Women Managers and the Experience Of Work-Family Conflict

Megan Apperson, Heather Schmidt, Sarah Moore, and Leon Grunberg
Comparative Sociology Department
University of Puget Sound
Tacoma, Washington 98416 USA

Ed Greenberg
Department of Political Science
University of Colorado
Boulder, Colorado 80309-0483 USA

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ABSTRACT

Gender and managerial status have previously been found to relate to work-family conflict, though the combination of gender and managerial status has received less attention. This study explores differences in levels of work-family conflict and related job attitude and health and coping variables among women managers, men managers, women non-managers, and men non-managers at a large organization. Women managers experienced higher levels of work-family conflict, work role overload, and problem drinking. However, the levels of work to family conflict were unexpectedly similar between women and men managers. Possible explanations for this are considered.

I. INTRODUCTION

For the majority of men and women today, parenthood is combined with full-time paid work [1]. Although having multiple roles has been found to be beneficial to over-all well-being for both men and women [2,3], multiple roles can also lead to role conflict and negative psychological outcomes [4,5]. These negative outcomes may be a result of time-based conflict, strain-based conflict, or behavior-based conflict [6]. Role conflict exists when performance in one role creates an inability to adequately perform another role [6].

Gender’s effect on work-family conflict has been considered in previous studies. Work-family conflict is defined as a type of role conflict in which the pressures of family and work domains are incompatible [7]. While some studies report few differences between men’s and women’s level of work-family conflict [4], other studies have found that women experience higher levels of work-family conflict than do men [8-10]. The explanation commonly given for differences in levels of work-family conflict is that women view family as their primary obligation and attach more meaning to their parenting role than to their work role [10].

Managers can be expected to experience higher levels of work-family conflict when compared to non-managers. Factors associated with managerial careers, including long hours and psychologically demanding work, have been demonstrated to correlate with work-family conflict [4,11]. Moreover, job involvement, defined as the extent to which a person identifies with their job and the degree of influence the job has on self-image and self-concept [12], has also been found to have a positive relationship with work-family conflict [2,13].

Accompanying women’s increased participation in the paid workforce over the past decades has been an increase in the number of women holding management positions. In fact, the number of female
managers now nearly equals the number of male managers [14]. However, as Reskin and Ross demonstrated, there is a continuing disparity in monetary reward received and authority vested by women managers as compared to men managers [14].

Women managers’ work success and involvement does not necessarily rule out the desire to have a family. Despite the fact that female managers are less likely to be married and to have children than their male counterparts [15,16], Blair-Loy [17] found that younger generations of high-ranking female executives were more likely than older generations to view the role of manager as compatible with the role of mother or wife (2001). Nonetheless, the managerial career often assumes, and even requires for success, full time domestic support, with the most successful managers being those with the most extensive domestic support [15]. Because women managers are less likely to have full time domestic support in the form of a stay-at-home spouse, and because they may still bear the primary responsibility for domestic and childcare duties [18], it is reasonable to expect that they might experience higher levels of work-family conflict than their non-manager and male counterparts.

Using survey data, we investigated the levels of work-family conflict among women managers as compared to men managers, men non-managers, and women non-managers. We hypothesized that women managers would report the highest levels of work-family conflict.

In addition to family issues, we explored differences in health and coping and job attitude among our four groups. We reasoned that higher levels of work-family conflict would be manifested in health problems. Indeed, extensive literature suggests that work family conflict is associated with poor health, problem drinking, and high stress levels [19,20]. As discussed previously, job involvement is also positively correlated with work-family conflict [2,13]. Due to the correlation between work-family conflict and these variables, we hypothesize that women managers will report higher levels of health problems and job involvement. In addition, we explored differences between groups on job stress, intent to quit, work overload, and reports of being challenged on the job.

II. METHODS

a. Participants

This study was conducted in a large manufacturing organization located in the western United States. As of 1997 the organization employed approximately 100,000 blue and white-collar employees. Thirty-seven hundred employees, representing all pay codes in the company, were randomly chosen. The chosen employees were then contacted via letter and were assured confidentiality if they chose to participate in the survey. Union support was obtained and a twenty-dollar payment received for participation. Two-thousand two-hundred and seventy-nine usable questionnaires were returned (62% response rate). Approximately 24% (22%) of the respondents were female. Out of the entire pool of respondents, 14.5% (10%) were salaried-professional and administration employees (actual company percentage are in parentheses). In the final sample, there were 1,463 male non-managers, 264 male managers, 475 female non-managers, and 64 female managers.

