

## **DO PERSONALITY AND GENDER HAVE EFFECTS ON MARITAL SATISFACTION AND MENTORING RELATIONSHIPS AMONG NIGERIAN NURSES?**

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### **ABSTRACT**

This study investigated the influence of personality and gender on marital satisfaction and mentoring relationships among Nigerian nurses. The participants were 100 nurses (20 males; 80 females) randomly selected from 2 teaching hospitals in Benin. The results of the 2x2x2 ANOVA revealed that neuroticism, agreeableness, and gender exerted significant influence on marital satisfaction of nurses such that nurses who were low in neuroticism and high in agreeableness and males tended to be more satisfied with their marital life than other categories of nurses. However, there were no interaction effects of neuroticism, agreeableness, and gender on marital satisfaction. Neuroticism and agreeableness significantly influenced mentoring relationship of nurses in such a way that those who were low in neuroticism but high in agreeableness benefited more from mentoring relationship than those who were either high in neuroticism or low in agreeableness. There were no gender differences in mentoring relationship among nurses. There were no significant interaction effects of neuroticism, agreeableness, and gender on mentoring relationship among nurses. It was recommended that meaningful conversation be encouraged; help should be rendered to female nurses to enhance their self esteem. Goal settings, self-sufficiency, and independent thinking should also be encouraged. Lastly, organisations should be prepared to provide emotional support for nurses.

*Keywords:* Agreeableness, neuroticism, gender, marital satisfaction, mentorship.

### **INTRODUCTION**

Mentoring is defined as a “one-on-one” relationship between a less experienced and a more experienced person that is prototypically intended to advance personal and professional growth of the less experienced individual (Afolabi, 2011; Wanberg, Welsh & Hezlett, 2003). Mentoring is a powerful personal development and empowerment tool. It is an effective way of helping people to progress in their careers and it is becoming increasingly popular as its potentials are realized. It is a partnership between two people

(mentor and mentee) normally working in a similar field or sharing similar experiences. It is a helpful relationship based upon mutual trust and respect. Mentoring provides the mentee with an opportunity to think about career options and progress. It also allows the mentee to explore new ideas in confidence. Mentoring is about becoming more self aware, taking responsibility for your life and directing your life in the direction you decide, rather than leaving it to chance.

Most of the studies about marital satisfaction and mentoring relationships focus on socio-demographic variables and peer group influence as separate sources of influence and do not take into account some important variables such as personality traits like neuroticism and agreeableness and gender. The difficulties of diversified mentoring relationships when the mentor and protégé have different values or attitudes, unrealistic expectations about the mentors' power to affect outcomes within an organization and mismatched expectations when the mentor and protégé come from different backgrounds or have different personality traits may lead to some negative mentoring experiences. Also, femininity is highly emphasized in nursing field in Nigeria than masculinity. When it comes to mentoring and marital satisfaction, men and women who are either agreeable and/or neurotic are likely to have different experiences which will in turn have impact on their work attitudes. Therefore, this study aimed to investigate the roles of neuroticism, agreeableness, and gender on marital satisfaction and mentoring relationships of Nigerian nurses.

Mentoring as a phenomenon, has been rekindled in the Nigerian environment because of the need for tutelage of mentoring and the growing appreciation of the benefits of mentoring in the work setting, particularly nursing. Mentoring in the Nigerian work setting reflects broad activities identified by Kram (1985) which largely focused on counseling, protection and sponsoring the career advancement of an individual. These relationships comprise both genders and are generally organized by prevalent gender role stereotypes. Mentoring relationships often develop spontaneously based on proximity, hierarchical line of responsibility, ethnic affiliation, admiration, competence, shared values and gender concerns. Mentors whether in spontaneous or assigned relationships are frequently older and more practical compared to their protégés. A common feature of these relationships is the great allegiance and respect accorded to mentors by their protégés. This is particularly in view of the African perspective that wisdom stems from old age. Though some negative connotations of mentors as Godfathers exist, in general, mentors are appreciated for giving directions to younger colleagues. There are different types of mentoring and many different ways to do it.

