



Gender role perception & sense of efficacy in the mental health of employed women

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ABSTRACT

The effect of gender role perception and sense of efficacy on mental health of married employed women was examined. The study adopted a 2 (androgynous and sex-typed) x 2 (efficacious and less-efficacious) factorial design. One hundred twenty employed women participated in the study. They were categorized into androgynous and sex-typed on the basis of the median split of their scores on the measure of androgyny. Again androgynous and sex-typed women were categorized into efficacious and less efficacious subgroups on the basis of the median split of their scores on self-efficacy measures. The participants of all the four groups were compared with respect to their mental health. The result indicated that androgynous women showed better mental health than that of sex-typed women. Women with high sense of efficacy showed better mental health and scored higher in almost all dimensions of mental health than less-efficacious women.

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Introduction

The status of women has undergone tremendous changes in Indian society. Now they have succeeded to a great extent in articulating their inherent skills and competencies in different socio-economic spheres, thereby discarding gradually the oppressive and exploitative social system. They with an indomitable spirit have made indelible imprints with equal status, opportunity and dignity in many a field. More and more women are pursuing higher education and taking jobs outside their home. They are playing the multiple roles of wife, mother and paid employee. Their identities are no longer defined exclusively by their homes and families but also by their jobs. In this changing scenario, women are experiencing a psychological change in themselves. They have discarded playing typical role of their own sex and have developed an androgynous outlook of life. This new gender role orientation has positively influenced their mental health and sense of efficacy.

In the field of psychology and society at large human quality with respect to gender role is conceptualized as bipolar ends of a single continuum i.e. either masculine or feminine. Instead of characterizing femininity and masculinity as bipolar, Bem (1974) argued that "individuals might be "androgynous" that is, they might be both masculine and feminine, both assertive and yielding, both instrumental and expressive depending on the situational appropriateness." According to her, androgynous individual does not rely on gender as cognitive organizing principle and his/her personality combines both masculine and feminine elements. Bem (1974) specifically argues that androgyny is a psychologically healthier and more human way of being than conforming to traditional gender roles.

More recently, the concept of mental health has received greater research attention. Studies have shown that employment, marriage and parenthood are associated with good physical and mental health in both men and women. Traditionally absence of negative mental states such as stress, anxiety and depression

were considered to be important parameters of mental health, absence of which indicated that the person was mentally healthy. But with the emergence of health psychology, psychologists have indicated that presence of positive mental states like sense of competence, autonomy, achievement, perceived control, plenty of social support, work satisfaction, feeling of happiness with the family etc are more important criteria of mental health. However, the critical examination of the literature in the field of mental health documents multi-dimensionality of the concept.

The sense of efficacy also enriches mental health. It refers to the "can-do" cognition of an individual. It reflects the belief of being able to control challenging environmental demands by means of taking adaptive action. It pertains to optimistic self – belief to handle critical demands that tax individual's resources. It can be regarded as a self-confident view of one's capability to deal with certain life stressors as efficacy beliefs influence how people think, feel, motivate themselves and act (Bandura, 1992). If one feels confident enough to be able to control challenges or threats, then successful action is more likely.

A substantial number of studies evinced that androgynous individuals have greater behavioural flexibility and adaptability. They change their cognitions appropriate to the situation. Androgynous individuals demonstrate greater maturity in their moral judgement (Block, 1973), a higher level of self-esteem (Spence et al, 1975), a wider range of cross-sex behaviour (Bem & Lenney, 1976) and a variety of strategies for dealing with adverse situations. In the present study it is expected that androgynous women will demonstrate better mental health compared to sex-typed ones.

Human accomplishments and positive well-being require an optimistic sense of personal efficacy. People must have a robust sense of personal efficacy to sustain the effort needed to succeed. An affirmative sense of efficacy contributes to mental health as well as personal accomplishments. It is also expected that the efficacy belief will play an important role in promoting

mental health. In view of this rationale the present investigation is carried out.

Method

In this investigation, a series of activities were carried out to test the effect of gender role orientation and sense of efficacy on mental health of employed women.

Subjects

In the present study, One hundred and twenty employed women were randomly sampled from urban areas of Orissa. All the participants were married and had children. They were all educated and their minimum qualification was fixed at graduation. The age range of the respondent varied from 30-45 years and their average age was 35.42 (SD = 4.64). The participants were active in their respective domains when the study was conducted. All the participants had middle socio-economic status.

Measures

In the present study, measure of androgyny, of mental health and of perceived self-efficacy are applied.

Measure of Androgyny. Sahoo Sex Role Inventory (SSRI) is used as a measure of androgyny. Although Bem Sex- Role Inventory (BSRI) has been extensively used in research and application, recent concern with cultural parameters and relevance has prompted some considerations. While many items may have their stereotypic nature across cultures, it is possible that some items may be indigenously masculine (or alternatively feminine). This possibility raises the requirement of developing and validating a sex- role inventory relevant in Indian socio-cultural context.

