

PERSONALITY TYPE AND WORK FAMILY CONFLICT IN FEMALE DOCTORS

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ABSTRACT

Objective: To assess the association between personality types and work-family conflict among female doctors. Moreover it was aimed that which personality type is more experience work-family conflict in female doctors.

Study Design: Cross sectional study design.

Place and Duration of Study: Study was conducted in Institute of Applied Psychology Lahore Pakistan from Dec 2012 to Jun 2013.

Material and Methods: The sample comprised of 154 female doctors selected from three teaching hospitals of Lahore. The age range of female doctors was 25 years to 45 years ($M = 30.56 \pm 5.96$). Type A/B behavior pattern scale and work-family conflict scale were used to assess variables.

Results: Correlation analysis showed that there was a significant positive relationship between personality type A and work inference with family plus family inference with work in female doctors. Linear Regression analysis revealed that personality type A emerged as a significant predictor of work inference to family and family inference to work.

Conclusion: The present research emphasizes the significance for medical doctor's organization and career guidance. Being adapting behaviors of type B personality, they experience less work family conflict and work for the betterment of society as well as personal self.

Keywords: Female doctors, Personality type A, Personality type B, Work-family conflict.

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INTRODUCTION

In hospital, healthcare workers perform their duties for the well being of people. As the burden on healthcare setting is increasing, responsibilities are shared by both male and female doctors. As women are growing in the labour force, maintenance of balance between work and home responsibilities are becoming more challenging. Due to performing work and family tasks simultaneously, women face conflict in their dual roles^{1,2}. Work family conflict is defined as a form of conflict between roles in which the role pressures from the work and family domains occur. These demands are mutually incompatible³.

As the conflict arises, personalities play vital role in experiencing and managing role conflict in

daily routine life. As the personalities develop, different behaviors are adopted by the individuals. Personality type could be defined as the psychological categorization of different types of behavior of the individual⁴. According to Pervin, there are two kinds of personality types e.g personality type A and type B which are entirely contrary to each other and come across in a continuum approach⁵. According to Friedman & Rosenman theory, personality type A behaviors are hostile, competitive, concerned with the acquisition of material goods, exaggerated sense of time urgency. And personality type B behaviors are relaxed, less ambitious, less impatient, and focuses more on quality of life because their health and well-being is causing main concern in health department. Although the personality types and ways of dealing with conflicting situations with their roles like family and workplace are diverse in different individuals but it seemed to be linked to the ultimate satisfaction of employees in their jobs⁶.

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Freudian perspective, attribution and compensation theories explain the work family balance and role conflict between family and work and also give proposed explanation for conflict in both roles^{7,8}. After studying this theoretical concept, although some boundaries of family and work are very complicated to transform but an individual create a difference somewhat by his/her motivation by changing behaviors^{9,10}.

In the light of previous literature, work family conflict is studied with different traits of personality like agreeableness, extraversion,

important for female doctors that attempt to perform their work with the highest achievable quality and for national health.

Thus, due to the essential nature of work-home balance, work family conflict has changed into a much investigated topic in today's organizational or industrial behavior research. Therefore, in the present research it was hypothesized that personality type A/B and work-family conflict are associated in female doctors and which personality type is more prone to be experience more conflict in life.

Table-I: Demographic characteristics of female doctors (n=154).

Variables	Frequencies	Percentage
<i>Education of the respondent</i>		
MBBS	111	72.1%
MBBS with specialization	35	22.7%
MBBS with specialization and further degree	8	5.2%
<i>Working experience of the respondent</i>		
2 to 5 years	104	67.5%
5 to 10 years	36	23.4%
More than 10 years	14	9.1%
<i>Work schedule flexibility</i>		
Yes	50	32.5%
No	104	67.5%
<i>Marital status of the respondent</i>		
Married	87	56.5%
Unmarried	67	43.5%
<i>Family system</i>		
Joint	60	39%
Nuclear	94	61%

conscientiousness, neuroticism, openness to experience, rather than A/B personality type. These are few researches in which trait/type of personality and work family conflict both studied by different variables like work flexibility, job commitment, job performance on different populations like banks employees, medical staff, university faculty members and overall workplace setting¹¹⁻¹⁴. So, there is a need to study work family conflict in relation to A/B personality type because balancing work and home demands and reducing conflict between the home and work domains are crucially

The rationale of this research was to examine the association between type A/B personality and work family conflict among female doctors because individuals with different personality types perceive and experience stress differently so it is necessary to know which type of personality individuals recognizes more conflict.

METHODOLOGY

Cross sectional study was conducted in institute of Applied Psychology, Pakistan in December 2012 to June 2013. Sample size was calculated by G power with medium effect size

which was 70. But the present study consisted of (n=154) female doctors through non probability purposive sampling from three teaching hospitals of Lahore. Female doctors with the age range 25-45 years with minimum experience of two years were selected to obtain more homogenous group. Less than two years experience and male doctors were excluded to control confounding.

Type A/B behavior pattern scale was used to assess personality type A (17 items) or personality type B (16 items). Total items of this scale were 33. Participants were marked their responses to each item scored on a five point

scale and work family conflict scale from the participants, a consent form was signed by them to inform about the nature/purpose of the research as well as assured that confidentiality of their responses would be maintained. Participants had the right to withdraw from the study at any time they wished. Accurate reporting of the results was done.

