CHAPTER 8

Work Experiences, Stress and Health among Managerial Women: Research and Practice

Ronald J. Burke
York University, UK
and
Astrid M. Richardsen
BI Norwegian School of Management, Norway

8.1 INTRODUCTION

This chapter reviews research on work experiences, stress and health among managerial women. The chapter is more relevant today than when it was originally written for the first edition of this Handbook. Over the past decade, there is evidence that the percentage of women who hold managerial positions has increased (Russell, 2006; Stroh, Langlands & Simpson, 2004). However, there is still a great disparity when comparing the number of women in the labour force with the number of women in top management. In an increasingly global business environment, organizations need high levels of talent to be successful, and it may be more difficult now to attract and retain such talent (Davidson & Burke, 2004). As more women enter the workforce with appropriate levels of education, experience, training and skill, they comprise a large percentage of the talent pool. Organizations historically have done a relatively poor job of managing their talent, but ignoring or misusing the talents of half the population is a luxury that organizations cannot afford today. Thus, further understanding of the work experiences, satisfactions and stressors, and well-being of these women should become an urgent
priority. Too many women opt out of large organizations, and those wanting to re-enter the workforce have difficulties doing so (Hewlett & Luce, 2005). Fortunately the women in management area continues to attract research attention (Burke & Mattis, 2005; Eagly & Carli, 2007; Vinnicombe & Banks, 2003).

The focus on managerial women, a highly educated, motivated and well-paid group, is taken in this chapter because this group is growing in size and importance, serves both as an important model for younger women and as an indicator of women’s progress towards equality, and may be frustrated with their relative lack of progress and increased stress (Davidson & Burke, 2004; Fielden & Davidson, 2001; Lyness & Terrazas, 2006). It goes without saying that other groups of women not included in this review may experience as much or even more work stress.

There are several reasons why this chapter makes an important contribution. Firstly, the costs to organizations, women and men resulting from stress-related illnesses are both large and growing (Campbell Quick et al., 1997). Secondly, there is evidence that the managerial job itself is a demanding one (Burke, 1988). Thirdly, there is a growing consensus that work stressors are associated with a range of short-term quality of life and health outcomes (Repetti, 1993).

The chapter builds on established occupational stress research frameworks (Jex & Beehr, 1991); it extends them to incorporate work stressors and experiences unique to women. Such frameworks commonly include a number of work stressors (e.g., overload, role conflict, work–family conflict), stress responses (physiological, psychological, behavioural), moderating factors (e.g., individual variables, coping efforts), and long-term consequences for individual health and work performance. This review focuses primarily on various stressors, individual differences and coping; while the strains and long-term consequences encompass a variety of emotional and physical health outcomes considered in one or more specific research studies. The chapter emphasizes the breadth and variety of research in this area rather than depth. A second purpose of this chapter is to spur organizational initiatives to reduce work and family stress and improve health. The field offers opportunities for both research and practice, which, if well conceived and undertaken, should improve the quality of life and health of managerial women (Ilgen, 1990; Nelson & Burke, 2001).

The following content areas are addressed:

- Work experiences of female and male managers
- the glass ceiling
- barriers to women’s advancement
- cross-cultural research
8.2 WORK EXPERIENCES OF MANAGERIAL WOMEN AND MEN

8.2.1 The Glass Ceiling

There is considerable evidence that managerial women face a ‘glass ceiling’ that limits their advancement to top management in large organizations (Lyness & Terrazas, 2006; Morrison & von Glinow, 1990; Morrison, White & van Velsor, 1987; Stroh et al., 2004). The glass ceiling refers to a subtle and almost invisible, but strong barrier that prevents women from moving up to senior management levels. There is an emerging belief that the glass ceiling exists worldwide, based on labour statistics which show that although women represent close to half the labour force in most industrialized countries, their representation in managerial jobs is much lower (Davidson & Burke, 2004; Lyness & Terrazas, 2006). Such gender segregation of management jobs exists in many countries and refers to both the fact that women are usually found at the low and middle management levels, while the majority of senior level management positions are held by men; and the fact that at the same managerial level, women are usually found in staff or support positions, and are not as highly represented as men in positions that offer promotion opportunities (Lyness & Terrazas, 2006). For example, a study of gender differences in job moves found that among managers in staff positions, women were less likely than were men to move to line positions or different organizational functions in the company (Lyness & Schrader, 2006).

