

Anxiety of Women Employees and The Process of Maternal Role

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Date of Submission: Feb 21, 2013

Date of Acceptance: Feb 23, 2013

How to cite this article: Ahmadifaraz M, Foroughipour A, Abedi H, Azarbarzin M, Dehghani L, Meamar R. Anxiety of women employees and the process of maternal role. Int J Prev Med 2013;Suppl 2: S262-9.

ABSTRACT

Introduction: Regarding the social and economic changes and developments, the increasing presence of working women in the present society and their important role in the family, paying more attentions to the importance of maternal role among working women who face multiple roles seems to be necessary. Hence, the process of maternal role among working women has been investigated in this study.

Methods: The grounded theory approach is used in this qualitative research. In-depth and unstructured interviews were the main way in collecting the data. Initially, the targeted sampling was started and continued gradually to the data saturation, in the form of theoretical sampling based on the obtained classes. The data was analyzed using Strauss and Corbin analysis. Accuracy and validity by four criteria in this study included: Credibility, dependability, Confirmable potential, Transferability or Fittingness.

Results: Data analysis led to the identification of the core variable of role conflict. The main classes of occupied mothers' experiences included: different pregnancy experience, returning concerns, supportive umbrella, role assignation, role overlap, role strain, gradual acceptance, satisfaction and erosion.

Conclusions: The acceptance of numerous roles such as maternal and marital roles by working women creates various role expectations of them from their children, spouses, family and the society which in turn forces them to meet both family and job requirements and expectations; This causes role conflict in working mothers and endure a lot of pressure and stress, that can influences of mental and physical health of the mothers.

Keywords: Anxiety, maternal role, women, Grounded Theory

INTRODUCTION

Promoting the level of education, entering jobs and employment and increasing the social participation are among the social changes resulting from the transition from old to new society that a significant portion of the Iranian women have experienced in recent years^[1] and could achieve their

own interests and aspirations along their other traditional roles and attain social positions.^[2] The origin of these changes as well as improved quality of life and social advancement of women have encountered them with new problems and challenges.

In most internal and external research that has been done on women, waiver what perspective they view women with, two major roles, as wives and mothers for women is defined. Two important and main roles, that is, spousal and maternal have been defined for women regarding the mental and physical characteristics of a woman, she will have to bear a special responsibility for them Changes are formed in the traditional gender division of labor that had previously been defined for women to add a new role on their previous roles. In other words, occupation as an added role could involve obligations and responsibilities for working women, [3] because they have an obligation to their housework duties and tasks in the field of employment outside the home as well.

In other words, with their employment women face not only a role, but a series of interconnected roles that are requiring each other, such as the spousal, maternal, and occupational roles and similarly confront various expectations simultaneously. This particular concern for women that reconciles their traditional and modern roles is more challenging.

Since becoming a mother and the maternal role are complex processes affected by personal and social factors such as supporting systems, economic conditions, and cultural situations; it seems that analyzing the experiences and elaborations of working mothers is a step towards promoting proper life of women, children, and family as the most important pillar in the society as a whole, to understand the needs, specific problems, and even the probable strong points. This research seeks to answer this important question as, "what is the process of maternal role among women?". The aim of this study was to clarify the process of maternal role among working women.

METHODS

In cases where the researcher has to consider the process of formation or exposure to certain social phenomena in question, the basic theory and method of grounded theory as a qualitative research method^[5] based on symbolic interaction are used.^[5] Analyzing the existing social processes deal with the context of human relationships.^[6] Since the maternal role is a dynamic process of interaction formed by the relation with others in particular fields, and the working women make themselves compatible with the changes in life, the grounded theory methodology was chosen for this study. Participants in this study were among the women working in one of the Islamic Azad University branches, including faculty and staff members and all the participants who had an experience of being a mother, and had at least one child. Initially, the targeted sampling was started and gradually continued by stabilization of conceptual classes during the data analysis. Participants were selected based on theoretical sampling according to the codes and classes continued until data saturation. After the saturation level of the data was achieved, interviews were conducted with nine participants.