Sahoo (1990a) adopted procedures similar to Bem's. However, due care was given to include some items that appeared relevant in India. It includes 60 items i.e., 20 masculinity items, 20 femininity items and 10 filler items. Individuals are asked to indicate their response on a seven point rating scale. The self-endorsement ratings generate two scores for an individual: a masculinity score and a femininity score. Masculinity score is the sum of scores of an individual across all 20 masculinity items. Similarly femininity score is the sum of scores across 20 femininity items. The difference score (M score ~ F score) is calculated. Lower the difference, the person is regarded as androgynous. Higher the difference, the person is regarded as sex- typed.

Measure of Mental Health. Sahoo (1990b) has developed a Health Behaviour Questionnaire (HBQ) that employs semantic differential technique to measure mental health. It comprises of fifteen criteria related to health. The criteria include sense of achievement, autonomy, competence, trust, control over the environment, feeling of happiness with family, good physical health, work satisfaction, values of spiritual quality, social support, freedom from depression, plenty of social contact, effective coping with stressful situations, integrated personality, and freedom from anxiety. Bipolar adjectives are presented to denote each of the fifteen criteria. Numerals from 1 to 7 between each set of descriptions are used. The individual is asked to think of her present life condition and evaluate it using each of the seven point by encircling a number for each set to depict her mental health.

While scoring, the direction of keying is considered. The closer an individual's rating to desired criterion, the higher is the score. Score for each criterion and overall mental health scores are computed. Overall mental health score (total score) is computed by summing each criterion score of the individual.

Measures of Self-efficacy. The efficacy variables include consideration of generalised self-efficacy and domain-specific (home/work management) self-efficacy. Two separate scales are used. A scale of generalised self-efficacy was developed by Wegner et al. (1981), first as a 20-item version and later as a reduced 10-item version. This test yielded internal consistency between alpha 0.75 and 0.90. The scale is not only parsimonious and reliable, it has also proven valid in terms of convergent and discriminant validity. For example it has positive correlation with self-esteem and optimism and negative correlation with anxiety, depression, and physical symptoms. A large number of empirical studies have confirmed the reliability and validity of the instrument (Schwarzer, 1981).

The scale presents 10 statements representing a situation. Respondents are asked to indicate the strength of their belief of execution on a 4- point scale where "1" indicates "Not at all true" and "4" indicates "Exactly true". Some of the items included are : (a) I always manage to solve difficult problems if I try hard enough ; (b) if someone opposes me, I can find ways and means to get what I want; (c) it is easy for me to stick to my aims and accomplish my goals. The sum of scores across items is the generalised self-efficacy score.

In addition, a measure of domain-specific efficacy is employed. As reported in Schwarzer (1981), a number of domain-specific or situation-specific scales are designed to predict health behaviour. In a similar line, Sahoo (1997) has developed a domain-specific scale to predict self-efficacy in family/work context. The scale represents 10 obstacles that are likely to be encountered in work/ home context. Respondents were asked to indicate the certainty of this belief on a 7-point scale in executing work/family obligation. The scale ranges from "Not at all confident" to "Very confident". The sum of scores across items (obstacles) is domain-specific self-efficacy score.

Procedure

The study involved a 2 (androgynous versus sex-typed) x 2 (efficacious versus less efficacious) factorial design. 120 working women were given Sahoo sex role inventory, and they were categorized into androgynous and sex-typed sub groups on the basis of the median split of their scores on the measure of androgyny. Again both androgynous and sex-typed women were categorised into efficacious and less efficacious subgroups on the basis of the median split of their combined scores on generalized and domain-specific self-efficacy. However the participants of these four groups were compared with respect to their mental health.

Results

The summary of the analysis of variances of androgynous versus sex-typed and efficacious versus less efficacious employed women on different dimensions of mental health scores are presented in Table-1.

The summary of the mean ratings and standard deviations of the participants on different dimensions of mental health are presented in Table-2.

The Analysis of Variance (ANOVA) performed on different dimensions of mental health measured by Semantic Differential Technique indicates significant main effect for gender role perception in personal competence, freedom from anxiety, freedom from depression, autonomy, control, feeling of happiness in family, effective coping, feeling of satisfaction in work, social contact, achievement and spiritual quality, $F(1,116) = 1440.24$, $P < .01$, $F(1,116) = 11.14$, $P < .01$, $F(1,116) = 9.93$, $P < .01$. $F(1,116) = 1173.74$, $P < .01$, $F(1,116) = 151.31$, $P < .01$,

