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Stress and Coping Strategies among Saudi Working Women

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Abstract: Coping strategies sufficiently impact the psychological well-being. According to Schellenbreg (2005), excess stress and ineffective ways of coping with it may cause depression in many cases. The presence of depression is presumed to negatively affects physical and cognitive well-being. Women around the world and especially in Saudi Arabia are asked to face challenges to cope with their daily stress of professional life. Much research has been done on the relationship between coping strategies, personality traits, and work stress. But not much research has been done to investigate the relationship between work stress in women ad their coping strategies. The aim of this research is to investigate the relationships between stress and various coping strategies of Saudi working women. This study was done by the quantitative method, with participants being given the Coping Orientation Problem Experienced Inventory and Perceived Stress Scale. The results of these questionnaires were analyzed through the statistical analysis program SSPS. Main findings showed a positive correlation between stress and self-distraction, denial, humor, and self-blame. A negative correlation was found between stress and active coping, emotional support, and acceptance. Furthermore, the findings show that stress correlates positively with emotional coping strategies and negatively with problem-focused strategies.

Keyword: Stress, Coping strategies, Emotional focused coping strategy, Problem-focused strategy.

I. INTRODUCTION

We are living in an industrial age in which we face challenges and pressures to meet with job requirements. Meeting everyday tasks in various jobs can be mentally overwhelming. Research shows higher levels of stress-related depression increasing each year, especially in industrial areas around the world. We find ourselves in a time in which human error or the inability to perform tasks can be easily remedied by a computer, thus pressuring the working human to seek perfection in each requirement of the job.

Saudi Arabia is one of the richest developing countries, which has been establishing industries and companies that have been changing the environment and lifestyle of the individual. Furthermore, the Saudi population is contributing to help the country in its progress and development. However, in this conservative community, the female role is often heavily attached to that of housewife and family caregiver. At first, women mostly had job opportunities in a women-only environment. Only around six years ago could women work in a “mixed” environment (one with both men and women) in the fields of business and marketing. To this day, women working in mixed fields, including the medical field, are less appreciated by society. Also, the common cultural perspective is often that the working woman is not meeting her primary task—taking care of her family, or that the working woman in a mixed environment is a potential threat to her family's reputation. Consequently, the Saudi working woman often faces a great deal of stressors.

This study seeks to investigate Saudi working women's perceived levels of stress and their coping strategies used to deal with job requirements, as well as the relationships between these factors.

Research question

What would be the relationship between stress and coping strategies used by Saudi working women?

Hypotheses

- More use of problem-focused coping strategies would result in less perceived stress among Saudi working women.
- More use of emotion-focused coping strategies would result in more perceived stress among Saudi working women.

II. LITERATURE REVIEW

The following studies discuss research done in different cultures, among various participant ages, and for both genders regarding the relationship of their perceived levels of stress or the relationship with their coping strategies.

A study was conducted by Hachaturova, (2013) indicating that the individual's choice of strategies to cope with stress is gender specified. Participants of this study were a total of 227, between 18–53 years old, and they were working students of Moscow University [1]. Participants were given two inventories to choose from their most used coping techniques and their least used ones. All coping strategies were divided into emotional, behavioral and cognitive strategies, while each category had a subtype of adaptive, somewhat adaptive, and non-adaptive ones. Results concluded the following: Generally, the more challenges faced, the higher correlation with non-adaptive behaviors among both genders. However, hardiness as a personality trait is highly correlated with the choice of adaptive coping strategies, while challenge is negatively correlated with adaptive behavior strategies.