Surprisingly, few studies have focused on how gender might shape nurses' mentoring relationships. In a meta-analysis, Eagly & Crowley (1986) found that men offered and responded to more social, nurturing and caring forms of helping. These patterns can be traced to childhood where girls tend to forge more intense emotional connections and shows higher levels of both verbal expressiveness and non-verbal sensitivity (Brody, 1985). Taken together, these differences might affect mentoring relationships, including their duration and perceived importance and helpfulness.

In another study, Ragins (1999) argued that gender is a consideration in work based mentoring relationships for much the same reason. In particular because females, as a group, have less power, confront more sexism and are perceived as more vulnerable than males, their relationships with mentors often serve more psychosocial roles such as

positive self esteem, good interpersonal relationships, positive self concept, etc (Ragins & Sundstrom, 1989). Indeed, several studies have shown that male mentors tend to provide more instrumental and career support, whereas females mentorship often characterized by more emotional support (Afolabi, 2011; Allen, Day, & Lentz 2006; Sosik & Godshalk, 2000). Sosik and Godshalk (2000) found that female-female mentoring relationships offered a greater level of friendship, counseling and personal support than did other gender combinations. Such differences may cause the relationships to take on a greater meaning and importance to women. It is also reasonable to predict that a more psychosocial approach to relationships will be more enduring, with social roles and satisfaction deepening as relationships grow in influence (Burke, Mckeen & Mckenna, 1993; Kram 1985).

Taken together, these findings suggest that across a broad array of mentor-protégé context and configurations, gender shapes the functions and importance of relationships (Bogat & Liang, 2005). Specifically for both sexes, youth mentoring relationships have been assumed to lead to improvements, at least in part through their positive effects on youth's perceptions of parental relationship (Karcher, Davis, & Powell 2002; Rhodes, Grossman, & Resch 2002, Rhodes, Reddy, & Grossman, 2005).

In addition, it is expected that the personality (neuroticism and agreeableness) of the mentor will affect involvement by the mentor in mentoring relationships. This is because the identification of personality features that relate to nursing mentoring provided by mentors has important practical implications. The five-factor model (FFM) or "Big Five" constitute a promising taxonomy to parsimoniously and comprehensively describe human personality and consists of the following traits -- neuroticism, extraversion, openness, agreeableness and conscientiousness (e.g. Digman, 1990, Goldberg, 1990), but for the purpose of this study, the researcher will concentrate only on neuroticism and agreeableness.

Characteristics of neuroticism include anxiety, inhibition, negative mood, and a tendency to focus on the self. These features should make individuals who score high on neuroticism less likely to approach subordinates to provide mentoring functions for them. Neuroticism is associated with hostility, impatience and low confidence. These characteristics should make the individual less attractive as a mentor. Neuroticism is related to behaviours and tendencies of individuals under stress, such that those low in neuroticism stay composed while those high in neuroticism are more reactive. Individuals who are higher in neuroticism are characterized by feeling of inadequacy, embarrassment, anxiety and insecurity, and therefore, they often have limited social skills (Bernerth, Armenakis, Field, Giles & Walker, 2008). Protégés who are lower in neuroticism are less moody and emotional than those who are higher and it seems likely that they will be more comfortable and happier when their mentors exhibit the same characteristics.

Agreeableness on the other hand, encompasses care and concern for one another as well as trust and modesty. Therefore, agreeable individuals should be more inclined towards providing advice, help and support for less experienced and younger/junior nurses. Furthermore, agreeable individuals will be less likely to feel threatened to share their knowledge and expertise with others, hence more likely to become mentors. Agreeableness is very much an interpersonal trait and in large part determines how well one is able to *get along* with others. Kram (1985) suggested that when protégés are

“enjoyable to be with” and are able to “tolerate conflict”; they are more attractive to mentors. Besides these, marital satisfaction is another important variable considered here.