Saturation criteria were considered for understanding the adequacy about the study cited. Participants based on text written consent, freely participated in the study. In depth interviews and field notes were used for data collection. The duration of interviews was 30-45 min with an average of 20 min.

Data collection and data analysis in this study were done simultaneously and the data were analyzed according to Strauss and Corbin approach and divided into three stages including open coding, axial coding, and selective coding; which led to identifying the variable core as the main class relating with other classes to describe them.^[7] The four criteria; including credibility, dependability, conformability, and transferability or fittingness were considered for the validity and credibility of the study. The purpose of this is to ensure the exact experiences of participants in the research.^[8]

For the credibility and validation of the findings, the method regarding the participants check was used that indicated whether the participants recognize the data and the results are in conformity with their experiences in terms of accuracy, completeness, and interpretation; or not. Accordingly, a part of the interview was exposed

to the participants. Scaling ideas were taken and the amount realized from the data was compared with the participants. Member check is another solution for increasing the reliability of the data. [9] The full texts of the first implemented interviews together with the related codes, concepts, and categories were sent to some colleagues and supervisors to be analyzed and verified.

Dependability is a criterion that is verified when the researcher determines the validity of the findings. The question that defines this criterion is about the dependency of the results to each other To fulfill this criterion, the study's findings were given to three working mother who did not participate in the study and they verified the relevance of them with their own experiences.

Conformability in qualitative research and is equivalent to reliability in quantitative research and represents stability and reliability of the data over time and under identical conditions.^[10]

To develop the ability to approve or object to all of the survey data, researchers tried to fully explain all the stages of the research to ensure the integrity of the open and axial coding, the data and findings were given to other researchers familiar with qualitative studies to verify their accuracies.

Transferability or fitness means fitness and mobility of the outcomes to be used in similar conditions.^[11] Discussing and comparing our findings with other studies is a method to evaluate the appropriateness of the data that has been used in this study.

RESULTS

Data obtained from analysis of the interviews included, 414 codes from the open coding phase, 42 category of the axial coding stage and 9 main themes of working mothers' experiences which consisted of different pregnancy experience, returning concerns, supportive umbrella, role assignation, role overlap, role strain, gradual acceptance, satisfaction, and erosion that led to the identification of the core variable of role conflict that resulted from selective coding considered as the basic social psychological process, which is faced by working mothers in the study and developed over time, That is shown in Figure 1.

The following are some of the components

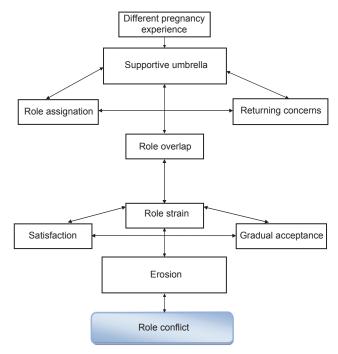


Figure 1: The process of maternal role

of maternal role in the process described in this study:

Returning concerns

One of the major problems of working mothers in the study with their maternal role was their return to work after maternity leave. Mental concerns and worries about finding the right person and place to care for a child, how to breast feed the infant, obligations in full-time cooperation in the organization, and inadequate supports of the organization are the concerns for most mothers participating in the study. Most mothers agreed that they were scared from the beginning of their period of maternity leave.

In this regard, the participant Number (5) states:

"I never wanted my maternity leave to finish. I was very worried from the beginning to what I should do about my child after my maternity leave, where should I put him, what I should do for breast feeding him. I wouldn't get no-paid leave. I should get hourly leave. He is innocent. I could not bear it. I thought a lot about it."

Role assignation

This theme reflected maternal duties in the absence of mother, including relatives of mother, supportive resources in the community such as kindergartens, private institutions, and service or using family members or neighbors due to necessity because of the particular circumstances. In other words, working mothers in the study had to assign their maternal roles to other when they were at work in order to meet the diverse needs of their child with the help of others.

In this regard the participant number (3) states:

"I asked one of the relatives of one of my neighbors to take care of my children and I used to pay her monthly wages. I used to take my younger child to her before going to work and send my elder child by a school car to school and take him back by the afternoon to the nursery for my husband to take him back home after his work."

