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EXPERIENCING STRESS AND STRESS SYMPTOMS AMONG SLOVENE MANAGERS

Abstract: The aim of this study is to identify experiencing stress level at work, the stress symptoms frequency among Slovene managers, and to establish gender differences in terms of the intensity of experiencing stress symptoms. 85 middle level managers from Slovene companies of random choice participated in this study. The obtained data have been processed with SPSS 16.0 and the descriptive statistics, using frequency distribution and t-test data processing statistic methods to analyze them. The results of the study have shown that there are gender differences in terms of all the above mentioned factors, namely a statistically higher level of stress in women. In terms of stress symptoms occurrence, there are gender differences in some stress symptoms as well as in the intensity of experiencing stress symptoms.

Key words: workplace, managers, middle level management, Slovenia enterprises, stress, stress symptoms, gender differences.

1. INTRODUCTION

1.1 Managerial stress

Higher working requirements, a lower degree of employment security and a changed life style impose a serious burden on an individual. Consequently, working under time stress and in a competitive environment may frequently result in cardiovascular diseases [1].

Workplace stressors which frequently cause problems with employees include unfavourable working conditions, working hours, nature of work, leadership style, working climate, career opportunities, harassment and workplace violence, intolerance and nature of organization, as well as noise, vibrations, dust, inappropriate temperature environment, lighting and hazardous substances. Occupational stress occurs most frequently as a result of inappropriate information policy, leadership styles, lack of competences, lack of trust, inappropriate working methods, forming a new post, inappropriate work standardization and hierarchy [2].

Nowadays most people hypothetically believe that company managers are the most affected group in terms of stress subjection. [3] claim that managerial stress may be a disease arising from careerism. However, despite their risky behaviour, managers are role models to many other professionals. Managers are heavily overloaded with various tasks and in turn held responsible for their decisions, which requires constant attentiveness, which may finally lead to unbearable stress. They may experience symptoms like insomnia, anxiety, fatigue, or even a serious illness (high blood pressure, angina pectoris, myocardial infarction, etc.). A very frequent illness in managers is an infarction, classified as a managerial disease. International Labour Organization recommends that diseases should be classified as occupational diseases.

Managers expect their work to be recognized and need to prove themselves successful. Therefore, they strive to be competitive. However, in the effort to stay competitive, managers may suffer from stress. As they may also fail in their attempts to become successful and often try to disguise the truth, such a situation may lead to depression. They become apathetic, lose enthusiasm and self-respect. Quite frequently they are convinced they experience physical illness symptoms when they are under stress and they most often try to relieve their tension by drinking alcoholic drinks to brighten their reality [4].

Managers from different countries perceive similar workplace stressors, which was also proved in a comprehensive international comparative study of occupational stress that collected data from 1065 managers in 10 countries (from 5 continents): Brazil, Great Britain, Egypt, Germany, Japan, Nigeria, Singapore, South Africa, Sweden and the United States. The most frequently listed workplace stressors, quoted with 55% of all respondents, were time pressure and tremendous work overload. Other frequent workplace stressors were long working hours, attending meetings, the conflicts between work and family and social relationships [3].

1.2 Stress Symptoms

A reaction to stress during short, manageable irritations (stressors) enables keeping an organism integrity (survival) and has a significant influence on its development – that is how we learn and adapt to irritations of a constantly changing environment. However, the same mechanisms that enable us to survive when we encounter danger, cause disease symptoms (like increased blood pressure and higher concentration of amounts of fat in blood, increase of waist circumference, fits of panics, depression) when we are exposed to a constant pressure of unmanageable stressors. Moreover, chronic stress (with its

characteristically prolonged and strong stress reaction) can increase the risk of worsening or developing health problems or diseases we are prone to, but they have not developed yet (e.g. asthma, allergy, headaches, diabetes, and angina pectoris) [5].

The most frequent stress (stress-related disturbed balance) symptoms are [6]:

- 1. Physical stress symptoms:
- insomnia or excessive sleepiness
- decreased or excessive appetite, nausea, indigestion
- pains in muscles, chest or around the heart
- frequent headaches, dizziness
- chronic fatigue, lack of energy or energy burst followed by depression
- frequent colds, allergies
- excessive consumption of nicotine, caffeine, tranquillizers, alcohol, etc.
- 2. Mental stress symptoms:
- anxiety, restlessness, tension, apprehensiveness
- · dissatisfaction, bad mood, irritability
- low spirits, feeling helpless and desperate, depression
- oversensitiveness, confusion, sudden changes of mood
- nightmares, frequent crying
- rises and failures of self-respect, feelings of inferiority
- 3. Interpersonal relationship stress symptoms
- wish for solitude, keeping from other people, isolation
- communication problems
- less frequent socializing
- distrust, impatience
- sex disturbances
- 4. Occupational stress symptoms:
- feeling overloaded, low productivity, loss of direction
- lack of interest for activities that used to amuse you;
- lack of new ideas, indecision
- not finishing tasks, undertaking new tasks constantly
- problems with mental concentration and attentiveness, forgetfulness
- disinclination to work

Long-term symptoms

A long-term stress exposure and its related chronic physiological irritation impose a heavy burden on digestive, cardiovascular and immune functions, therefore, it could be an important factor in the development of psychic and psychosomatic disturbances and diseases [7].

