner couples. Occupational hazards and job stressors such as heavy demands and low control appear to increase health risks, whereas job-related social support appears to improve health. Griffin *et al.* (2002)^[3] also found that low control at home increased the risk of anxiety and depression. Simon (1997)^[14] observed that employed women reported greater exposure to strain from combining work and

parenting roles than employed men did; however, mothers were more affected than fathers from this strain. Staland-Nyman *et al.* (2008)^[16] revealed that higher strain in domestic work was associated with lower self-rated health in women. Strain in domestic work, including perceived inequity in the relationship and lack of a satisfactory relationship with spouse/ cohabiter, was associated with lower self-rated health. Gjerdingen *et al.* (2001)^[11] concluded that heavy workloads may adversely affect women's health, especially in the presence of certain role characteristics (e.g., having a clerical, managerial, professional, or executive position, or caring for young children). Heavy work responsibilities may also undermine marital happiness, particularly if there is perceived inequity in the way partners share household work. Finally, women's total work responsibilities often impact their careers due to compensatory reductions in work commitment and job status.

2. Methodology

2.1 Locale of the Study

The study on Health Problems Perceived by dual earner couples due to high role strain was conducted in Jaipur city of Rajasthan state.

2.2 Sample Selection

Total 40 organisations were selected for data collection, which are expected to meet out the objectives of the study i.e. such organisations.

- 1) Where a good number of females are working.
- 2) Work has to be done as per the MNCs or large organisation management system.

3) Where the employee is supposed to work hard meet out their targeted work in stipulated time.

4) Minimum working hours being 8 hrs.

Five female respondents and their husbands were randomly selected from each Organisation after acquiring the list of workers from the Organisation. Those female respondents were selected who fulfil the study criteria. The study criteria was (1) nuclear family (2) husband-wife and at least one child living together (3) youngest child below 12 years of age and (4) husband – wife each having at least eight hours job period. Twenty-five female respondents and their husbands were randomly selected from each zone and selection of the male respondents was through female respondents. Total 200 dual earner couples (200 wives and 200 husbands) were selected for the study.

2.3 Instruments

2.3.1 Role Strain

To assess role strain of the female spouses ‘Women’s Role strain Inventory’ developed by Lengacher and Sellers in 2003 was used. To assess role strain of the male spouses’ aforesaid inventory was used after suitable gender effect modification. The questionnaires were divided in three sub-scales i.e. Role Distress, Role Enhancement and Role Support.

2.3.1.1 Role Distress

Indicating that there was adverse strain associated with multiple roles of working and family/ significant others/ personal.

2.3.1.2 Role Enhancement

Indicating a positive response to multiple roles of working, family and personal.

2.3.1.3 Role Support

Indicating the importance of support from family, friends, children and significant other.

2.3.2 Perceived Health Problems

In the study, for assessing the health problems of the dual-earner couples, a questionnaire was prepared by investigator. Health problems questionnaire consisted of 15 items with three response categories i.e. very much/most of the time, to some extent/ sometime and not so much/hardly ever and rating scale 3-1 was used. Finally one packets of the questionnaire were prepared by the investigator.

2.4 Research Design

Descriptive cross-sectional study with survey method was used. Survey method was organized attempt to analyze, interpret and report the present status of a social institution, group or area.

2.5 Procedure of Data Collection

The questionnaire was distributed to the female respondents in their working places after the permission of their managing director along with written and verbal instruction that explained the nature and scope of the study. Two sets of the questionnaire were distributed to each respondent, one to be filled by female respondents and other by male respondents i.e. their spouses. Respondents were requested to complete the questionnaire without discussing their responses with others. After few days questionnaire were collected by investigator.

2.6 Data Analysis

Data were analysed using SPSS 16.0 statistical tools. To analyse the relationship between aforesaid variables, bivariate analysis and Pearson Correlation Coefficient was used.

3. Results & discussion

The relationship between role strain and perceived health problems among dual earner couples were analyzed. The results in this respect are presented in following tables.

Table 1: Pearson correlation value (Bivariate Analysis) depicting relationship between Role Distress (Aspect of Role Strain) and Perceived Health Problems based on gender.

N= 400 (200+200)

S. No.	Perceived Health Problems	Wife (Female) Role Distress	Level of Significance	Husband (Male) Role Distress	Level of Significance
1	Upset	0.188	0.01	0.163	0.05
2	Sad	0.156	0.05	0.036	NS
3	Irritation	0.254	0.01	0.065	NS
4	Anxiety	0.179	0.05	-0.084	NS
5	Losing Temper	0.163	0.05	0.162	0.05
6	High Blood Pressure	0.082	NS	-0.103	NS
7	Tension	0.273	0.01	0.179	0.05
8	Headache	0.161	0.05	0.098	NS
9	Body Pain	0.057	NS	0.053	NS
10	Palpitation	0.035	NS	-0.088	NS
11	Giddiness	0.048	NS	0.008	NS
12	Tiredness	0.148	0.05	-0.049	NS
13	Disturb Sleep	0.020	NS	0.076	NS
14	Depression	0.193	0.01	0.163	0.05
15	Thumping Heart	0.045	NS	0.036	NS