Participants’ marital or relationship status and parenting status, are reported in Table 1.

b. Materials and Procedures

The data reported in this study are a subset of measures from the first wave of a four-year, longitudinal study that focuses on work change, work attitudes, and health outcomes. Based on extensive reading of literature, preliminary individual interviews, focus groups with current employees, and a pilot test of the survey, a questionnaire was designed to investigate several work-related attitudes, general mental and physical health-related perceptions, work outcomes, alcohol consumption and alcohol problems. Most of the scales found in this study are commonly found measures in the literature; however, some have been modified or developed for the purpose of this study (See Table 2). In our analyses, the N values varied because some participants did not respond to all questions.
### Table 1. Percentages of four groups’ marital status and presence of children.

<table>
<thead>
<tr>
<th></th>
<th>% With children under 18</th>
<th>% Married or living with partner</th>
</tr>
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<tbody>
<tr>
<td>Male Non-Managers</td>
<td>48.4</td>
<td>77.5</td>
</tr>
<tr>
<td>Male Managers</td>
<td>54.2</td>
<td>87.5</td>
</tr>
<tr>
<td>Female Non-Managers</td>
<td>40.2</td>
<td>63.2</td>
</tr>
<tr>
<td>Female Managers</td>
<td>37.5</td>
<td>78.1</td>
</tr>
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III. RESULTS

We conducted a series of 2 (gender) x 2 (managerial status) ANOVAs in order to examine main and interaction effects among four groups. Other variables that normally serve as experimental controls (e.g. marital status, gender, whether or not the participant has children) were used as independent variables in this research. Age and income were entered as covariates in all analyses.

As listed in Table 2, group differences on a variety of dependent variables were examined, focusing on three areas: job attitudes, health and coping, and family issues. The category of job attitudes was investigated using the variables of job stress, intent to quit, work overload, job involvement and job challenge. In the category of health and coping, we used the variables of health problems, problem drinking, mastery and proactive coping behavior. Lastly, with regards to family issues, we utilized the variables of family to work conflict (family interfering with work), work to family conflict (work interfering with family) and a recent shift to family focus (placing more importance on family and leisure than on work). As checks on demographic differences between groups, we also examined the spouse’s level of employment (unemployed, part-time or full-time employed).

b. Main Effect of Managerial Status

The variables with a significant managerial effect are job stress, job involvement, work overload, job challenge, health problems, work to family conflict, shift to family focus, and spouse employment. All of these variables involving a managerial effect suggest that managers have higher stress levels, $F(1, 2113) = 36.44, p<.001$, higher levels of job involvement, $F(1, 2150) = 65.49, p<.001$, higher levels of work overload, $F(1, 2179) = 67.67, p<.001$, higher levels of challenge on the job, $F(1, 2170) = 45.49, p<.001$, report more health problems, $F(1, 2107) = 4.265, p<.05$, have had a greater shift in emphasis from work to family in the past two years, $F(1, 2128) = 38.56, p<.001$, have higher levels of work to family conflict, $F(1, 2187) = 47.65, p<.001$, and are less likely to have an employed spouse, $F(1, 1719) = 23.53, p<.001$.

c. Managerial Status x Gender Interactions

We found significant interactions for work overload, problem drinking, work to family conflict, and spouse employment. Women managers (1) report higher levels of being burdened with too much work, $F(1, 2179) = 4.87, p<.05$; (2) report more problems with alcohol, $F(1, 1780) = 5.15,$
Table 2. Scale Descriptive Information. Note: All scales scored such that higher numbers reflect higher levels of the construct. a The health problems scale was modified to reflect the researchers’ specific interest in stress-related health problems; b Sample items of this subscale include: “Compared to the past, in the last two years, have you devoted more time to your family?” and “Compared to the past, in the last two years, have you become more focused on your work?” All questions were answered with a “yes” or “no.” This scale is composed of seven items.

Due to our failure to find more pronounced interaction effects, we explored the demographic variables of presence of children under 18 and marital status within each group to see if they could explain variations in the dependent measures. We investigated the difference in means of those with and without children among female non-managers, female managers, male non-managers and male managers using a 2x2x2 ANOVA. The issue of children is worth examining due to the strain created by the increase in commitment of time and focus needed outside of the workplace (Pleck et al., 1980). Although we assumed that we would find a significant difference between female managers with children and without children on issues such as work to family conflict, stress and shift of life focus, the analysis failed to reveal any significant differences.
Using 2x2x2 ANOVAs we next examined the interaction effects of gender, marital status and managerial status on our variables. Work to family conflict had a significant interaction (F=4.86, p<.05), with single female managers reporting the highest levels of work to family conflict. No other significant interactions were found.