Experiencing even one or two of these symptoms can make you feel anxious or frustrated. This can be a vicious circle. For example, you want to avoid stress, but symptoms such as frequent crying or nervous twitching can make you feel annoyed with yourself and even more stressed.

If you have experienced some of these symptoms for a long time, you are at risk of developing high blood pressure (hypertension). This can lead to:

- a heart attack: a serious medical emergency where the supply of blood to your heart is suddenly blocked, usually by a blood clot
- a stroke: a serious medical condition that occurs when the blood supply to the brain is interrupted.

The results of [8] study shows that men and women are significantly different in some stress related measures. Women indicated significantly higher levels of occupational stress than men. Women also indicated significantly higher levels of psychological symptoms than men, but the two groups reported similar emotional and physical health. [9] found out that female managers experienced "emotional stress", primarily because of the pressure to meet expectations of being responsible and caring for people both inside and outside of their home. In contrast, male managers tended to focus on themselves and regard other things as beyond their control or responsibility.

[10] conducted 19 studies which indicated that women tend to report higher rates of psychological distress and that men are more prone to severe physical illness. It has been well recognized that individual differences in general perform an important moderating function on the impact of stress. Some models of stress identify gender as a critical personal or demographic characteristic that influences the nature of an individual's stress experience [10].

In the study presented we tried to establish the differences between the genders in terms of occupational stress level, as well as the frequency and intensity of stress symptoms appearance.

2. METHOD

2.1. Participants

Our sample includes 85 managers, i.e. 43 women and 42 men, of randomly selected Slovene companies.

2.2. Measures

For the purpose of our research we designed a questionnaire Occupational Stress Load of Managers. For the second and third question we used a Lykert scale ranking system (5-point scales).

The questionnaire is in three parts and includes:

- 1. Participants' socio-demografic data
- 2. Questions related to a subjective assessment of the stress level
- 3. List identifying stress symptoms it includes the list of moods and states of health which are considered as the results of stress (cf. [3], [11], [12], [13]). Managers assessed them on a 5-point Lykert scale twice, i.e. in relation to:

- frequency of their appearance on the scale from 'never' (1) to 'very frequently' (5)
- their annoyance on the scale from completely disannoying (1) to most annoying (5)

2.3. Procedure

The obtained data was processed with SPSS computer programme and the following data processing statistic methods were used to analyze them:

- descriptive statistics and frequency distribution for variables
- t-test to examine the statistic relevance of the differences between the genders in terms of stress symptoms

All our statistically relevant conclusions were drawn at a 95% confidence interval.

3. RESULTS AND DISCUSSION

3.1. Descriptive statistics

Our research includes 85 managers from randomly selected Slovene companies. Among them, there were 43 women and 42 men.

The survey results demonstrate that the most numerous group in our sample is aged between 31 and 40 (49.4%), followed by the group aged between 41 and 50 (34.1%). The smallest percentage (16.5%) is the group aged less than 30.

In terms of qualification, the highest share (92.9%) in our sample goes to the group with higher level of education. Furthermore, in terms of years of service, 41.2% of managers involved in our research fall in the group with 11 to 20 years of service, 27.1% in the group with 6 to 10 years of service, and the others with more than 20 or less than 6 years of service. Table 1 shows the structural share of the respondents (managers) as to the number of employees in a given company.

3.2. Hypotheses and discussion

The hypotheses were tested by means of t-test, which was employed to examine the statistic relevance of the differences between the genders as well as the symptoms of work-related stress.

Hypothesis 1: There are differences between men and women in experiencing stress at workplace.

Table 1. *T-test results for assessing the existence of differences between men and women in experiencing stress (in terms of intensity level) at workplace*

Item	F	t	df	Sig. (2-tailed)	Mean difference
Stress level	1.944	-2.058	83	.043*	26523

N.B.: * for p < .05

By means of t-test for independent samples we established that there were gender differences in experiencing occupational stress, namely women experience a higher level of occupational stress than men

In his research, [8] also established that women indicated significantly higher levels of occupational stress than men.

Hypothesis 2: There are differences between men and women in terms of stress symptoms frequency.