Recent reviews of the research literature and of international labour statistics indicate that despite some increase of women in top management positions over the past decade, the glass ceiling still persists (Lyness & Terrazas, 2006; Stroh et al., 2004). Three hypotheses have been suggested to explain why this ceiling has remained impenetrable. The first builds on individual differences in attributes and ways in which women are different from men. This
hypothesis suggests that women’s education, training, attitudes, behaviours, traits and socialization handicap them in particular ways. Almost all research evidence shows little or no difference in the traits, abilities, education and motivations of managerial and professional women and men (Powell, 1999).

A second hypothesis builds on notions of bias and discrimination by the majority towards the minority. It suggests that managerial and professional women are held back as a result of bias and stereotypes of women, particularly in organizational selection and promotion decisions (Heilman, 1995). Such bias or discrimination is either sanctioned by the labour market or rewarded by organizations, despite the level of job performance of women (Lyness & Heilman, 2006). In addition, there is widespread agreement that the good manager is seen as male or masculine (Heilman et al., 1989), although recent studies have found that ratings of good leadership attributes reflect less emphasis on masculine characteristics than they did 15 to 30 years ago (Duehr & Bono, 2006; Powell, Butterfield & Parent, 2002; Sczesny et al., 2004). Thus, there is some research support for this hypothesis.

The third hypothesis emphasizes structural and systemic discrimination as revealed in organizational policies and practices, which affects the treatment of women and limits their advancement (Kanter, 1977). These policies and practices include women’s lack of opportunity and power in organizations, the existing sex ratio of groups in organizations, tokenism, lack of mentors and sponsors, and denial of access to challenging assignments. This hypothesis has also received empirical support (Burke & McKeen, 1992; Lyness & Thompson, 2000). The glass ceiling is the result of barriers to women’s career advancement.

8.2.2 Barriers to Women’s Advancement

There is considerable agreement on the barriers faced by managerial women. Morrison (1992) listed six as most important: (i) prejudice, treating differences as weaknesses; (ii) poor career planning and development (lack of opportunities for women); (iii) a lonely, hostile, unsupportive working environment; (iv) lack of organizational savvy on the part of women; (v) the old boys’ network (greater comfort men have in dealing with other men); and (vi) difficulty in balancing career and family (overload, conflict, stress). Lyness and Thompson (2000) identified the following: lack of fit with the male-dominated culture at senior management levels; exclusion from informal networks with male peers; lack of effective mentoring and difficulty obtaining mentors; more dependence on merits and consideration of objective qualifications for women’s advancement in comparison to men’s; stereotyping and preconceptions about women’s abilities and suitability for
leadership positions; difficulties in obtaining challenging developmental assignments needed for advancement; managers’ aversion to placing women in line positions; and difficulties in obtaining opportunities for geographical mobility. In a review of persistent barriers and career counselling for women in management, Russell (2006) outlined the following; discriminatory attitudes and sex-role stereotypes, discrimination in the workplace (e.g., compensation discrimination, limited access to training and development opportunities, biased performance evaluations, sexual harassment), and social isolation (e.g., tokenism, few female role models, limited access to mentoring, limited access to informal networks and communication channels). Yet others have included difficulties combining work and family responsibilities (Lyness & Terrazas, 2006).

Morrison (1992) proposed a model of leadership development in which she suggested three critical components: challenge; recognition; and support. She observed that in many organizations, the barriers to advancement faced by women provided them with inordinate levels of challenge, without similar increases in recognition and support. Ohlott, Ruderman and McCauley (1994) provided empirical evidence that suggests this may in fact be the case. They surveyed male and female managers about developmental components in their current jobs. Their results suggested that men experienced some greater task-related developmental challenges, but women experienced greater developmental challenges resulting from obstacles that they faced in their jobs. A study comparing matched samples of male and female executives on perceived barriers and facilitators of advancement, also found that women experienced greater barriers, especially lack of culture fit and being excluded from informal networks, even if career success for both genders was positively related to breadth of experience and developmental assignments (Lyness & Thompson, 2000).