The relationship between resistant personality and perceived level of stress is significantly negative, according to Almagiá, & Huespe (2012) [2]. Infertility is one of the major stressors some women face, which may lead to much psychological distress. Thus, a correlational study was conducted on 115 women who were diagnosed with infertility since at least 6 months to measure their perceived levels of stress, personality traits, and coping strategies that they use to deal with their stress. Participants of this study were part of a treatment program for assisted reproduction at a public hospital in Chile. Participants' ages ranged from 20–47 years old, while 79% were in treatment for a range of 6–24 months. The participants were given 3 scales to measure their stress and their ability to cope: Scale of Perceived Stress (Remor, 2006), Stress Coping Questionnaire (CAE), and Resistant Personality Questionnaire, as developed by Moreno, Garrosa & Gonzalez (2000)[3]. The results concluded the

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following: a) the control component in resilient personality has a major role in its negative correlation with the level of perceived stress among individuals, b) focus on problem solving and control in resilient personality correlates negatively with perceived level of stress, c) open emotional expression correlates positively with negative focus, while focus on problem solving has a negative correlation with negative focus and emotional expression. Limitations of this study could be that participants were assessed for their stress perceived levels after at least 6 months of coping with that distress. Higher levels of perceived stress are observed to lead participants to have more emotional coping, open emotional expression, and negative self-focus. Perhaps, this can be explained due to the emotional distress women tend to feel when diagnosed as infertile; therefore, this finding could not be generalized.

Pregnancy is a period when women tend to have psychological and physical changes, which may increase their stress. *The Journal of Midwifery and Productive Health* published a study investigating the relationship between psychological hardiness and coping strategies during pregnancy, as explored by Sarani, Azhari, Mazlom, & Sherbaf (2015). The researchers followed a convenience sample approach in choosing their participants, who were pregnant women regularly visiting the healthcare centers. Participants had the following scales: 1) Kobasa's Personal Views Survey, 2) Revised Parental Coping Inventory, and 3) the Perceived Stress Scale. The results demonstrated a significant relationship between psychological hardiness and positive spiritual coping, as well as a significant relationship between hardiness and avoidance coping. A limitation of this study could be the lack of medical reports on participants' medical/intake background history, which could affect the accuracy of their responses to the assessments.

Kato (2013) argued an interesting point, which is that western stress scales cannot be beneficial for collectivistic cultures [5]. Evidence shows that stressors in collectivistic cultures are often interpersonal, related to both social and work life. Interpersonal stress can be defined as an uncomfortable or negative atmosphere, attitude, feelings, or behavior among a couple of people—or more—due to the interaction between them. The most common coping strategy among collectivistic cultures is social support, seeking for the interdependency of the community. On the other hand, in individualistic cultures coping behavior often showed much less emphasis on the context. In a collectivistic culture, individuals are encouraged to live in harmony. Thus, each individual behavior can be perceived as affecting someone else's thoughts, feelings, or behavior. In fact, the level of impact of interpersonal stress perceived from collectivistic cultures has been found to be higher than those from individualistic cultures. Cultural orientation heavily influences coping behavior in stressful events, according to Yeh, Aro-ra, & Wu (2006)[6]. Asian students were found to display more control coping strategies, which refers to controlling one's own behavior, feelings, and thoughts to maintain the harmony of the context and adapt to it, according to Lam and Zane (2004)[7]. Therefore, collectivistic cultures most commonly aim at managing conflict more than resolving it.

Kato conducted a study in Japan that investigates the validity of a newly-developed stress scale for its unique culture (2013). The participants in the study were 639 Japanese nationals. They were asked about interpersonal stress that occurred a week earlier, then requested to write how they dealt with it. Results showed the following: a) 71% of the employers were found to have interpersonal stress with their supervisors, b) most students (83%) were found to have interpersonal stress with peers, especially ones whose behavior could be perceived as inconsiderate.

In addition, Kato conducted a second study to explore further information regarding the Interpersonal Stress Scale in Japan and its validity (2013). The participants were 427 Japanese citizens. They were given a list of interpersonal stressors and were asked to choose coping strategies they use and the ones they rarely use. Coping strategies deal differently with stressors; for example, strategies include: 1) distracting coping, 2) reassuring coping, and 3) constructive coping. Results showed that distracting coping predicts less satisfaction in a relationship and less psychological functioning. Constructive coping was shown to be effective in reducing stress. A limitation was that this study may be difficult to generalize for Asians in America, the Middle East, etc.

III. METHODS

The population of the current study is Saudi working women in different job professions in Jeddah.

Sample

The representative sample of the population consists of Saudi women occupying different professions: school teachers, office assistants, sales supervisors, and cashiers.