Marital satisfaction is the subjective evaluation of individual’s experiences in their marriages. By subjective evaluation, we mean that marital satisfaction can only be rated by each person in response to the question “How satisfied are you?” The level of your satisfaction cannot be determined by anyone else. Thus, marital satisfaction is not a property of a relationship; it is a subjective experience and opinion. Uniquely, marital satisfaction is a relatively stable attitude and attribute which reflects the individuals’ overall evaluation of the relationship. Marital satisfaction depends upon the individual’s needs, expectations, and desires for the relationship. Individuals are usually satisfied when their needs are being met, and when the individual’s expectations and desires are being satisfied. Marriage has been documented in every known culture (Efoghe, 1990) and more than 90% of the world’s population will marry at least once (Epstein & Guttman, 1984).

One predictor that may have particular importance to marital satisfaction is gender roles. Recently, scholars have noted that the influences of sex (i.e. male and female) and gender roles (i.e. maleness and femaleness) have been largely ignored in the explanation of marriage overtime, despite evidence in the literature that points to differences in marital satisfaction for men and women (Johnson & Lebow, 2000). In 1975, Bernard proposed a concept of a “his and her” marriage in which marriage is a qualitatively different experience for men and for women. Bernard (1975) has argued that there are two marriages in every marital union, a “his” and a “hers”, and that “his” is better than “hers” with men receiving more psychosocial benefit than women. Other research has also substantiated that marriages disproportionately benefits men, with husbands reporting higher levels of marital satisfaction and well-being than their wives (Baslow, 1992; Bernard 1975; Heyn, 1997; Schumn, Webb, & Bollman, 1998). In addition, research has indicated that women derive mental and physical health benefits when they are in satisfying marriages while men benefit from marriages despite its quality (Hess and Soldo, 1985).

The personality characteristics of the two marriage partners make the match stable and mutually satisfying or unstable and fraught with discontent. Neuroticism is the personality trait that has been most often identified as a source of marital instability (Doherty & Jacobson, 1982). The neuroticism hypothesis is consistent with a common sense analysis of marital compatibility. It is expected that a man and a woman, both highly neurotic, will find it difficult to achieve a very high order of marital happiness. High levels of neuroticism on the part of either or both partners could result in the dysfunctional behaviour exchanges noted in troubled couples.

Neuroticism is primarily over-reactivity to stressful environmental stimuli. High neuroticism on the part of one or both partners in a marriage makes it likely that conflictual physiological linkage will take place. This may lead to dysfunctional cognitive and behavioural patterns. It is apparent that neuroticism should be associated with experiences of both job and marital failures and dissatisfaction (Watson & Slack, 1993; Brief, Butcher, & Roberson, 1995).

## Hypotheses

1. There would be main and interaction effects of neuroticism, agreeableness and gender on marital satisfaction among Nigerian nurses.
2. There would be main and interaction effect of neuroticism, agreeableness and gender on mentoring relationships among Nigerian nurses.

## METHOD

### Design and participants

A cross-sectional survey design was adopted to study 100 married nurses (20 males; 80 females) selected from Irrua Specialist Teaching Hospital and University of Benin Teaching Hospital, in Edo State, Nigeria. Looking at the demographic data of the participants, 13 (13.0%) had age range of 21-25 years, 18 (18.0%) were 26-30 years, 19 (19.0%) were 31-35 years and 50 (50.0%) were 35 years and above. The sample also included 20 (20.0%) males and 80 (80.0%) females. Also, 94 (94.0%) practiced Christianity, 5 (5.0%) practiced Islam and 1 (1.0%) did not indicate his/her religion. Of these respondents, 14 (14.0%) were Chief Nursing Officers (C.N.O), 6 (6.0%) were Assistant Chief Nursing Officers (A.C.N.O), 10 (10.0%) were Principal Nursing Officers (P.N.O), 25 (25.0%) were Senior Nursing Officers (S.N.O), 20 (20.0%) are Nursing Officer II (N.O.2), 15 (15.0%) were Nursing Officer I (N.O.1) and 10 (10.0%) were Student Nurses (S.N.).

### Measures

*Neuroticism scale* was used to measure emotional stability. This was a 12- item scale adapted from the Big Five Personality Scale developed by Costa and McCrae (1992). The rating format ranged from strongly agree (5) to strongly disagree (1) for items that were not reversed and from strongly agree (1) to strongly disagree (5) for items that were reversed. This scale had a coefficient alpha of .87 as reported by the developer. In this study, the scale had a split-half reliability coefficient of .81. The higher the score, the higher the individual's level of neuroticism.