$F(1,116) = 5.40, P < .01, F(1,116) = 192.55, P < .01, F(1,116) = 322.59, P < .01, F(1,116) = 322.55, P < .01, F(1,116) = 862.95, P < .01, F(1,116) = 860.17, P < .01, F(1,116) = 960.26, P < .01$ respectively (see Table 1). As shown by Table 2, androgynous women report greater personal competence, autonomy, control, feeling of happiness in family and achievement compared to sex-typed women ($M = 10.10$ & $4.97, M = 9.95$ & $5.72, M = 11.29$ & $9.05, M = 6.73$ & $6.34, M = 9.71$ & 9.38 respectively). On overall mental health also the ANOVA shows significant effect for gender role perception, $F(1,116) = 960.26, P < .01$. The mean scores of overall mental health indicate that the androgynous women experience better mental health than do sex-typed women ($M = 147.93$ & 80.01 respectively). The analysis of variance performed on personal competence, physical health, freedom from anxiety, freedom from depression, autonomy, trust, social support, control, feeling of happiness in family, effective coping, feeling of satisfaction in work, social contact, achievement and spiritual quality, indicates significant effect for sense of efficacy, $F(1,116) = 511.76, P < .01, F(1,116) = 33.04, P < .01, F(1,116) = 75.63, P < .01, F(1,116) = 8.26, P < .01, F(1,116) = 405.62, P < .01, F(1,116) = 4.83, P < .01, F(1,116) = 38.15, P < .01, F(1,116) = 8.55, P < .01, F(1,116) = 13.80, P < .01, F(1,116) = 37.53, P < .01, F(1,116) = 86.44, P < .01, F(1,116) = 44.81, P < .01, F(1,116) = 1551.83, P < .01, F(1,116) = 304.48, P < .01, F(1,116) = 308.58$. It indicates efficacious women show greater personal competence, physical health, freedom from anxiety, person morale, freedom from depression, autonomy, trust, control, achievement than less-efficacious women ($M = 9.06$ & $6.01, M = 7.04$ & $6.24, M = 7.83$ & $5.28, M = 8.38$ & $7.94, M = 7.01$ & $6.36, M = 9.08$ & $6.59, M = 8.86$ & $7.94, M = 10.44$ & 9.90) respectively. On overall mental health also the ANOVA shows significant effect for sense of efficacy, $F(1,116) = 308.58, P < .01$. The mean scores of overall mental health indicate that the efficacious participants experience greater mental health than do less-efficacious participants ($M = 133.22$ & 94 respectively).

Discussion

The present empirical investigation examines the impact of gender role perception and sense of efficacy on mental health of employed women. The above findings clearly showed that androgynous women possessed better mental health than that of sex-typed women. Efficacious women also showed better mental health compared to less-efficacious women.

Findings regarding androgynous versus sex-typed women reveal certain interesting features. Androgynous women indicated higher sense of personal competence, autonomy, achievement, feeling of happiness with family and control compared to sex-typed women. With respect to overall mental health also, they scored better as compared to sex-typed women.

Androgyny represents an ideal of human functioning, blending the best of masculinity and femininity. Research findings suggest that a combination of masculinity and femininity provide maximum benefits rather than simple adherence of sex typical standards (Block, Vonder, Lippe & Block, 1973; Heilburn (1968). Hinrichsen, Follansbee and Ganellen (1981) reported that androgynous persons consistently rated them higher on psychological health. High level of competence promotes better mental health of an androgynous person across a wide range of social skills. Bem (1974) has

rightly pointed out that when the artificial constraints of gender has eliminated, the person becomes psychologically healthy.

The present study also reveals that efficacious women showed better mental health than did less-efficacious women in almost all mental health dimensions. Self-efficacy is basically an adaptive process. The adaptive process is reflected in a multitude of life functions such as health, interpersonal behaviour, motivational behaviour and intellectual activities. Efficacy beliefs contribute importantly to the level and quality of human functioning. A substantial amount of studies evinced that low sense of self-efficacy is related with depression, anxiety and helplessness. A strong sense of personal efficacy is related to better health, higher achievement, control and more social integration. Sense of efficacy is a key variable for better physical and mental health.

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Table 1: Summary of the Analysis of Variance performed on Mental Health Dimensions of Participants