Role overlap

It indicates that the additional pressure exerted on the mother accepting various roles and being in forceful conditions providing her to tolerate the situations:

"I am considerate. I make the food ready with all my fatigue, wash the dishes, do the house work, and used to control the homework done by my children up to primary school. I used to cook the next day's lunch and never leave anything over."

Role strain

It seeks to create an overlapped role. Some mothers were inconsistent in their roles or due to negligence or failure in performing their duties; they were affected by negative emotions such as disgust, hatred, guilt, and blame:

"It was 9 o'clock that my mother in law called and said that my daughter had fever and vomiting and was crying. I got worried when I heard the news. I talked to my child and calmed her down and said I would come after she had a little rest. I also told my husband to take a leave and go home early. It took me 1.5 hours to get home and I was nervous. I was worried and told myself I should have been with my child by then. She was crying there and suffering and hurting her grandfather, and I was here."

Satisfaction

It involved satisfaction or dissatisfaction of mothers from their occupation or maternal responsibilities. Participant number (6) says:

"I am not satisfied with my condition at all.

I think if I was a housewife, taking care of children, it would be better, from what it is now. They would not have to, the problems they are facing now."

Participant number (2) states about her satisfaction, as:

"Although I have a lot of work to do but I like working. I enjoy when I solve a problem from a student and when he/she smiles. I therefore gain energy. I take this energy with me to my house and look after my children."

Erosion

It indicates reduction of mental and physical potentials of mother in passage of time, due to being inconsiderate to her own health, tolerating extensive forces including stress, anxiety, and depression that are due to unpleasant experiences during the growth of her children and because of the existing occupations. In this case, the participant says that:

"I had a small problem at a stage and I had a pain. I used to postpone treatments and it continued and my disease became chronic and acute. Then I noticed that I neglected myself and my children were upset about the thing that why I was so concerned about my work and inconsiderate about my health. Now I have intensive physical problems and my children blame me for having worked much."

"When I used to call my mother a number of times. Gradually I got hypertension and consumed various medicines. One day I had an argument with a student and I fainted. When I opened my eyes, I was in a hospital, had numb feet and hands. I was told I had brain stroke, and"

The core variable that appeared in this study was the role conflict. The data in this study shows that worries and mainly anxiety that are common in all the participants includes multiple stresses for family duties, work and existence of numerous roles, and also coordination of traditional and modern roles; among which the maternal role and relevant duties are having priority and importance. On the other hand, accepting various roles increases expectations for different roles by the children, spouse, family, and the community. This obligated the mothers within this study to respond to the expectation and needs of family and working roles.

Certainly this affects the maternal role of the mothers either intentionally or unintentionally, causing negligence in doing their important duties or other roles, or causes a balance between their roles by the support of the spouse, family and the relatives, or to tolerate the stresses all by her own. Anyways, what the mother has to face is the role conflict.

The participants have experienced various approaches as stated in their interviews and have had proposal in these regards, which are to be pointed in the conclusion section.

DISCUSSION

Considering the data origins and nature of the classes show that the working mothers have to bear extensive hardship in their experience from the starting point of their maternal role due to obligation in executing their work and providing the expected needs in social roles by the community without considering the special conditions of that period. Results of the study by Azgoli et al., [12] showed that 67.6% out of the total working mothers had moderate to high fatigue during pregnancies; 90% used to stand on their feet for more than 3 h a day; 58.2% expressed that despite fatigue, they continued their work; 93% confronted tiring and fatigue resources such as long distance to work, having shifts, long working hours per week and standing for long periods; 10% had early labor; and 18.5% had children with less weight. These finding are compatible with the finding of this research, expressing hard conditions for the participating women during their pregnancy period.

The thought of going back to work after the end of maternal leave and continuing occupation role as in the past is a worrying concern that mothers have about taking care of their children during their absence from home. The result of the investigation by Ukwuani and Suchindran^[13] in Nigeria, on the work by women and its effects on the feeding situations of the infants, showed that existence of very limited facilities and lack of official policies in that country regarding child care and working women, especially by the time of returning to work, have confronted the women with their child care, depriving the children from breast feeding and infections.