Table 2. *T-test results for assessing the existence of differences in terms of stress symptom frequency*

Item	F	t	df	Sig. (2-tailed)	Mean difference
Waking	1.246	2.117	83	.037*	.54596
throughout the night					
Anxiety	18.974	3.931	83	.000***	.68217
Depression	9.870	2.158	83	.034*	.42082
Hyper- sensitivity	.880	2.631	83	.010**	.45349
Desire to quit the job	14.955	2.098	83	.039*	.33001
Caffeine, Nicotine	7.322	2.218	83	.029*	.49945
Tranquill- izers	75.903	3.728	83	.000***	.44075

N.B.: * for p < .05; ** for p < .01; *** for p < .001

Table 2 shows statistically significant gender differences in various items in terms of stress symptom frequency. Hypothesis 2 can be partly accepted as there are gender differences only in those items or symptoms, respectively, which reflect the frequency of stress symptom appearance. In terms of stress symptom frequency there are gender differences in the following items or symptoms: waking throughout the night, anxiety, depression, hypersensitivity, the desire to quit the job, high use of caffeine and nicotine and frequent use of tranquillizers. Managerial women were found to wake through the night or in the early hours statistically significantly more frequently than their male counterparts, they more frequently experience anxiety and depression symptoms, are more frequently prone to hypersensitivity, have a greater desire to quit the job, they more frequently over-consume caffeine and nicotine, and use tranquillizers more frequently than

In his research [8] obtained similar results: he proved that managerial and professional women indicated significantly higher levels of psychological symptoms than men

Hypothesis 3: There are gender differences in the intensity of experiencing stress symptoms.

Table 3. *T-test results for assessing the existence of differences in terms of the intensity of experiencing stress symptoms*

Symptom	F	t	df	Sig. (2-tailed)	Mean difference
Nervous tics	.136	-2.707	83	.008**	.54430
Waking throughout the night	14.00 1	2.268	83	.026*	.61849
Fatigue	.110	3.200	83	.002**	.77962
Moodiness	.140	2.561	83	.012*	.54983
Forgetfulness	4.364	2.565	83	.012*	.75692
Absentminde dness	1.591	2.516	83	.014*	.73145
Indecision	.617	2.448	83	.016*	.64286
Concentration problems	1.206	2.585	83	.011*	.66667
Feeling of failure	13.90 0	4.114	83	.000**	1.18217
Tranquilli- zers abuse	1.781	2.502	83	.014	.74252

N.B.: * for p < .05; ** for p < .01; *** for p < .001

Table 5 shows statistically significant differences in the intensity of experiencing stress symptoms. Hypothesis 3 can be partly accepted as there are gender differences in some items or symptoms which reflect the intensity of experiencing stress symptoms. Therefore, in terms of the intensity of experiencing stress, there are gender differences in the following items or symptoms: nervous tics, waking throughout the night or in the early hours, fatigue, lack of energy, moodiness, forgetfulness, absentmindedness, indecision. concentration problems, feeling of failure and frequent consumption of tranquillizers. Nervous tics (as stress symptoms) are most disturbing in men while all other symptoms mentioned above are experienced as more disturbing in women.

4. CONCLUSION

Occupational stress has been on the increase and has become a major problem of the working world. World Health Organizations monitors with great concern, the increase in problems related to occupational stress [14]. Occupational stress, with all its consequences, is widely spread among the EU member states. According to various studies, managers in the acceding EU member states are exposed to stress and are overloaded with work to a higher extent than their western counterparts. To make it short, stress in employees has a serious effect on a company's bottom line as numerous working days are lost due to stress consequences.

Employers are obliged to limit and suppress stress by striving to prevent stress in their organizations, assessing risks for stress appearance and through this process reveal the stress risks at workplace. Employers can also estimate and determine which position of employment or workplace is exposed to higher risks. Furthermore, employers are obliged to take the necessary measures (to prevent damage or avoid loss) to comply with the guidelines issued by the European Agency for Occupational Safety and Health.

Organizations in Slovenia will need to put a lot of effort into stress preventing activities at workplace, especially as many organizations are not being aware of the dimension of the problem and its negative consequences. Moreover, to be able to manage stress in their employees, organizations in Slovenia will have to apply numerous measures and they will also have to allocate the funds assigned to covering costs for the purpose of preventing occupational stress consequences. Finally, it is of utmost importance for an organization success and performance to involve all their employees in planning and executing company objectives.

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BIOGRAPHY

Maja Meško graduated from the Faculty of Arts, University of Ljubljana and holds a Degree in Psychology. She obtained her PhD degree in Kinesiology at the Faculty of Sports, University of Ljubljana.



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STRES I SIMPTOMI STRESA KOD MENADŽERA U SLOVENIJI

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Apstrakt: Cilj rada je identifikacija nivoa stresa na poslu, učestalost simptoma stresa među slovenačkim menadžerima i definisanje razlika u polovima u smislu doživljavanja intenziteta simptoma stresa. U ovoj studiji je učestvovalo 85 menadžera srednjeg nivoa iz slovenačkih kompanija, po metodi slučajnog izbora. Dobijeni podaci su obrađeni u programu SPSS 16.0, kao i pomoću metoda deskriptivne statistike, raspodele frekvencija i t-testa za obradu statističkih podataka. Rezultati ove studije su pokazali da postoje razlike u pogledu gore pomenutih faktora kod žena i muškaraca, odnosno da postoji statistički veći nivo stresa kod žena. U pogledu nastanka simptoma stresa, postoje razlike između polova u pojedinim simptomima stresa, kao i razlike u intenzitetu simptoma stresa.

Ključne reči: radno mesto, menadžeri, srednji nivo menadžmenta, preduzeća u Sloveniji, stres, simptomi stresa, razlike između polova.