Research Design

This study follows the non-experimental approach, and a convenience sample of participants was given a survey of 38 items to answer. Stress is the dependent variable in this study. The independent variable in this study is coping strategies.

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The design of the research is investigating the relationship between stress and coping strategies using a survey distributed among Saudi women working in different organizations in Jeddah.

Measures

The Perceived Stress Scale, according to Cohen, Kamarck & Mermelstein (1983) is a 10-item survey. In this set of questions, participants were asked to mark a scale from “never” to “very often” about the frequency of certain thoughts, behaviors, and feelings from the past month [8]. The reliability alpha coefficient is .758.

A brief COPE (Coping Orientation Problem Experienced Inventory), according to Carver, Scheier, & Weintraub, (1989) is a 27-item survey. In this set of questions, participants were asked to answer based on a scale starting from “never” to “always” based on how frequently they behave as mentioned in each item. These items indicate the frequency of usage for 13 coping strategies: “self-distraction/mental disengagement, active coping, instrumental social support, behavioral disengagement, venting of emotions, positive reinterpretation and growth, planning, self-blame, acceptance, humor, turning to religion, denial, and emotional social support” [9]. All the mentioned coping strategies fall into two main categories: problem focused strategy, or emotional coping strategy. The reliability alpha coefficient of this scale is .816.

Procedures

In order to protect the participants in this research, permission and a letter of approval was acquired before the study. Each participant agreed upon an informed consent form of the Research and Consultancy Institute at Effat University that states a brief explanation of the current study. All data collected from participants remained protected for research purposes only. Students have the permission from the authors for the academic usage of the scales. The survey given to participants included the following scales: Perceived Stress Scale (Cohen, Kamarck & Mermelstein, 1983) and the Coping Orientation Problem Experienced Inventory (Carver, Scheier, & Weintraub, 1989).

Statistics

The data collected from questionnaires were inserted in SPSS for further data analysis. The collection of data was of interval and ordinal types. The sample demographic information included the following: age, job profession, marital status, financial independence, supporting family financially, number of children, years of experience, education, and parental job status. Scores were collected in a descriptive manner, including using means and standard deviation. Inferential statistics and Pearson product-moment correlation coefficient analyses were performed to test the hypotheses.

IV. RESULTS

The results found by the data analysis procedure will be discussed and interpreted in the following section.

Table 1: Demographic Information of the Sample (N = 30)

Variable	F	%
Financial status		
Independent	21	70%
Dependent	6	20%
Support family		
Yes	20	66.7%
No	3	10%
Education		
High school	8	26.7%
Bachelor	22	73.3%
Job		
School teacher	12	40%
Sales representative	5	16.7%
Office assistant	10	33.3%
Marital status		
Unmarried	9	30.0%
Married	19	67.9%
Children		
None–5	7	23.3%
6–10	16	53.3%
Monthly income		

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2–5 Thousand	13	43.3%
6–11 Thousand	10	33.3%
12–20 Thousand	7	23.3%
Parents' job status		
None of them working/retired	8	26.7%
Both are working/retired	8	16.7%
Only father is working	16	53.3%
Only mother is working	0	0%
Job experience		
0–5 years	14	46.7%
6–10 years	1	3.3%
11 years and above	14	46.7%

Demographic information of participants is shown in Table 1. Participants were all working Saudi women, with ages ranging from 19–50 years old. 63% are married and 70% of them are financially independent. The education level of participants ranged from a high school degree to a bachelor degree. Most of the participants support their family (66.7%), while 70% of them have one or both of their parents working or retired. The reliability coefficient of the variables and the scales of the study are shown in Table 2.

Table 2: Reliability coefficient of the study variables

Variable	α	Number of Items
Coping Orientation Problem Experienced	.82	28
Perceived Stress	.76	10

Table 3: Inter-correlation of Stress and Coping Strategies (N = 30)

Variable	<i>M</i>	<i>SD</i>	1	2	3
Perceived Stress	17	5.9	-		
Problem-Focused Coping	39	5.8	-.44**	-	
Emotion-Focused Coping	38	5.6	.26	.30	-

Note. * $p < .05$, $p < .01$

Table 3 shows the results of the data conducted, with a positive correlation between stress and self-distraction, denial, humor, and self-blame. A negative correlation was found to be between stress, active coping, emotional support, and acceptance.