8.2.3 Cross-Cultural Research

An increasing number of studies have examined managerial women’s work experiences, stress and health across countries (see Davidson & Burke, 2004). The evidence from these studies show remarkable similarity across countries when it comes to the number of women in the workforce, the number of women in management, and the number of women in executive positions (in pressBurke, in press). However, there are few large-scale studies that have provided cross-cultural comparisons. One large-scale study of cultural/societal values and work (Hofstede, 1980) did not include measures at the level of specificity to illustrate managerial women’s work experiences, or permit comparisons with those of men.
Bajdo and Dickson (2002) conducted a study of 3544 individuals from 114 organizations in 32 countries based on the GLOBE Research Program (House et al., 1999). They found that organization members reported high percentages of women in management in organizations with high shared values of humane orientation and high gender equity. Also, high percentages of women in management were reported in organizations that had organizational cultural practices which emphasized high humane orientation, high gender equity, high performance orientation, and low power distance. The authors concluded that organizational cultural practices related to gender equity were the most important predictor of women in management.

Burke (in press) reviews some of the writing on cultural values and women’s work and career experiences. Two aspects of his review are illustrative of the cross-cultural work conducted to date. First, he reports that relationships of particular work experiences (e.g., training and development, support and encouragement) were related to work and well-being outcomes (job and career satisfaction, exhaustion) in the same way in some various countries (e.g., Canada, Bulgaria, Norway). Second, he notes that measures of career priority, the extent to which women place their careers above or at the same level of importance as family, were generally similarly related to work and well-being outcomes in several countries (e.g., Bulgaria, Canada, Norway, Singapore, Turkey). This similar relationship of work experiences and work and health outcomes was observed in different samples in the various countries.

These studies have identified the barriers to women’s advancement that commonly exist in organizations. In addition, women report greater obstacles to advancement than do men. One consequence of these additional barriers is heightened work and family stress.

8.3 OCCUPATIONAL STRESS AND HEALTH

There is considerable evidence that the experience of work stress among managers is associated with undesirable consequences (Cooper & Payne, 1988). Most of this research has involved male managers since men have traditionally filled managerial roles (Burke, 1988). As more women have entered managerial jobs, they have increasingly become subjects of stress research (Davidson & Fielden, 1999). With the appearance of this body of work, some researchers have begun asking whether women or men experience more work stress, exhibit more negative consequences, or have different coping or social support responses (Fielden & Cooper, 2002; Portello & Long, 2001). Recent studies have revealed that managerial women experience unique sources
WORK EXPERIENCES, STRESS AND HEALTH AMONG MANAGERIAL WOMEN 153

of stress related their minority status and gender (Fielden & Davidson, 2001).

Offerman and Armitage (1993), Davidson and Fielden (1999) and Langan-Fox (1998) reviewed the literature on stress and health outcomes among women managers. They noted that some stressors were shared by women and men (e.g., role conflict, overload, ambiguity), but that women experienced additional work stressors unique to them, as well as exhibiting different ways of interpreting and coping with the uniquely female and the common stressors. These researchers categorized stressors experienced by women managers into three groups: (i) from society at large (work–family interface, off-the-job support, attitudes towards women in management, discrimination); (ii) from organizations (e.g., on-the-job support, sexual harassment, tokenism, sex discrimination, old boys’ network); and (iii) from women themselves (type A behaviour, personal control, self-esteem). The stress experienced by managerial women results from a combination of sources from all three groups, with health outcomes affected as a result. In addition, in keeping with previous work stress frameworks, individual differences operated at several places to influence the stress–health process.

