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#### **WOMEN AND HEALTH AT WORK: A RESEARCH ON PUBLIC ADMINISTRATION**

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#### **ABSTRACT**

Today we know that health care is not just the sanitary offer but also by individual behaviors, the environment in which we live and work and public policy (Almeida 2005). The employment status of women should be reviewed from the perspective of organizational change, from the perspective of enhancement of human capital (Piccardo, Colombo 2007). The purpose of this research is to compare men and women who work in public administration in southern Italy with regard to their well being at work and work-related stress. The hypothesis is that there is a significant difference between the two groups and that women have a higher state of stress and more psychological and physical symptoms than men. The group of respondents is composed of 104 subjects. The instrument used is a questionnaire with 169 item that investigates the causes and symptoms of physical and psychological stress caused by work-related. The results confirmed the hypothesis.

**Key words**: Women; Health at work; Work-Related Stress; Public Administration; Well-Being

### INTRODUCTION

According to ISPEL's overview "stress is the second health problem related to work", affecting 22% of EU workers, about 40 million people 4 of which are Italian.

Previous studies state that a percentage between 50 and 60 of overall missed working days is due to stress; surveys tend to confirm the effectiveness of a trend in a worrying and rising phenomenon.

Gender differences detected in terms of working conditions (work environment, job tasks quality and organization, exposure to injuries) within Europe are often due to the division of labor by gender. Whether such differences are consistent and still quite "visible" has been thoroughly discussed (Paplomatas and Avallone, 2005). Prestigious contexts in the academia still refer to sex and gender related issues as if they were interchangeable. There is a talk about gender medicine or gender policies for health and work, nor women's health is referred almost exclusively to reproductive health, where the biologically characterized female sex is flattered.

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However, the importance played by women within workplaces according to organizational change should be stressed. Organizational change is a study over dynamic and evolving processes in matters of cultures, structures, strategies and lobbies within the organizations.

Evaluating external pressures to organizational change, Daft and Noe (2001) surely assume a change in the labor force as a fact: there are way more women who need to balance work, family and children, and higher levels of education as well.

According to George and Jones (2002) a significant change has occurred particularly within the family: the world is increasingly populated by single parents and dual career couples (where both partners work and strive for personal growth): also, it seems that women's career has become steadily more important (Piccardo and Colombo, 2005).

Considering the theoretical assumptions above, the purpose of the study is to analyze which are the organizational well-being factors women within a small local public administration office in southern Italy perceive compared to their male colleagues. Thus, the survey wants to make a general assessment over work-related stress within the interviewed group as to understand its causes and consequences.

# **METHOD**

## **Participants**

The group consists of 101 respondents, respectively 52.5% men and 47.5% women. The survey was conducted within various institutional departments at Regione Calabria. The 37.6% of samplers is under 45 while 27.7% is over 56. As for the marital status, 17.8% of employees is "unmarried" while the majority of the sample (76.2%) is "married/ lives with partner." According to the education profile, only 2% has evidence of middle school, while 46.5% has evidence of upper secondary school (respectively 30.7% vocational school and 15.8% high school I). Graduated employees are 47.5% (11.9% Bachelor Degree, 35.6% Master Degree or old MA), only the 4% has completed higher education levels such a PhD or a master. Eventually, the issues "employment contract" and "time schedule" assess that only the 2.3% has claimed to have a fixed-term or part-time contract, while other respondents are full-time and permanent workers. Moreover, most workers are employees, (71.3%), executives are 25.7% and managers only 3%.

#### Survey tools

The SMART questionnaire was administered. The instrument consists of 169 multiple-choice items, to which a 7-step Likert scale (1 = completely disagree to 7 = completely agree was applied. First of all, respondents were asked to express their level of agreement or disagreement with the proposed statements. The questionnaire provided simple and clear instructions to be completed or corrected in case needed. Compilation time was estimated to be about 20 minutes. Since the questionnaire was anonymous, it eventually collected general information about gender, age, marital status, education, employment contract, professional department. Schedule and shifts were the last issue to be detected.

#### **Procedure**

Data analysis of and work-related stress' evaluation was done by a normalization of each area score, where the areas are referred to "stressors" (chart 1) and "stress symptoms" (chart 2). Descriptive statistics (table 1) were scrutinized as well as differences between the averages (table 2).

Gender was considered the variable to determine differences between males and females.

## Results

Table 1 Descriptive statistics

	N	Average	Score
Work Environment	101	3,4279	48,97
Time schedule and shifts	101	3,2847	46,92429
Responsibility	101	3,0594	43,70571
Tasks	101	3,4818	49,74
Information	101	4,1966	59,95143
Interpersonal relationships	101	3,4196	48,85143
Job satisfaction	101	3,7997	54,28143
Mobbing	101	2,447	34,95714
Work- private life balance	101	2,698	38,54286
Meaning addressed to work	101	3,9109	55,87
Subjective response to stress	101	3,1601	45,14429
Hypertension	101	2,5099	35,85571
Sleep problems	101	2,8589	40,84143
Depression	101	2,4329	34,75571
Anxiety	101	2,7261	38,94429
Muscle-skeletal pain	101	3,2337	46,19571
Alcohol use/abuse	101	1,5545	22,20714
Irritability	101	2,9958	42,79714
Absences	101	1,5495	22,13571
Gastro-intestinal problems	101	2,5941	37,05857
Memory difficulties	101	2,934	41,91429