*Agreeableness* was measured using a 12- item scale adapted from the Big Five Personality Scale developed by Costa and McCrae (1992). The rating format ranged from strongly agree (5) to strongly disagree (1) for items that are not reversed and from strongly agree (1) to strongly disagree (5) for items that are reversed. The scale had a coefficient alpha of .86 as reported by the developer. In this study, a split-half reliability of .89 was established for the scale. High score indicated high level of agreeableness and vice versa.

*Mentoring* was assessed with a 15-item scale developed by Okurame (2002). The scale had a rating format ranging from strongly agree (5) to strongly disagree (1). The scale had an alpha reliability of .71 and Spearman Brown coefficient of .81. With this sample, the scale had split-half reliability of .78. High score showed high level of

mentoring relationship and vice versa.

*Marital satisfaction* was measured with a 15-item scale with a rating format ranging from Never (1) to Always (4). The scale was developed by Efoghe (1990). The scale had a Cronbach's alpha coefficient of .79. A split-half reliability of .82 was established for the scale using this sample. The higher the score on the scale, the higher the individual's level of marital satisfaction.

## Procedure

The researchers informed the participants of the purpose of the research. With assistance of the Assistant Chief Nursing Officers, researcher distributed the copies of the questionnaire to all participants in the selected hospitals. The administration of the questionnaires took about 3 weeks because most of the respondents took them home. One hundred and twenty (120) copies of the questionnaire were administered to the randomly selected nurses in hospitals. The sampling method used is the accidental sampling technique. The nurses were encouraged to return the questionnaire in a sealed envelope to ensure the confidentiality of their responses. Out of the 120 questionnaires distributed, 100 were duly completed and used for analysis.

## RESULTS

Table 1 shows the results of the mean, standard deviation, and inter-variable correlations.

Table 1:  
**Mean, SD, and Inter-variable Correlations of the Study Variables**

Variables	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7	8	9
1.Age	45	2.75	1								
2.Educational background	-	-	.07	1							
3.Job experience	12	1.13	.17*	.10	1						
4.Job status	-	-	.17*	.18*	.20**	1					
5.Gender	-	-	.01	.08	.09	.02	1				
6. Neuroticism	28.67	1.89	.09	.11	.11	.13	.23**	1			
7. Agreeableness	31.62	2.11	.19*	.28**	.22**	.22**	.18*	-.24**	1		
8. Marital satisfaction	39.53	1.47	.21**	.22**	.09	.11	.27**	.29**	.22**	1	
9. Mentoring relationship	38.94	2.14	.02	.16	.18*	-.11	.22**	-.17*	.21**	.17*	1

Note: \*\*  $p < .01$ . \* $p < .05$ . N = 100.

From the results in Table 1, gender had a significant positive relationship with mentoring relationship such that male nurses benefited more than female nurses from mentoring relationship [ $r(98) = .22, p < .01$ ]. Neuroticism had a significant negative relationship with mentoring relationship [ $r(98) = -.17, p < .05$ ]. This implies that

mentoring relationship reduced with neuroticism. However, mentoring relationship increased significantly with nurses' level of agreeableness [ $r(98) = .21, p < .01$ ]. Lastly, marital satisfaction was significantly associated with high mentoring relationship [ $r(98) = .17, p < .05$ ].

To test the extent to which neuroticism, agreeableness, and gender independent and jointly influenced marital satisfaction, a  $2 \times 2 \times 2$  ANOVA was conducted. The results are shown in Table 2.