Davidson and Cooper (1992) have contributed much to our understanding of the effects of work and extra-work stressors on managerial women. In addition, some of their research has compared the experiences of women and men. They proposed a research framework in which demands (stressors) in three arenas (work, home and social, and the individual) serve as precursors of a wide range of stress outcomes. They reviewed differences and similarities between female and male managers in relation to work stressors in the three arenas as well as stress outcomes, and reported that female managers scored higher on both stressors and stress outcomes compared to their male counterparts. Women managers also reported significantly greater type A behaviour.

Several studies have found differences in the sources and amounts of stress experienced by men and women. Iwasaki, MacKay and Ristock (2004) used a series of focus groups to explore the stress experiences among female and male managers and found that women managers reported more emotional stress than men related to relationships and perceived responsibilities for caretaking both at work and at home, and more stress related to the challenge of balancing home and work aspects; whereas men reported more physical health problems and stress related to technology.

In a study of stress and workload among female and male managers, Lundberg and Fankenhæuser (1999) found that both women and men reported positive attitudes towards their work situation. However, women reported significantly more stress because of lack of communication, lack of support from superiors and having to perform better than men to have the same
chance of promotion. In addition, women spent twice as much time on unpaid and household work than men, despite no differences in time spent in paid work, and women managers also showed higher physiological stress responses after work than did men. Thus, despite the fact that both women and men experience their jobs as challenging and stimulating, the data indicate a more favourable situation for men than for women (Lundberg & Fankenhaeuser, 1999).

Davidson, Cooper and Baldini (1995) studied occupational stress in 126 female and 220 male undergraduate business majors. Their results indicated that female middle and junior-level managers reported being under greater pressure than their male counterparts. Women, not surprisingly, reported greater stress on gender issues, such as discrimination, prejudice and home–work conflict. Females also indicated more mental and physical ill health symptoms than men. Similarly, Hochwarter, Perrewe and Dawkins (1995) found that women managers perceived more job demands and less job control than their male counterparts in both male-dominated and female-dominated occupations.

This limited review of the occupational stress literature suggests that although women and men share some common work stressors, women also experience unique sources of stress. These emanate from discrimination and bias, role conflict and work–family demands, resulting in overload.

8.3.1 Role Conflict

One of the most common occupational stressors is role conflict – that is, the simultaneous occurrence of two (or more) sets of pressures, such that compliance with one would make compliance with the other more difficult. Another type of role conflict is inter-role conflict with pressures from other group memberships. For example, pressures to spend long hours at the office may conflict with demands or expectations from family members to spend time at home. Role conflict can occur at work, within the family and between work and family roles.

Greenglass, Pantony and Burke (1988) examined relationships between role conflict, work stress and social support in women and men, and the psychological consequences of role conflict. Their results indicated that role conflict was higher in women than in men. Significant correlations between role conflict and work stress and social support, primarily in women, suggested a greater interdependence between work and family spheres in women.

In a study examining the relationships between work characteristics, job pressures, organizational supports and health indicators among 191
managerial women, Richardsen, Burke and Mikkelsen (1999) found that women who experienced high work conflict and work–family pressures also reported poor health outcomes and little life satisfaction. Organizational initiatives to support and develop women’s careers were associated with low exhaustion and psychosomatic complaints, and high life satisfaction.

8.3.2 Work and Family

Work and family are the major life roles for most employed adults. Work–family conflict is experienced when pressures from work and family roles are incompatible, such that participation in one role makes it more difficult to participate in the other (Friedman & Greenhaus, 2000). Research evidence has shown that work–family conflict has negative effects on well-being in both work and family (Burke & Greenglass, 1987). Building on their earlier work, Greenhaus and Parasuraman (1994) proposed two dominant forms of work–family conflict: time-based conflict and strain-based conflict. Time-based conflict is experienced when the time devoted to one role makes it difficult to fill the requirements of the other role. Strain-based conflict is experienced when the strain produced in one role spills over or intrudes into the other role. In addition, work interference with family may have different antecedents and consequences than family interference with work. Work–family conflict is more likely to occur than family–work conflict (Greenhaus & Parasuraman, 1999), perhaps because the organization’s demands on an individual’s time are more important since the employer provides the salary needed to provide for one’s family.