With regard to the present study, inadequate supports by the organizations from the working women during pregnancy have caused the mothers to be worried about their child care after the maternal leave. The finding by Abendroth *et al.*,^[14] showed existence of state and the working place supports, including the possibility for women to decide on their working hours, existence of a place to look after their infants and the possibility for the women to visit their children during the working hours and the supporting regulations have caused mothers to have more time in taking care of their children.

The working women in the study noticed that they should provide the various needs of their children under the supports by other to continue their role in working position; hence they had to temporarily assign replacements for themselves such as grandmothers, aunts, or kindergarten nurses or private companies' instructors.

The study by Gibson and Mace, [15] shows that mothers' relatives are more helpful to the girls than the fathers' relatives in child care, in Ethiopia. The result by Abendroth *et al.*, [14] from their research aiming in analysis of social supports from the working mothers in Europe show that Norwegian mother had the highest supports that needed less help by grand parents, in comparison to the working women in Italy and Spain. The findings are in conformity with the findings in this research.

Despite getting available aids from supporting sources and assigning the maternal role during the absence of the mother, it is expected that mothers immediately start their roles such as maternal, spousal and housing roles and provide the needs of the family members after their working and social roles. Hence, what the mothers under study experienced was multiple roles and confrontation with different expected roles by others. Therefore role intervention was a notion that the participating mothers experienced at this stage. The research result of Rastgar Khaled,[16] shows that working women face numerous roles that are considered as the creating source of stress in women. According to the investigation by Maghsodi and Bostan,[17] 46% of the working women stated that keeping up the child care affairs is their duty and 90% had difficulties in providing cleanliness and tidiness at home.

In the present research, all the mothers stated that they do their traditional roles in the house and being occupied has not caused those roles to fade, but they regarded the maternal role to have great importance, among others.

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Moreover, the younger the children are the more stress is occurred in mothers due to their variety of roles. It has been stated by the participants that by passage of time for the maternal and occupation roles, more efforts and required for the conformity and compatibility with different life conditions in this case, Parker and Arthur,^[18] believe that one important thing about working and the family is balancing the relevant role also becoming compatible with different conditions.

In the final stages of maternal role, the mothers having the feelings of neglecting maternal duties due to variety and contradicting of the roles are not satisfied with their maternal role, although they stated that they did best for their occupation. Also the mothers, who had supports, were satisfied with their social role as well as their maternal role. According to the qualitative study by Mc Carthy, [19] all the women had intensive emotions regarding their maternal roles, while the professional role was also important for them and they regarded this role to be satisfactory. Moreover, the finding showed that working women were capable of providing the working/family balance in their mid-professional age rather than the beginning of their work and they had better feelings in that age.

Not considering the physical and mental requirements such as related requirements to health due to shortage of time or giving priority to the children's needs and also unpleasant stresses and experiences from maternal and working roles simultaneously and the conflicts due to them cause reduction of energy and emergence of mental and physical fatigue for the mothers and hence they are confronted with a phenomenon called erosion. Most of the participants in this study had no proper feelings for being healthy and involved with light to moderate physical illnesses. But, the distance, number of children and family supports were also among the effective factors on the physical health of the anthers that should not be neglected. According to the finding by Jamshidi et al., [20] working women are significantly in a higher level that the housewives, regarding their social health, but no significant difference was observed between them with regards to their mental health.

Discussion about the core variable

The final result regarding the expressing of the process of maternal role in working women indicates that maternal roles is a concept that is rather exclusive, multilateral, gradual and affected by different factors. As stated, the different roles that women undertake may be in contradiction with each other. Role conflict is a social conflict and occurs due to stresses on the person for her to have different roles simultaneously. Therefore if the working mothers want to do their maternal roles, without considering their occupational work or being a housewife, they should tolerate difficulties and respond to various expectations and role conflicts.