Data Analysis

Data were analyzed using SPSS version 17. Descriptive statistics like means and standard deviations for continuous variables and

Table-II: Correlation between personality type and work family conflict (n=154).

Variables	M(SD)	Personality type B			Work to family conflict		Family to work conflict	
		1	2	p	3	p	4	p
Personality type A	57.47 (8.17)	-	0.04	>0.63	0.31	<0.000	0.39	<0.000
Personality type B	53.64 (7.12)	-	-	-	0.02	>0.837	0.06	>0.465
Work to family conflict	29.87 (5.79)	-	-	-	-	-	0.67	<0.000
Family to work conflict	27.63 (5.84)	-	-	-	-	-	-	-

Table-III: Description of outcome variables of personality types A and personality type B as predictors of work to family conflict and family conflict to work in female doctor (n=154).

Outcome Variables	Predictor	R2	ΔR2	B	t	p
Work To Family Conflict	Personality Type A	0.09	0.08	0.22	3.94	<.000
	Personality Type B	0.09	0.08	0.00	0.064	>.949
Family To Work Conflict	Personality Type A	0.16	0.15	0.28	5.25	<.000
	Personality Type B	0.16	0.15	0.04	0.59	>.556

Likert scale ranging from strongly agree (1) to strongly disagree (5)⁴.

Work family conflict was measured by work family conflict scale consisted of 18 items, and the responses were taken on the basis of five point Likert scale from 1 (strongly disagree) to 5 (strongly agree) with nine items for each direction like Work Inference with Family and Family Inference with Work⁶.

Keeping in view all the ethical consideration, permission from the authors of the scales, concerned authorities and participants were taken. A consent form was given to the participants to attain their willingness to play a part in the study. Before administration of the questionnaires e.g type A/B behavior pattern

frequencies for categorical variables were calculated. Pearson product moment correlation was performed to find out the relationship between personality types of women doctors with work to family conflict and family to work conflict. Linear regression analysis was used to predict work to family conflict and family to work conflict. As *p*-value was <0.05 was considered as significant.

RESULTS

The mean age of female doctors was 30.56 years (SD=5.96). Demographic description is given in table-I.

Personality type A had significant positive correlation with work family conflict ($r=0.31$, $p<0.01$) and family to work conflict ($r=0.39$,

$p < 0.01$). It demonstrated that type A behaviors increased the overall work family conflict in female doctors (table-II).

Results revealed that working hours, work schedule flexibility and personality type A emerged as significant predictors of work family conflict domains. Personality type A was significant positive predicted work inference to family conflict over and above family inference to work conflict which meant that when personality type A behaviors were high ultimately overall work family conflict would be high (table-III).

DISCUSSION

Findings of the research revealed that female doctor with personality type A are more experienced work family conflict with their jobs rather than female doctor with personality type B. Consistent findings were also found by Andreassi and it concluded that the role conflict was type A personality behavior and was the source of stress in organizational employees¹⁵. So, personality type A individuals experienced high conflict between work and family and ultimately satisfaction with job had been decreased¹⁶. Significant positive correlation between type A personality and family inference with work ultimately leads to role conflict. Frone, Russell, and Cooper conducted a research in which work family conflict reflected some physical outcomes in the individual body and different problems or physical outcomes were more common in people with personality type A behaviors. So, physical healths of people with personality type A behaviors were compromised¹⁷.

Previous literatures were also sounded by current findings like type A behavior associated with inter-role conflicts rather than type-B personality. Other consistent findings represented personality characteristics as predictors of social support quality and their perception of managing work and family environment. It also showed that type A female had higher need of achievement as compared to type B personality so type A personality was more anxious than type B. Due to less anxious

and less concern on achievement of type B personality behaviors so they experienced less work family conflict at their work place¹⁸. Type A professionals seemed to be more dominant, responsible, self-accepting, flexible, and achievement oriented than type B¹⁹.

Type A female were less satisfied with social support as compared to Type B. Type A female experienced relatively less control over work and family environment that might be one of the important factor contributing toward their experiences of conflicts or work family conflict. Factors affecting work family conflict are workloads, work flexibility, and family role conflict²⁰. In the current research, work schedule flexibility was playing a role and acted as a buffering factor for managing conflict that arise in both demands. Marital status and family system did not relate with the conflict in Pakistan culture because currently majority of women lived in a nuclear family system (61%), having no babies before aged thirty years ($M=30.56$). So, conflict between babies and home responsibility before mean age might be balanced with work schedule flexibility in hospital setting. Working hours were reduced as in medical officers/post graduate trainees (22.7%) and professors (9.1%) as compare to house officers (72.1%). Role conflict can be managed by providing career guidance and also facilitating employees to align individual' personality types in relation to their careers in future so that they practiced least conflict with their external world and perform effectively at work and increase their productivity in health department.

CONCLUSION

The present research emphasizes the significance for medical doctor's organization and career guidance. Being adapting behaviors of type B personality, they experience less work family conflict and work for the betterment of society as well as personal self.

In a society, healthy people are the symbol of human happiness, well-being and economic growth. Role of doctors are essential in this

respect. It concludes that female doctor with personality type A are more experienced work family conflict with their jobs rather than female doctor with personality type-B. So, focus on health workers' personality traits would play central part in entire population development in physical, economical and social setting.

CONFLICT OF INTEREST

This study has no conflict of interest to declare by any author.

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