Table 4: Inter-correlation for Stress and Coping Strategies

Variable	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7	8
1. Perceived Stress	18.23	6.35	-							
2. Self-Distraction	6.45	1.40	.36	-						
3. Active Coping	6.97	1.07	-.30	.06	-					
4. Denial	4.83	1.64	.56**	.30	-.14	-				
5. Humor	6.48	2.11	.54**	.17	.10	.34	-			
6. Self-blame	6.73	1.05	.34	.45**	-.01	.34	.54**	-		
7. Acceptance	6.23	1.19	-.34	.11	.12	-.03	-.32	-.06	-	
8. Emotional Support	6.10	1.37	-.26	.09	.38*	.21	.007	-.05	.17	-

Note. ** $p < .001$, * $p < .05$

Table 4 shows that active coping strategies correlated highly with positive reinterpretation, instrumental social support, and emotional support strategies, while self-distraction correlated highly with venting of emotions and planning coping strategies. Positive reinterpretation was found to correlate with acceptance, denial, emotional support, instrumental social support, venting of emotions, and planning. In addition, emotional social support correlated highly with instrumental social support, planning, and acceptance. Findings also indicate that instrumental social support correlates with acceptance, venting of emotions, positive reinterpretation, and planning.

Results showed that venting of emotions correlates with self-distraction, instrumental social support, positive reinterpretation, and planning, while turning to religion coping strategies were found to correlate with planning, venting of emotions, instrumental social support, emotional social support, and substance usage. Furthermore, self-blame coping strategies were found to correlate with self-distraction, venting of emotions, planning, and humor. In the following, we will further discuss these data in depth.

V. DISCUSSION

This research aimed to look at Saudi working women's levels of stress in relation to their coping strategies. There are two types of coping strategies: emotional coping strategies, which aim to reduce the impact of the stressor or the uncomfortable situation indirectly, such as denial, positive reinterpretation, self-distraction, self-blame, and emotional social support, and problem-focused coping strategies which aim directly to deal with the stressor and attempt to eliminate it, such as planning, active coping, and instrumental social support.

The first observation was that stress has a positive relationship with self-distraction, denial, humor, and self-blame. Denial and self-distraction are somewhat similar, both concepts aimed to reduce the acknowledgment of the stressor's presence at any cause and shift the focus into something less threatening, like watching TV or shopping. However, regardless of the distraction or the refusal to be aware of the stressful situations, these coping strategies do not help with reducing the uncomfortable stimuli. In fact, these strategies may actually increase the feelings of anxiety and stress. Even worse, sometimes these coping strategies are a pattern where the individual continues an automatic denying coping behavior, is at risk of losing awareness of the situation, and yet has a subconscious awareness of the discomfort remaining within. Self-blame is found to correlate highly with depressive symptoms, in which people with depression tend more to have self-blame as a coping strategy, according to Coyne, Aldwin, & Lazarus (1981)[10]. There are two types of self-blame. One is focused on self-esteem, which refers to the presence of self in a situation, and the second focuses on one's actions and behavior, according to Janoff-Bulman (1979)[11]. We tend to blame ourselves to gain control over an outside threat; thus, sometimes it can be rewarding, according to Wortman (1983)[12]. However, self-blame usually develops to a maladaptive behavior. Janoff-Bulman explained that victims of sexual abuse usually tend to blame themselves to have some sense of control and less fear of external threats (1979). Also, humor correlates positively with stress. This can be explained in the sense that, in the Saudi culture, there is not much appreciation for showing one's distress or discomfort, as it is a sign of impatience. Usually, in a collectivistic culture, it is hard to express one's true emotions freely due to the disturbance of harmony that doing so might bring to society. Adding to that, humor tends to attract people and gather them, which creates a more peaceful social atmosphere. All these coping strategies that positively correlate with stress are found to be emotionally focused coping strategies.