Chart 1 Stressor

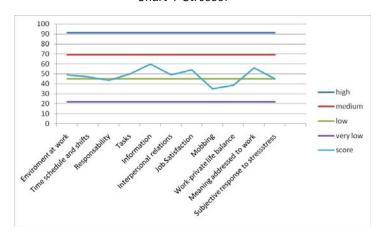
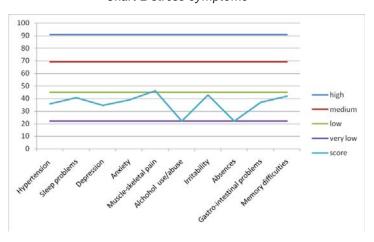


Chart 2 stress symptoms



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## Table 2 differences between the averages

	Gender	N	Average	Standard Deviation
Work Environment	male	53	59,3774	14,67890
	female	48	64,2708	14,24667
Time schedule and hifts	male	53	40,5660	9,90243
	female	48	38,1458	9,99572
Responsibility	male	53	19,1509	5,53449
	female	48	17,4792	4,87281
Tasks	male	53	53,7547	16,71930
	female	48	50,5417	15,71144
Information	male	53	29,3208	7,50583
	female	48	29,4375	6,41443
Interpersonal relationships	male	53	27,0566	7,78167
	female	48	27.6875	5,94355
Job satisfaction	male	53	82,6038	18,26550
	female	48	84,6875	14,91701
Mobbing	male	53	18,0566	7,91400
	female	48	16,1042	8,41539
Work- private life balance	male	53	16,3962	6,17171
	female	48	15,9583	7,46612
Meaning addressed to work	male	53	16,2264	2,84633
	female	48	15,0000	3,60260
Subjective response to stress	male	53	18,4151	4,90852
	female	48	19,5625	4,24718
Hypertension	male	53	5,0189	3,62942
	female	48	5,0208	3,99196
Sleep problems	male	53	11,6038	5,72894
	female	48	11,2500	6,36313
Depression	male	53	27,1698	11,52378
	female	48	26,3125	13,65869
Anxiety	male	53	33,0377	14,55621
	female	48	32,3542	15,97004
Muscle-skeletal pains	male	53	16,1321	7,11995
	female	48	16,2083	8,16051
Alcohol use/abuse	male	53	5,0943	2,95651
	female	48	4,1875	2,54037
Irritability	male	53	21,1887	9,07036
	female	48	20,7292	10,03555
Absences	male	53	2,8491	1,63373
	female	48	3,3750	2,11001
Gastro-intestinal problems	male	53	18,8868	8,17515
	female	48	17,3542	7,50458
Impaired memory	male	53	9,1698	4,62325
	female	48	8,3958	4,77467

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### DISCUSSION AND CONCLUSION

Commonly, stressors can be attributed to a cognitive perception of imbalance between commitments due to the social and physical environment and the ability (yet perceived) to cope with them. The individual facing this kind of situation during his job is subject to work-related stress. According to the survey, respondents recognize a medium and low level of work-related stress causes. Problems which may induce stress are mostly "information" problems, while mobbing and private life are low in scores (Figure 1).

Organizational change requires communication towards the customer to be accurate, but inner communication counts even more. Indeed, clarity of information both concerning work procedures and working environment reassures the employees, reduces stress levels and generally improves performance standards.

Stress symptoms, however, are definitely low in scores. Symptoms such as "sleep", "muscle-skeletal pain", "irritability" and "memory difficulties" are narrowly low, "alcohol abuse" and "absences" are rather nonexistent (Figure 2).

Even though stress symptoms detected within the sample of respondents are low, they need to be monitored all the same. Once they shift to higher scores, they may cause severe physical and mental disorders.

The comparison between women and men average scores testifies significant differences in what follows: meaning addressed to work, work environment and substance abuse. Men reacted more positively to *meaning addressed to work*, they are generally keen in believing work is their main purpose in life, time spent is mostly working time and energies are devote to job assignments.

Thus, the male figure appears to be defined by an overlap of working hours over family time.

Men express more ambition, focus on challenging tasks and feel greater competition in the workplace. Women reach lower scores here, values and difficulties concerning the dual dimension of work and family being once more confirmed.

The second area drawing substantial differences between men and women is "working environment". The need to improve working spaces to grant both wellness and productivity is assessed in response to workers' claims for dignity as well as to global market features.

Moreover, the survey detects higher scores for women in this area confirming the assumptions made insofar: women are more sensitive than men to environmental issues which may facilitate or otherwise thwart their activities as workers, wives and mothers.

Eventually, another area registering significant differences between male and female averages is substance abuse. The data depict higher scores for men, probably due to a greater tendency to alcohol consumption in men, as to counter work-related stress.

Statistics tell it all: the 2007 ISTAT report "Alcohol consumption and abuse in Italy" delivered during the "Alcohol Prevention Day" by the Istituto Superiore di Sanità (ISS) states that alcohol consumption in Italy, even though without abuses, starts at 12. Men and women start to differ from that age on, with men exceeding women about the 34% considering subjects who drink weekly. Results confirm the importance to screen employees' mental and physical health as a variable to verify their adaption to the work environment. Screening and adaptation are narrowly linked.

To screen a woman's perception over her working conditions is absolutely fundamental according to an integrated approach facing organizational change management and organizational flexibility centered on the evolution of female roles within the workplace.

Though, limits in the survey above need to be assessed, since it is a preliminary survey based on 101 respondents according to a random circumstance sample (Pedone, 2009) thus not representative of the entire population.

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