Table 2:

**Summary of 2X2X2 ANOVA on Marital Satisfaction**

Source	SS	df	MS	F	p
Neuroticism	118.40	1	118.40	6.43	<.01
Agreeableness	133.00	1	133.00	7.23	<.01
Gender	62.13	1	62.13	3.38	<.05
Neuroticism x Agreeableness	5.93	1	5.93	.32	>.05
Neuroticism x Gender	5.70	1	5.70	.31	>.05
Agreeableness x Gender	77.88	1	77.88	4.23	<.05
Neuroticism x Agreeableness x Gender	4.31	1	4.31	.23	>.05
Error	1692.35	92	18.40		
Total	147116.00	100			

As shown in Table 2, neuroticism was significantly associated with marital satisfaction in such a way that nurses with low neuroticism tended to enjoy high marital satisfaction [ $F(1, 92) = 3.381, p < .01$ ]. In the case of agreeableness, nurses who were high in agreeableness reported a significantly higher level of marital satisfaction than those with low level of agreeableness [ $F(1, 92) = 7.231, p < .01$ ]. Male nurses reported a significantly higher level of marital satisfaction than female nurses [ $F(1, 92) = 3.381, p < .05$ ]. Only agreeableness and gender exerted a significant joint influence on marital satisfaction of nurses [ $F(1, 92) = 4.234, p < .05$ ]. Hypothesis 1 was partially supported by these results.

In order to test the extent to which neuroticism, agreeableness, and gender connected with mentoring relation, a  $2 \times 2 \times 2$  was conducted. The results are shown in Table 3.

Table 3: Summary of 2X2X2 ANOVA on Mentoring Relationship

Source	SS	df	MS	F	p
Neuroticism	35.06	1	35.06	0.22	>.05
Agreeableness	1014.42	1	1014.42	6.44	<.01
Gender	1129.34	1	1129.34	7.17	<.01
Neuroticism x Agreeableness	273.09	1	273.09	1.74	>.05
Neuroticism x Gender	1.56	1	1.56	0.01	>.05
Agreeableness x Gender	0.12	1	0.12	0.00	>.05
Neuroticism x Agreeableness x Gender	1.38	1	1.38	0.01	>.05
Error	14482.70	92	157.42		
Total	265044.00	100			

Hypothesis 2 was partially supported by the results in Table 3. Neuroticism had no significant influence on nurses' level of mentoring relationship [ $F(1, 92) = 0.22, p > .05$ ]. However, agreeableness had a significant influence on mentoring relationship such that nurses who were high in agreeableness tended to enjoy mentoring than those who were low in agreeableness [ $F(1, 92) = 6.44, p < .01$ ]. Males scored significantly higher than female nurses in mentoring relationship [ $F(1, 92) = 7.17, p < .01$ ]. The results in Table 3 indicate that neuroticism, agreeableness, and gender did not have significant interaction effects on mentoring relationship among nurses.

## DISCUSSION

Hypothesis 1, which stated that there would be main and interaction effects of personality and gender on marital satisfaction among Nigerian nurses, was partially confirmed. The result indicates that neuroticism has a significant effect on marital satisfaction among Nurses. This is in line with the work of Emmons, Diener, & Larsen (1985) who established that neurotic individuals are characterized by a tendency to select themselves into situations that foster negative effect. They also tend to experience negative events (Headey & Wearing, 1989) and show preferential attention to negative stimuli (Rusting & Larsen, 1998). Finally, neurotic individuals are more likely to make maladaptive attributions to their marriages (Karney, Bradbury, Fincham, & Sullivan, 1994) and tend to use ineffective coping styles. This then leads to low level of marital satisfaction.

Also, agreeableness has a significant main effect on marital satisfaction. This suggests that previous non-significant findings may be partially due to mediating or moderating effects of other variables influencing the direct relationship between structural job characteristics and marital satisfaction. The result is in line with the findings of Gareis, Barnett, & Brennan, (2003) who examined how well the work schedule of one's partner fit with their own in balancing work and family demands. Their result indicated that for women, greater work schedule fit was related to increased marital role quality, although no relationship was found for husbands.