Extensive work–family conflict can lead to dissatisfaction and distress within the work and family domains (Frone, Yardley & Markel, 1997; Netermeyer, Boles & McMurrian, 1996; Parasuraman et al., 1996). In a cross-national study of managers in England, the United States and Hong Kong, Wharton and Blair-Loy (2006) found that job and workload characteristics were related to higher worries about the effect of long hours on the family. For every additional hour worked, the odds that respondents would worry about the effect on family increased by 7%. In addition, in all three countries, women managers experienced higher work–family conflict than men, and women with young children were most likely to experience work–family conflict. Similar results were obtained by Blair-Loy and Wharton (2004) in a study of 500 finance managers. While mothers and fathers did not differ in terms of the average number of hours worked per week, women managers reported greater work–family conflict. Parents who experienced more scheduling flexibility and who took advantage of corporate flexibility policies were less likely to experience work–family conflict. There
is also evidence that such conflicts can have negative impacts on parenting (Stewart & Barling, 1996).

Interviews with senior female international managers have revealed that women experienced extra strain and guilt feelings about balancing an international career with family responsibilities, and therefore work–family conflicts are a major threat to females partaking in international management (Linehan & Walsh, 2000). The majority of female managers also perceived organizational inflexibility, gender role expectations and ignorance of non-work arenas by the company as obstacles to their career success. These studies indicate that organizations can no longer treat the arenas of work and non-work as separate spheres (Kirchmeyer, 1993).

### 8.3.3 Dual-Career Couples

Most managerial women develop relationships with partners who are likely to be career-oriented, hence creating the dual-career couple (Gilbert, 1993). Experts have predicted that the number of dual-career couples will continue to increase (Hertz, 1986). This trend has obvious implications for managerial and professional women, who historically have been predominantly single (never married, separated, divorced) and childless (Brett, Stroh & Reilly, 1992). The effects on women of being in a dual-career situation are more pervasive since relatively more married managerial women than men are in such relationships. In addition, the impact of dual-career couple status is greater for women than for men (Lewis, 1994; White, Cox & Cooper, 1992). For example, in a study of married couples, women reported significantly greater effect of marital and family stress, and less perceived spousal support for their careers than did their male partners (Phillips-Miller, Campbell & Morrison, 2000).

Research has also shown that there are cross-over effects (the process by which a stressor or strain experienced by one person affects the level of stress or strain in another person) of work–family conflict from one spouse to the other (Hammer, Bauer & Grandey, 2003; Westman & Etzion, 2005). In a study of military women and their spouses, both job and family stressors predicted work–family conflicts for women, but not for men (Westman & Etzion, 2005). When number of children, job stress and family stress were controlled for, spouses’ work–family conflict contributed significantly to wives’ work–family conflict and vice versa. Hammer et al. (2003) studied effects of couples’ work–family and family–work conflict on withdrawal behaviours at work, defined as interruptions, lateness and absence. They found that spouses’ family–work conflict was positively related to wives’ absence from work, whereas wives’ family–work conflict was positively
related to spouses’ interruptions at work and absence. These studies clearly indicate some of the pressures of dual-career couples.

8.3.4 Sexual Harassment

Sexual harassment is a widespread problem in the workplace with estimates ranging from 28% to 90% for females and 14% to 18% for males (Fitzgerald, Gelfand & Drasgow, 1995; Schneider, Swan & Fitzgerald, 1997). Sexual harassment is ‘any behavior of a sexual nature that an individual perceives to be offensive and unwelcome (whether or not it is legally or conceptually defined as such)’ (Bowes-Sperry & Tata, 1999, p. 265). It has been proposed that sexual harassment has three components: gender harassment (hostile or insulting attitudes or behaviours); unwanted sexual attention; and sexual coercion (sexual cooperation linked to job outcomes) (Gelfand, Fitzgerald & Drasgow, 1995).

Consequences of sexual harassment can be viewed as job related, psychological/somatic and organizational. Fitzgerald and his coworkers (Fitzgerald et al., 1997) reported a relationship between self-reported sexual harassment and headaches, sleep disturbances and psychosomatic symptoms (reduced self-esteem, increased stress, anger, fear, depression and anxiety). The dynamics and consequences of sexual harassment of women managers in non-traditional professions have also been outlined by Collinson and Collinson (1996). Such consequences have both individual and organizational costs.