IV. DISCUSSION AND CONCLUSION

The results of the survey indicate that female managers report work to family conflict at levels higher than male managers, female non-managers, and male non-managers, thus providing support for our hypothesis. However, the effect sizes are smaller than we anticipated, suggesting that the levels of work-family conflict reported by female managers is unexpectedly similar to the levels of work to family conflict reported by male managers. A managerial main effect for the variable of work to family conflict further indicates that managerial status is an important predictor of work to family conflict.

When men managers and women managers were compared on the variables of interest, significance was found only for work overload, health problems, and spouse employment. The lack of significant differences in these analyses between men managers and women managers on the work-family conflict variables does not support our hypothesis and further indicates that men managers and women managers are experiencing similar levels of work-family conflict.

Although most health and coping and job attitudes indicators did not show a relationship with group differences in levels of work to family conflict as we predicted, significant interactions were found for problem drinking and work overload. Women managers’ higher levels of problem drinking and work overload may be related to work-family conflict. Additionally, the managerial main effects for the job attitude variables of job stress, work overload, job involvement, and job challenge suggest that these job attitudes may be related to work to family conflict.

In examining effects of marital status and presence of children under 18, our 2x2x2 ANOVAs found that marital status has an effect on work to family conflict, with all other variables unaffected by marital status and children. In explaining the non-significant effects of marriage and the presence of children, it may be that our gender/managerial groups have enough explanatory value so as to make this further division ineffectual at finding differences. Additionally, caution should be taken in interpreting these analyses, as the group sizes were small (N=14 for women unmarried managers) and the likelihood of error occurring was large due to the high number of analyses conducted.

Nonetheless, our 2x2x2 analyses of marital status, gender, and managerial status was significant for work to family conflict, with single women managers reporting the highest levels of conflict. We investigated whether or not this finding was due to this group having substantially more children and found that the presence of children was similar between groups. Considering that the groups have similar amounts of children, our data suggest that the combination of being female, manager, and single is related to higher levels of work to family conflict. Again, this finding must be treated with caution, as the number of single managerial women in our sample is 14.

Based on the small effect sizes of the interaction for work to family conflict, we cannot fully conclude that women managers’ level of work family conflict is reflective of actual differences in women managers’ experience. Indeed, the lack of more pronounced findings, in light of our literature supported hypothesis, leads us to consider why women managers report levels of work to family conflict similar to men managers, although we must refrain from concluding “no difference” on the basis of this finding alone.

One possible explanation for similar levels of work to family conflict for managers may be the entering or exiting of women from the workforce due to circumstances relating to the balance of work and family. For women more than men, the prospect of work-family conflict may discourage employment in general and may particularly be a deterrent to pursuing a managerial career. Those who do pursue a managerial career are likely to be the ones who are less conflicted by the demands of their work and family roles. The gender and managerial demographics of the company, as well as
the health and coping, job attitude, and family issue variables of the gender managerial groups examined in this study, might be affected by this selective entering or exiting. Similar levels of work-family conflict reported by women managers and men managers may reflect the absence of those women who would be most likely to experience work-family conflict.

In addition to self-selection as an explanation for less pronounced effects, the coping abilities of women managers may be better than male managers; women managers may have more developed strategies for dealing with the conflicts of work and family roles than the men managers. Additionally, women managers may have accepted a certain level of work-family conflict as part of their lives and thus do not notice and report it as much as the other groups.

While self-selection and coping skills of women managers may explain similarities in levels of work-family conflict between female and male managers, it is also possible that male managers are facing similar challenges as female managers in balancing work and family roles. Male managers may be increasingly identifying with their family role and experiencing the pressure to find a balance between work and family.

Similarities in work to family conflict between women and men managers may be interpreted as women managers having reached a level of equivalency with men managers. However, further study should explore whether preemptive consideration of the balance of work and family roles explains this similarity through self-selection. Examining women managers’ experience with work-family conflict is crucial to understanding the unique challenges that may be facing women in positions of authority. Such examination is necessary if women are to overcome these challenges.

REFERENCES