Agreeableness fosters the creation of both friendship and intimate interpersonal bonds and consequently should be associated with higher marital satisfaction (McCrae & Costa, 1991). A spouse with low agreeableness inflicts many costs on the partner. It is also apparent that agreeableness is associated with experiences of both job and marital satisfaction and success. Agreeable individuals are characterized by a tendency to select themselves into situations that foster positive events and show preferential attention to positive stimuli. Finally, agreeable individuals make adaptive attributions in their marriages and also tend to use effective coping styles. Additionally, there is some support to suggest that wives' marital and interpersonal functioning may be a greater predictor for husbands' marital satisfaction and marital conflict. Also, marriages disproportionately benefits men, with husbands reporting higher levels of marital satisfaction and well-being than their wives (Baslow, 1992; Bernard 1975; Heyn, 1997; Schumm, Webb, & Bollman, 1998). In addition, research has indicated that women derive mental and physical health benefits when they are in satisfying marriages while men benefit from marriages despite its quality (Hess and Soldo, 1985).

Hypothesis 2, which stated that there would be main and interaction effects of personality and gender on mentoring relationships among Nigerian nurses, was also partially confirmed. The result indicates that there were significant main effects of agreeableness and gender. However, there were no significant interaction effects of the variables (gender and personality) on mentoring relationship.

This finding is in support of the work of Fagenson (1989) which found that male mentor/female protégé relationships exist, but these relationships are infrequent due to perceptions and actual experiences of sexuality and intimacy. Women often fear that the male mentor or others will construe approaching a male mentor as a sexual advance within the organization. The actual or perceived power of a male mentor over a female protégé may also create concern about the potential for sexual harassment.

Allen & Eby (2004) surveyed over 391 mentors and found support for this gender difference in support provision. Female mentees tend to be more comfortable conforming to gender expectations in providing support, as they may sense that their mentees need emotional support. Sosik and Godshalk (2000) indicated that mentoring relationships involving female mentors in either homogeneous or diversified relationships provided more role modeling and less career development than relationships involving male mentors. Male mentors in homogeneous relationships were associated with lower levels of role modeling than female mentors in either homogeneous or diversified relationships. Homogeneous male relationships also offered less psychosocial support than female mentors in diversified relationships with male protégés. Male mentors in diversified relationships with female protégés were associated with more career development than any other gender combination of mentoring relationship (Afolabi, 2011).

Agreeableness is much of an interpersonal trait and largely determines how well one is able to *get along* with others. In a study of team process, Barrick, Stewart, Neubert, and Mount (1998) found that teams with a disagreeable person can suffer from reduced team cohesion. If that team is reduced to two, it seems the influence of a disagreeable member would be more detrimental. Intuitively, if either the mentor or the protégé were hard to work with, as expected of an individual low in agreeableness, it would have a negative impact on the relationship, in line with this, only a main effect for agreeableness is expected.

The results of the present study suggest that organizations should reinforce the nurses' strengths and celebrate them regularly. They should give them opportunities to use their skills whenever possible. There should be opportunities for mentees to see how he/she can work towards achieving his/her goals in life. Achieving this will also lead to a level of marital satisfaction. Sometimes, nurses rely so much on what others think, thus, they lose sight of their own goals, values and beliefs. Mentors can encourage their mentees to get in touch with the things that really matter to them. Females generally rely on others to help them sort out problems, emotions, and stressful experiences. Thus, there must be opportunity to listen actively, help them identify what's really going on, and help them come to some kind of resolution rather than allowing them to dwell on their problems. Therefore, the hospital management should embark on programmes that give emotional support to nurses.

### CONCLUSION

This research provides an overview of current mentoring research within the workplace and marital settings. Most evident is that these research literature bases have been growing, often in parallel ways. The research concludes that neuroticism, agreeableness and gender have significant effects on marital satisfaction. Also, the effects of agreeableness and gender on mentoring relationships were significant. It is therefore concluded that agreeableness and the gender of nurses influence their level of marital satisfaction and mentoring relationships.

However, there are other personality traits that tend towards non marital satisfaction and mentoring relationships. Consequently, tremendous opportunities to enhance the knowledge base on mentoring and marital satisfaction is necessary.

The study was supposed to cover quite a number of nurses in Nigeria but was limited to only one hundred nurses. This is as a result of limited number of nurses who are ready to take part in the study. Besides, time factor made the researcher to limit the study to just two Teaching Hospitals within Edo State. Based on this, future study should address the short-comings of this study.

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