The research programme headed by Gutek (1985) has contributed much to our understanding of the impact of social sexual behaviour and harassment on women, men and organizations. In the area of sexual harassment, she found that women reported more sexual harassment than men, that male harassers were not demographically different from other men at work, that women who were harassed were usually afraid that they would be blamed for the incident, and did not lodge formal complaints because they did not want to ruin the harasser’s career and believed that their organization would not do anything anyway. In contrast to women, who felt insulted, men were generally flattered by sexual overtures from women. It is clear that sexual harassment creates significant problems for both individuals and can impact negatively on work settings.

8.3.5 Organizational Downsizing

Significant reorganization or downsizing of firms has been commonplace throughout the past decade and will continue during the next. The
accumulating evidence indicates these changes typically have profound effects on both survivors and victims of job loss, almost always negative (Noer, 1999). It is also clear that women and men are likely to be affected in similar ways.

Women, however, may experience some unique issues associated with corporate restructuring. Interviews with senior women managers who voluntarily left a public sector organization in the midst of restructuring found that the most cited reasons were the lack of opportunities for career advancement and stress (Karambayya, 1998, 2001). In addition, these women commonly reported that they believed the restructuring process had exacerbated existing gender issues, and created a backlash against women that would hinder their career prospects. Senior management appeared to close ranks, increasingly appearing to be an old boys’ club. Women were often over-represented in support functions, common targets of cost cutting. Women were also likely to be the most recent entrants to senior management ranks and did not have the personal and professional networks to protect them. The lean and mean values of the organization became increasingly antithetical to their personal values. These preliminary findings suggest that managerial and professional women may be particularly vulnerable to the effects of organizational restructuring.

8.4 RESEARCH AND PRACTICE

8.4.1 Workplace Flexibility

The findings related to unique workplace stressors experienced by managerial and professional women indicate that rigid work schedules and work overload interfered with women’s satisfaction and family life (Burke & Greenglass, 1987). As a consequence, more organizations are currently experimenting with a variety of programmes to provide employees with greater flexibility in work schedules (Rodgers & Rodgers, 1989).

Mattis (1990) investigated various types of flexible work arrangements for managers and professionals in major US corporations: part-time work, job sharing and telecommuting. She reported that most employees select flexible work arrangements to balance work and family responsibilities. Although part-time work was the most common flexible work option for managers in the companies studied, both job sharing and telecommuting showed increasing acceptance. Despite these findings, the number of employees on flexible work arrangements constitutes a small percentage of the total company workforce.
Organizational resources (e.g., flexible working hours, a mentor or role model) were associated with fewer symptoms of strain and greater job satisfaction in a sample of 195 female personnel professionals (Nelson et al., 1990). Burke and McKeen (1994), in a study of 792 managerial and professional women, built on the stress literature and extended it to include work and career experiences associated with career advancement of women. The dependent variables were aspects of emotional well-being, which have long been a staple in stress research. Specific work experiences (e.g., support and encouragement, challenging jobs, the absence of strain from conflict, overload and ambiguity) and work outcomes (considered as short-term responses to work conditions) were fairly consistently and significantly related to self-reported emotional well-being in this large sample of managerial women. These studies show that organizational support for balancing work and non-work can increase health and ultimately work performance.

8.4.2 Intervention and Policy Implications

It is important to target interventions relating to work stress and health since women have unique needs and experiences (Nelson & Burke, 2000a, 2000b). Because executive women have more resources at their disposal than other workers, it is tempting to argue that they should not be targets for organizational interventions. They may be healthier than women at lower levels of the organization, but it is especially important that they are healthy. As decision makers and policy setters, they hold the keys to the well-being of the organization. They also serve as models for the health-related behaviors of the people they lead. An awareness of the needs of different managerial groups can reshape the culture of the organization in healthy ways by broadening and enriching the majority culture. For example, changing an inflexible, long-working-hours culture benefits not only women, but men as well.