Pearson correlation coefficient result shows that wives’ role distress was positively correlated with their health problems i.e. upset, sad, irritation, anxiety, losing temper, tension, headache, tiredness and depression. It was significant at 0.05

and 0.01 level. Husbands’ role distress was found to be positively correlated with four health problems i.e. upset, losing temper, tension and depression. It was significant at

0.05. This indicates that as role distress increases among both spouses the health problems also increases. It was also observed that wives perceived higher rate of ill-health compared to their husbands because wives' role distress was significantly related with nine health problems while husbands' role distress was significantly related with six health problems. This could be due to the fact that in dual earner families' women still tend to perform more housework and family responsibility than men. This clarifies that increased levels of engagement in multiple roles are burdensome and increases strain among women. Role strain can have serious physical and mental consequences. Women have heavy responsibilities for household tasks and childcare combined with employment demands. In this situation women have to face the role distress, which results in

harmful effects on their mental and physical health. Similar Findings were also made by Sadiq and Ali (2014) [12] concluded that working women experienced the workload of household chores along with paid job. Due to these problems, working women may come under more stress leading to psychological or emotional distress. That emotional distress, later on, may be transformed into somatic complaints, social dysfunction, anger and hostility than married non-working women because of being overburdened with dual responsibilities. Managing workplace and family problems, taking care of children, husbands and in-laws and insufficient time for taking rest are major issues of married working women with middle class socio-economic status. All these factors are playing distal role in making them psychologically ill.

Table 2: Pearson correlation value (Bivariate Analysis) depicting relationship between Role Enhancement (Aspect of Role Strain) and Perceived Health Problems based on gender.

N= 400 (200+200)

S. No.	Perceived Health Problems	Wife (Female) Role Enhancement	Level of Significance	Husband (Male) Role Enhancement	Level of Significance
1	Upset	-0.036	NS	-0.033	NS
2	Sad	-0.123	NS	-0.035	NS
3	Irritation	-0.144	0.05	0.016	NS
4	Anxiety	-0.178	0.05	-0.025	NS
5	Losing Temper	-0.106	NS	-0.078	NS
6	High Blood Pressure	0.040	NS	0.025	NS
7	Tension	-0.140	0.05	-0.174	0.05
8	Headache	-0.109	NS	0.050	NS
9	Body Pain	-0.091	NS	-0.124	NS
10	Palpitation	-0.019	NS	-0.114	NS
11	Giddiness	-0.061	NS	-0.123	NS
12	Tiredness	-0.110	NS	0.038	NS
13	Disturb Sleep	-0.057	NS	-0.011	NS
14	Depression	-0.184	0.01	0.014	NS
15	Thumping Heart	-0.055	NS	-0.065	NS

A significant negative correlation exists between wives' role enhancement and four health problems perceived by them i.e. irritation, anxiety, tension, and depression. It was significant at 0.05 and 0.01 level. Husbands' role enhancement was also found to be negatively correlated with tension. This means that as the role enhancement increases among both spouses the aforesaid health problems also decreases.

Role enhancement refers to a positive response to multiple roles where an individual enjoys his/her life roles without experiencing role strain. Thus the individual is not experiencing role strain therefore they enjoy better health. The aspect of role enhancement is based upon Sieber's (1974) role accumulation (expansion) hypothesis, which proposes that multiple roles contribute to better health and focus on the rewards or privileges associated with multiple role involvement. Nordenmark, (2002) suggested that individuals who are strongly engaged in both employment and family life enjoy a high level of physical and psychological well-being. Janzen and Muhajarine (2003) reported that Canadian women who combined the roles of spouse, parent, and employee had better self-rated health and a lower likelihood of having a chronic illness than women with fewer roles, while for men, it was only older men with three roles (spouse, parent, and employee) who

reported better self-rated health. Loecher (2002) concluded that persons who juggle various roles experience decreased levels of depression and anxiousness, as well as fewer problems with their health. These people may have extra income, easing financial stress, and social support from work colleagues.

A significant positive correlation was observed between wives' role support (aspect of role strain) and seven health problems perceived by them i.e. sad, irritation, anxiety, losing temper, tension, giddiness, and depression (table- 3). It was significant at 0.05 and 0.01 level. Husbands' role support was also found to be positively correlated with two health problems i.e. irritation and tension. It was significant at 0.05 level and 0.01 level respectively. It indicates that as the role strain increases due to low role support the health problems also increases among dual earner couples. This may be due to the reason that when dual-earner couples receive low support in household work and family responsibilities from each other, then they experience mental and physical fatigue because both work and family responsibilities demand time and energy, therefore they perceived high health problems especially wives because results of this study indicate that wives perceived high role strain due to little support from their spouses in household work.