Various studies have been done both in Iran and in foreign countries about the contractions between working and family responsibilities and about role conflicts among which the studies by Rastgar Khaled,[16] Maghsodi and Bostan,[17] Karatepe and Kilich, [21] Kinnunena et al., [22] Shockley and Allen[23] could be pointed. According to Maghsodi and Bostan, [17] 90% of women had difficulties in cleaning and tiding responsibilities, 66% of them had to prepare food the day before and 39% of them were alone in their child care and had no aids from their spouses. 46% of women stated that child care and taking care of children were their responsibility. 61% of mothers have no sufficient time for recreation. 70% of them have no adequate time for their make up.

Most of the findings of that research were in conformity with this study. The note to point is that the working participants who had more working hours during a week had to bear higher pressure as compared to the participants who were the members of the scientific board, in doing their assigned roles. According to Tavassoli, [24] 60% of women emphasized on the importance of the traditional role in house keeping and considered it to be prior to working outside the house. In this study, there is a contradiction between working as an economic activity in the community and maintaining the family and child care. Stating from Carter and Carter, Arian^[25] believes that the most important conflict that women face in families, with two jobs is the role conflict and hence balancing the conflicts regarding working and house affairs is a difficult task. This task should be done by the aid and support of the family members and the working place authorities.

In this regard, the result of the study by Emanuel^[26] that was done in Australia shows

that 81% of the women believed that social supports are related to developing the maternal role. Accordingly, the social support is the most important factor in developing maternal role, affecting successful compatibilities with maternal role, having self confidence and satisfaction in the ability for growing and taking care of the children.

According to this study, the cooperation and supports from the working place with mothers were in executing official statements for executing maternal leaves and using hourly leaves for breast feeding and better collaboration was done with scientific board members in affairs requiring cooperation and supports of senior authorities about the participant.

According to the performed studies, one way to reduce conflicts and pressure for the role of working mothers is full supports and cooperation with the working mother. This cooperation causes the mothers to have more time for the affairs regarding child care and performing their maternal role. In the present study, supports and cooperation with mothers have had direct relations with reducing role conflicts that they are facing.

CONCLUSIONS

Emergence of social and economic evolution has increased the trend of women's presence in the present community, from one side, and on the other side it has caused their confrontation with various family and social roles. Admitting various roles has caused emergence of different roles expectations and responding to them.

Therefore, working women have to put other roles into the margin by considering the essentials of one role, or they just have to fulfill the expectations. Since maternal role is one of the most important roles for women, this could intentionally or unintentionally affect the execution of the role. But the inevitable fact is that wherever in the world are the working women, they have similar concerns and their most important challenge is their maternal role and the quality in their child care. But as the finding of this research showed, the thing that is contributed to the working mother from the social and family combining roles is the role conflict due to simultaneity of their various roles. This will affect the process of their maternal role and it has caused the execution of this important role to face difficulties, to have a completely different process for the non-working women.

What is certain is that the level and amount of responsibilities and the expectation due to family roles are more than the duties in our community of the working roles, such that women should spend more energy and power on them. It is specially observed about maternal duties of working women, since Iranian women are mainly emotional and dependent on their children and the mental involvement for proper execution of the duties are always accompanied by their feelings.

Hence, according to the finding of the present research and other relevant investigations, it seems that the most important practical approach for reducing the conflict in the maternal roles of the working women and better execution of these roles is having family and social supports. Creation and establish family support could be verified via modification of working division in the family and avoiding traditional working division among family members, and emphasis on the role participation in family and also dividing the home duties between wife, husband and children. By doing this, the working mothers could have more time in spending for their children.

Regarding the social supports, the following activities could be the executing approaches and state supports for the working mothers that could satisfy and empower them in performing their maternal roles, in which case the children's health could be guaranteed and hence the concerns of mothers regarding the role conflicts could be reduced: modifying the rules for maternal leave, changing the weekly hours of work and providing part-time and flexible jobs (for all the women and not only the ones working for the government), constructing kindergartens in working areas, providing a suitable place for pumping the milk and storing it for the infants during breast feeding period and paying costs for taking care of children in institutions and kindergartens by government.

ACKNOWLEDGMENTS

The researches appreciate the entire participant who cooperated cordially in executing this project.