For male and female executives alike, preventive management involves enhancing strengths and managing risks. Preventive management provides a three-part framework that can be used to develop interventions to improve the health of executive women. There are three levels of interventions: primary, secondary and tertiary. Primary preventive efforts are directed at eliminating or reducing the sources of stress or the risk factors. Secondary preventive efforts focus on helping executive women manage their responses to the inevitable demands of work and home. Tertiary prevention involves healing executive women and organizations through appropriate professional care.

*Primary prevention* efforts should focus on the stressors of politics, overload, barriers to achievement, sexual harassment and other social-sexual
behaviours, and work–home conflict (Burke, 1996). Research findings suggest that one of the issues that must be addressed by organizations is how to alter employment demands so that they mesh more easily with family responsibilities. Unfortunately, most employers do not consider their employees’ concerns as family members to be organizational concerns (Friedman, 1990). Policies and practices are designed as if responsibilities outside the job were subordinate to work demands. If, rather than ignoring these, companies were to acknowledge them and assist their employees, a great deal of employment–family conflict could be alleviated (Friedman, DeGroot & Christensen, 1998). By offering flexible work schedules, alternative work arrangements like telecommuting, and company assistance with childcare and eldercare, such interventions can help women deal with overload and work/home issues (Mattis, 1994). Childcare is a demand on the family that poses conflict between work and family interests, particularly in the single-parent family. While childcare and eldercare are offered more frequently by large corporations, most medium-sized and small organizations have yet to adopt these benefits.

Politics, barriers to achievement and sexual harassment can be effectively diminished by aggressive organizational efforts in terms of corporate policy, and a system of rewards that reinforces equitable treatment of all organizational members (Schwartz, 1992). To address the issue of wage differential, reward systems that promote equitable pay for women are necessary (Stroh et al., 2004). In addition, audits of development programmes should be conducted to see whether women are unfairly disadvantaged in terms of development opportunities. It is also important to develop zero-tolerance policies for social-sexual behaviours and sexual harassment.

Efforts to build social support, such as mentoring and networking programmes, can be of special benefit to executive women (Kram, 1996). The phrase ‘lonely at the top’ certainly applies in this case, and programmes that foster connections with other executives can help female executives gain social support and build important networks. Mentoring programmes allow women to be either mentors or protégés, or both, and being a provider of social support to others also has beneficial health effects. In addition, mentoring and networking efforts benefit the organization by developing a diverse talent pool of future executives.

Executive women also have a responsibility for preventively managing their health. At the primary level, the most important action is to identify sources of stress and work towards managing or mitigating them. Part of primary prevention is changing the stressor. Alternatively, executive women can develop personal resilience through changing their perceptions of stressors. All executives suffer from stress of some form, and often do not take the time to do a careful self-analysis to pinpoint exactly the causes of stress. A
personal stress management plan, developed through careful introspection, may be the best insurance against burnout.

It is also important to recognize the inevitability of work–home conflict and work to manage it. Women executives need to ask for programmes like flexible work arrangements and for assistance from other family members such as spouses. They need to recognize that asking for help is a sign of strength, and that they can overcome their own limitations by asking for help from others.

*Secondary prevention* efforts focus on helping women manage their own responses to stress, and usually come in the form of exercise or ways to emotionally release tension. Organizations can assist women in several ways, including making exercise facilities available. Interventions that educate women about the stress management benefits of exercise and encourage them to engage in exercise are also warranted. Research has found that women are less likely to utilize exercise as a coping technique than are men. This may be so because women have less discretionary time to pursue options like health club memberships, and often must find childcare to be able to exercise. Organizations can provide convenient on-site exercise facilities with babysitting services, along with flexitime, to help remedy this problem. Referrals to appropriate exercise facilities offer another alternative. Companies may also encourage training in yoga and meditation, which has been found to be powerful antidotes to the stress of executive life.

Secondary prevention efforts may include encouraging networking groups to facilitate emotional release. Support groups to facilitate emotional release and training in relaxation methods can help women managers deal more effectively with the transition from work to home environment with less stress spill-over. Talking with trusted colleagues can provide emotional ventilation, allowing executive women to work through their experiences and benefit from input from others, and thereby increase problem solving.