Mental Health Dimensions	Sources	df	F
Competence	GRP	1	1440.24*
	SE	1	511.76*
	GRP X SE	1	3.65
	Error	116	
Physical health	GRP	1	.33
	SE	1	33.04*
	GRP X SE	1	873.58*
	Error	116	
Freedom from anxiety	GRP	1	11.14*
	SE	1	75.63*
	GRP X SE	1	29.95*
	Error	116	
Person morale	GRP	1	2.04
	SE	1	.804
	GRP X SE	1	5.58*
	Error	116	
Freedom from depression	GRP	1	9.93*
	SE	1	8.26*
	GRP X SE	1	233.30*
	Error	116	
Autonomy	GRP	1	1173.74*
	SE	1	405.62*
	GRP X SE	1	1.05
	Error	116	
Trust	GRP	1	.27
	SE	1	4.83*
	GRP X SE	1	15.29*
	Error	116	
Social support	GRP	1	1.04
	SE	1	38.15*
	GRP X SE	1	35.23*
	Error	116	
Control	GRP	1	151.31*
	SE	1	8.55*
	GRP X SE	1	11.31*
	Error	116	
Feeling of happiness in family	GRP	1	5.40*
	SE	1	13.80*
	GRP X SE	1	124.71*
	Error	116	
Effective coping	GRP	1	192.55*
	SE	1	37.53*
	GRP X SE	1	18.86*
	Error	116	
Feeling of satisfaction in work	GRP	1	322.59*
	SE	1	86.44*
	GRP X SE	1	5.14*
	Error	116	
Social contact	GRP	1	322.55*
	SE	1	44.81*
	GRP X SE	1	50.79*
	Error	116	
Achievement	GRP	1	862.95*
	SE	1	1551.83*
	GRP X SE	1	65.73*
	Error	116	
Spiritual Quality	GRP	1	860.17*
	SE	1	304.48*
	GRP X SE	1	30.00*
	Error	116	
Overall mental health	GRP	1	960.26*
	SE	1	308.58*
	GRP X SE	1	15.44*
	Error	116	

*P < 0.01

Table-2: Summary of the Mean Ratings and Standard Deviations on Different Dimensions of Mental Health

Mental Health Dimensions	Groups	Androgynous		Sex-typed		Combined M
		M	SD	M	SD	
Competence	Efficacious	11.5	.84	6.63	.87	9.06
	Less-efficacious	8.7	.80	3.32	.23	6.01
	Combined	10.10	-	4.97	-	-
Physical health	Efficacious	4.91	1.10	9.23	.61	7.07
	Less-efficacious	8.32	.30	4.17	.87	6.24
	Combined	6.61	-	6.70	-	-
Freedom from anxiety	Efficacious	6.55	1.71	9.12	1.08	7.83
	Less-efficacious	5.59	2.23	4.97	1.10	5.28
	Combined	6.07	-	7.05	-	-
Person morale	Efficacious	8.60	3.72	8.15	.85	8.38
	Less-efficacious	7.02	.68	8.86	3.65	7.94
	Combined	7.81	-	8.51	-	-
Freedom from depression	Efficacious	4.91	1.10	9.12	1.08	7.01
	Less-efficacious	7.74	1.62	4.97	1.10	6.36
	Combined	6.33	-	7.05	-	-
Autonomy	Efficacious	11.26	.58	6.90	.41	9.08
	Less-efficacious	8.64	1.05	4.54	.45	6.59
	Combined	9.95	-	5.72	-	-
Trust	Efficacious	9.56	2.50	8.15	.85	8.86
	Less-efficacious	7.02	.68	8.86	3.65	7.94
	Combined	8.29	-	8.51	-	-
Social support	Efficacious	6.71	3.08	9.01	.81	7.86
	Less-efficacious	10.72	1.55	9.09	.76	9.90
	Combined	8.71	-	9.05	-	-
Control	Efficacious	11.86	.55	9.01	.81	10.44
	Less-efficacious	10.72	1.55	9.09	.76	9.90
	Combined	11.29	-	9.05	-	-
Feeling of happiness in family	Efficacious	5.48	.99	6.97	.40	6.22
	Less-efficacious	7.98	1.05	5.72	1.05	6.85
	Combined	6.73	-	6.34	-	-
Effective coping	Efficacious	5.68	.85	8.09	.79	6.89
	Less-efficacious	6.13	1.71	10.73	1.83	8.43
	Combined	5.91	-	9.41	-	-
Feeling of satisfaction in work	Efficacious	4.50	.40	8.09	.79	6.30
	Less-efficacious	6.11	5.31 1.45	10.73	1.83	8.42
	Combined	-	-	9.41	-	-
Social contact	Efficacious	4.91	1.37	9.16	.81	7.04
	Less-efficacious	7.25	.55	9.09	.76	8.17
	Combined	6.08	-	9.13	-	-
Achievement	Efficacious	12.41	.41	8.15	.83	10.28
	Less-efficacious	7.02	.68	4.60	.45	5.81
	Combined	9.71	-	6.38	-	-
Spiritual Quality	Efficacious	4.53	.74	8.30	.29	6.42
	Less-efficacious	7.02	.68	9.60	.55	8.31
	Combined	5.77	-	8.95	-	-
Overall mental health	Efficacious	162.88	8.30	103.57	11.45	133.22
	Less-efficacious	132.99	16.10	56.45	10.82	94.72
	Combined	147.93	-	80.01	-	-