REFERENCES

1. Javaheri F, Daryapur Z. Occupational problems of women

- faculty members J Womens Stud 2008;2:79-106.
- 2. Hashemi A. A comparative study of female participation in the labor market and other countries. Women, development and the multiplicity of roles. Tehran: Publication of Olive Leaf; 2001. p. 302.
- 3. Haddadi M, Chaldi A, Sajjadi H, Salehi M. Relationship between occupational class and mental health in women. J Soc Welf 2011;40:107-27.
- 4. Sheikh M. Sociology of Women and Family. Tehran: Publishing Company; 2003. p. 125.
- Abedi H, Hosseini A, Shahriari M, Kazemi M, Keshvari M. Research in Nursing and Midwifery. Isfahan: Publication of Khorasgan University; 2008. p. 175-9.
- 6. Burns N, Grove SK. Understanding Nursing Research. 2nd ed. Philadelphia: WB Saunders; 2007. p. 225, 40.
- Streubert HJ, Carpenter DR. Qualitative Research in Nursing Advancing the Humanistic Imperative. 3rd ed. Philadelphia: Lippincott Co; 2003. p. 196-8.
- Streubert HJ, Carpenter DR. Qualitative Research in Nursing, Advancing the Humanistic Imperative. 4th ed. Philadelphia: Lippincott Williams and Wilkins; 2007. p. 215.
- 9. Heath H. Exploring the influences and use of the literature during a grounded theory study. J Res Nurs 2006;16:519-28.
- 10. Asgari M. Designing an adjustment model in hemodialysis patients. PhD thesis, Tarbiat Modares University Faculty Nursing; 2011. p. 62-4.
- 11. Salsali M, Movahedi A, Cheraghi MA. Grounded theory in medical research. Tehran: Boshra Publications; 2007.
- 12. Azgoli G, Nuryzdan S, Shams J, Alavi Majd H. Fatigue in pregnant women. J Nurs Midwifery 2007:59;12-8.
- Ukwuani F, Suchindran CH. Implications of women's work for child nutritional status in sub-Saharan Africa: a case study of Nigeria. Soc Sci Med 2003;56:2109-21.
- Abendroth A, Lippe T, Maas I. Social support and the working hours of employed mothers in Europe The relevance of the state, the workplace, and the family. J Soc Sci Res 2012;41:581-97.

- 15. Gibson T, Mace R. Helpful grandmothers in rural Ethiopia: A study of the effect of kin on child survival and growth. J Evol Hum Behav 2005;26:469-82.
- Rstgarkhald A. Relation between work/family: Gender differences in social support and enjoyment. J Womens Stud 2004;2:55-75.
- 17. Maghsodi S, Bostan Z. Difficulties of both domestic and social roles of women in Kerman. J Womens Stud 2004;5:129-50.
- 18 Parker P, Arthur MB. Giving voice to the dual-career couple. Br J Guid Couns 2004;32:3-23.
- Mc Carthy AM. Work-life integration: experiences of mid –career professional working mothers. J Managerial Psychol 2008;23:25-32.
- Jamshidi A, Bahadori M, Jahanbakhsh M, Molavi H. Comparison between mental health and social health of housewives and employed in Isfahan city. 1 Congress of Social Psychology, Tehran, Iran, 2011;121-3.
- Karatepe O, Kilic H. Relationship of supervisor support and conflict in the work–family interface with job outcome of frontline employees. J Tour Manag 2007;28:238-52.
- 22. Kinnunen U, Vermulst A, Gerris J, Mäkikangas A. Workfamily conflict and its relations to well-being: The role of personality as a moderating factor. J Personal Individ Differ 2003;35:1669-83.
- 23. Shockley KM, Allen TD. When flexibility helps: Another look at the availability of flexible work arrangements and work-family conflict. J Vocat Behav 2007;71:479-93.
- 24. Tavassoli GH. Can women work outside the home and reconciled. J Women's Stud 2004;2:26-30.
- 25. Arian KH. Ecological approach in counseling with women in the two families. J News Consult Res 2008;7:126-34.
- 26. Emmanuel EN, Creedy DK, St John W, Brown C. Maternal role development: The impact of maternal distress and social support following childbirth. Midwifery 2011;27:265-72.

Source of Support: Nil, Conflict of Interest: None declared.