The suggestions for women to take responsibility for secondary prevention parallel those for the organization, e.g., making exercise a daily ritual, learning a meditation technique, and talking to others. It must be noted, however, that secondary prevention alone is a palliative technique. Without accompanying primary interventions that focus on changing the stressors, little headway can be gained by executive women or organizations.

*Tertiary prevention* efforts are directed at symptom management or at healing the wounds of executive life. It is essential that employee assistance programmes recognize the special needs of women in provision of services and/or referral to appropriate professional care. Certain behavioural distress symptoms, such as eating disorders, alcohol abuse and smoking, may be more effectively treated with gender-specific interventions. Organizations have a major role to play in this level of prevention.
Executive women must also take responsibility for tertiary prevention. This can be accomplished by developing a network of qualified professionals to rely on. This means establishing relationships with physicians, psychologists and other trained professionals in advance of the need so that they will be available in times of crisis.

The three-level prevention framework provides ways of understanding what both executives and organizations can do to manage risks and enhance health. Care must be taken in these efforts to recognize that women at different life stages may have different needs. Childcare assistance, for example, may not be a high priority for mid-life women. This raises the importance of dialogue between executive women and others in the organization. To develop interventions that improve the health and well-being of executive women, decision makers must listen to women’s concerns and ascertain what they need. The perceptions of others concerning what might benefit executive women may not be accurate.

The health and well-being of the organization is dependent on the health and well-being of all of its members. Women at the top of the organization are no exception. In a study mentioned earlier, company initiatives in general areas likely to address some of the demands experienced by managerial and professional women, included work and family programmes, flexible work arrangements, leadership and career development, mentoring programmes, and total cultural change (Mattis, 1994). The most proactive approach organizations can take is to change the source of stress; that is, find out what is causing executive women’s stress and modify the cause. The three-part preventive management framework proposes that interventions should mainly focus on the primary level, supplemented by secondary and tertiary prevention. This framework provides an effective means for enhancing executive women’s strengths and managing their health risks.

8.4.3 Future Research and Action Directions

There have been some pleasantly encouraging signs that research interest in the content examined in this chapter has increased. This is shown particularly in studies of work and family, and occupational stress experienced by managerial women. On the other hand, several other areas are still under-researched (Repetti, Mathews & Waldron, 1989), including the effects of employment gaps on career satisfaction, consequences of the more varied patterns that women’s careers reveal, gender proportions, and the effects of various work experiences on both career aspirations and emotional well-being.

Considerably more work needs to be done on the potential benefits of efforts of organizations to support the career aspirations of managerial and professional women through cultural change efforts and policy implementation.
WORK EXPERIENCES, STRESS AND HEALTH AMONG MANAGERIAL WOMEN

(Morrison, 1992). There is an urgent need to document best practice in this area (Kraut, 1992). It is important to develop case studies of successful and less than successful change efforts to further our understanding of how best to bring about positive change. In addition, more research attention needs to address the effectiveness of a variety of specific policies for creating a women-friendly environment (Galinsky & Stein, 1990; Kraut, 1990). These include policies in the areas of sexual harassment, flexible working hours, part-time work and working at home.

Organizations have an important role to play, in cooperating with government agencies, in achieving a balance of childcare and careers through flexible work policies and childcare support, as well as through changes in organizational culture that come to place greater value on families. The formal policy changes required to ease work–family conflict include initiatives to assist with childcare and elder care, alternative patterns of work, part-time work with career opportunities and benefits, career breaks, enhanced maternity, parental and family leave, and changes in both relocation and anti-nepotism policies. Without the active support by the top of the organizations, training in their understanding and use, and consistent and intelligent applications, well-conceived policies often fall considerably short. This seems particularly important because there has been recent speculation that companies may be less family-friendly in an increasingly competitive marketplace (Fierman, 1994).

ACKNOWLEDGEMENTS

Preparation of this chapter was supported in part by the School of Business, York University and BI Norwegian School of Management.

REFERENCES