On the other hand, findings indicated that stress has a negative relationship with active coping, acceptance, and emotional social support. In active coping, we try to be creative to solve problems we face or find solutions for the discomfort. This can effectively and directly deal with various levels of stress, since we are trying to remove as much of the stressor as possible. Acknowledging the stress itself is an important step of controlling one's discomfort in order to gain the ability and capacity to deal with the struggle as objectively as possible. It is hypothesized that once we acknowledge a reality with its stressful stimulus, it gives us the means to eliminate or deal with it efficiently. Emotional social support is a very important coping strategy in dealing with stressors, especially in collectivistic cultures, according to Kim, Sherman, & Taylor (2008)[13]. Literature supports that coping behavior can be targeted differently based on cultures, according to Yeh, Arora, & Wu (2006). For example, Saudi culture expects and encourages women to be more involved emotionally than men. Thus, emotional social support is an appreciated type of coping in this context, and it is rewarding at the same time for women. Emotional social support usually happens once one communicates thoughts and feelings regarding the stressor to reduce or distract oneself from the anxiety stimuli.

Another key finding is the positive correlation of the coping strategy, turning to religion, with the following: emotional venting, planning, instrumental social support, emotional social support, and substance usage coping strategies. It is very interesting to see the positive relationship between coping by turning to religion and

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substance usage. Some of the mentioned examples of the substance usage were smoking tobacco/*shisha* or taking medications. It is against the Islamic religion to abuse one's health in any way, but perhaps this use of substances can be explained as an indirect self-distraction strategy that promotes one's acceptance of fate—which is a religious concept—and helps to increase one's patience. Another explanation can be that substance usage may be an indirect emotional venting of uncomfortable emotions into self-distractive behavior or medicating. Or perhaps, since smoking is becoming more acceptable for women in Saudi Arabia, they use it as an entertainment tool for social gathering, and thus it is related to both emotional and instrumental social support. Turning to religion as a coping strategy was also found to correlate with planning, which can be understood by the concept of faith, since it is considered by many to be a guide and purpose that indicates what an individual ought to do in life. Thus, the remaining actions taken by this individual to reach a purpose in life ought to be planned according to the belief as well as to earn the spiritual and mental rewards.

In addition, another interesting observation is that while none of the participants lives on her own, 70% of them considered themselves financially independent. Being financially independent in the western world refers to the ability of an individual to live on one's own and meet all the financial requirements of one's living. However, it seems for our sample of Saudi participants that being financially independent means being able to provide for oneself regardless of the living status. Perhaps the current regulations prohibiting women from driving or buying a house without a male guardian's approval, as well as the many other social setbacks women face, can be an explanation of this phenomena. Similarly, none of the participants had their mother as the only financial provider, while 53.3% had their father as the only financial provider. However, it is very interesting to know that those female participants are working, and 66.7% of them are supporting their family. This indicates strongly that women of Saudi culture are aiming for a better economic and social context for themselves and their children in the future.

VI. CONCLUSION

Increasing research shows us the impact that coping strategies have on our daily stress, whether working or socializing. Coping strategies can indicate a great deal of information regarding one's cognitive, physical, and psychological well-being. However, it is very important to note that we ought to express and act upon different coping strategies while considering our individual situations and abilities. There might not be a set of perfect strategies to remedy all stressful events; however, this study found that problem-focused strategies, such as planning in work environment, are more beneficial than emotionally-focused strategies, and this finding is consistent with the previous studies done in this area.

Limitations

Although all scales were standardized in this study, some parts might have lost their original meaning in the translation process. However, a great deal of care was taken during the translation process. The sample of 30 participants is small, and could have negatively impacted the process of data analysis. Also, the participants were all educated with at least a high school degree, and all were living in Jeddah, which does not represent the whole population of working Saudi women around the country. Furthermore, most participants worked in an educational system, which again does not represent the whole population of working Saudi women. In addition, the time given to prepare this research was very limited, which has impacted the project greatly.

Recommendations

Further data analyses and a higher number of data collection need to take place in order to discuss and gain more information. Developing a Saudi Stress Scale and implementing it could be very helpful and culturally sensitive, leading to more accurate data. Conducting qualitative methods to observe in-depth information in future research could also have a great impact in this field.

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