Table 3: Pearson correlation value (Bivariate Analysis) depicting relationship between Role Support (Aspect of Role Strain) and Perceived Health Problems based on gender.

N= 400 (200+200)

S. No.	Perceived Health Problems	Wife (Female) Role Support	Level of Significance	Husband (Male) Role Support	Level of Significance
1	Upset	0.101	NS	0.117	NS
2	Sad	0.149	0.05	0.086	NS
3	Irritation	0.201	0.01	0.152	0.05
4	Anxiety	0.241	0.01	-0.039	NS
5	Losing Temper	0.256	0.01	0.053	NS
6	High Blood Pressure	-0.076	NS	-0.127	NS
7	Tension	0.236	0.01	0.213	0.01
8	Headache	0.122	NS	0.039	NS
9	Body Pain	0.117	NS	0.020	NS
10	Palpitation	-0.027	NS	0.011	NS
11	Giddiness	0.170	0.05	0.091	NS
12	Tiredness	0.136	NS	-0.024	NS
13	Disturb Sleep	0.031	NS	0.018	NS
14	Depression	0.248	0.01	0.039	NS
15	Thumping Heart	0.002	NS	0.009	NS

Sadiq & Ali (2014) ^[12] revealed that dual responsibility, criticism from in-laws and less cooperation from husband might have induced frustration, hopeless and suicidal thoughts in working women. Despite being bread earner, they were not given support as they deserved. The feelings of having family support lessen the risk of depression. More support from parents, relatives and spouse reduces the level of depression in

women (Kendler, *et al.* 2005) ^[5]. These findings were supported by Khawaja & Habib (2007) ^[6], who demonstrated that husbands’ involvement in household work is a good predictor of women’s psychosocial health. They further observed that when husbands were less involved in housework, their wives were more likely to be distressed, unhappy, and dissatisfied with their marriage.

Table 4: Pearson correlation value (Bivariate Analysis) depicting relationship between Aspects of Role Strain and Overall Perceived Health Problems based on gender.

N= 400 (200+200)

S. No.	Aspects of Role Strain	Wife (Female) Overall Perceived Health Problems	Level of Significance	Husband (Male) Overall Perceived Health Problems	Level of Significance
1.	Role Distress	0.276	0.01	0.150	0.05
2.	Role Enhancement	-0.184	0.01	-0.127	NS
3.	Role Support	0.251	0.01	0.131	NS
4.	Overall Role Strain	0.315	0.01	0.164	0.05

A significant positive relationship exists between all aspects of role strain and overall perceived health problems among women. It was significant at 0.01 level. Husbands’ role distress was found to be positively correlated with overall perceived health problems. It was significant at 0.01 level. This indicates that as the role distress increases the health problems also increases among both groups. Female spouses also perceived high health problems due to low support in household work from their husbands. The results also indicate that as role enhancement increases the health problems decreases among females.

It was found that the correlation value between overall role strain and overall health problems is 0.164 among male spouses and 0.315 among female spouses. The value obtained was significant at 0.05 and 0.01 level respectively. This indicates that there was a positive correlation between overall role strain and overall health problems. The relationship found between the overall role strain and overall health problems of both the groups were in the same direction. This clarifies that as the overall role strain increases the health problems also increases among both groups.

It was also observed that wives perceived higher rate of ill-health as compared to their male counterparts because females experience high level of role strain due to their multiple roles.

Working women have more pressure of work in form of home management, child care, dealing with husbands and employer at workplace. Role strain increases the risk of health problems. Similar findings were also made by Mellner *et al.* (2006) ^[10], who observed that the high workload of paid and unpaid work has been found to increase the risk of negative health outcomes among middle-aged women such as shoulder and neck pain, headache, high blood pressure, fatigue, psychosomatic strain, and low self-rated health. Snow *et al.* (2003) ^[15] concluded that those employees who reported higher demands, pressures, and role conflicts were significantly more likely to experience symptoms of depression, anxiety and somatic complaints.

4. Conclusion

It can be concluded that both groups (husbands & wives) perceive ill-health due to role distress. Wives’ role distress was significantly correlated with nine health problems (upset, sad, irritation, anxiety, losing temper, tension, headache, tiredness and depression) while husbands’ role distress was significantly correlated with four health problems (upset, losing temper, tension and depression). One of the prominent findings of this result is that wives’ role support (aspect of role strain) was significantly correlated with seven health problems

(sad, irritation, anxiety, losing temper, tension, giddiness, and depression) while husbands' role support was significantly correlated with only two health problems i.e. irritation and tension. This clarifies that wives perceived higher rate of ill-health as compared to their male counterparts because females experience high level of role strain due to their multiple roles, as housewife, mother and paid employee.

The study also indicates that employed married women receive very little help with house work from their husbands, this contributes to role overload which may be one of the sources of strain and may have detrimental effects on women health. Employed women may enjoy the role enhancement if they receive support from their spouses and relatives. It was observed that as role enhancement increases the health problems decreases among females.

5. References

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