

Exploring Gender Differences In Stress Coping Strategies Among COVID-19 Essential Staff: A Case Study Of The Ministry Of Local Government And Public Works

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Abstract:

Background: The COVID-19 pandemics has prompted governments worldwide, including Zimbabwe, to implement containment measure such as closing non-essential public places and restricting mass gatherings. These measures have introduced new stressors for working men and women, including losses in academic and professional training, income and strain on marital relationships due to conflicts and dilemmas in the new daily routine. The pandemic has had significant negative impacts on health, economy, society, and security, causing substantial political and social disruption. It is against this background that the researchers sought to explore the relationship between stress coping strategies and gender among COVID-19 essential staff at the Ministry of Local Government and Public Works.

Materials and Methods: Fifty-three COVID-19 essential staff were randomly selected from the Head Office and Harare Metropolitan Provincial Coordinator's Office located in Harare. The psychological Stress Measure (PSM-9) and the COPE Inventory were used to collect data for the study. Both instruments have been proven to have cross-cultural reliability and validity. The data were analysed using descriptive and inferential statistics via SPSS, with the chi-square test employed to examine relationships between variables.

Results: The study's findings revealed that women reported significantly higher levels of perceived stress, emotionally based coping, and maladaptive coping compared to men. Perceived stress strongly predicted maladaptive coping strategies, with a more pronounced correlation among men. This difference may be attributed to socialisation patterns, where men are often encouraged to use active and instrumental coping strategies, while women tend to employ more passive and emotion-focused approaches, seeking social support.

Conclusion: The study's findings underscore the complex interplay between gender, perceived stress, and coping strategies. Women's higher reports of perceived stress and emotionally based coping highlight the need for targeted interventions that address these specific challenges. The stronger correlation between perceived stress and maladaptive coping in men suggests that stress management programmes should also focus on promoting healthier coping mechanisms among men.

Key Word: Gender Differences; Stress Coping Strategies; COVID-19 Essential Staff; Ministry of Local Government and Public Works.

Date of Submission: 10-08-2025

Date of Acceptance: 20-08-2025

I. Introduction

Stress is a universal human experience, and individuals cope with it in diverse ways. Coping mechanisms play a crucial role in navigating stressful situations, influencing outcomes and well-being. Research suggests that stress responses vary significantly across demographics, with factors like sex, age, employment, resilience, and coping styles playing a significant role (Gaygisiz et al., 2012). Notably, studies have found that females and males respond differently to stressors, including pandemics, with females more likely to experience cycles of despair and passivity (Nolen-Hoeksema et al., 1999).

This study investigates gender differences in coping strategies among COVID-19 essential staff in Zimbabwe's Ministry of Local Government and Public Works. Coping encompasses cognitive, behavioural, and emotional strategies to manage stress and regulate emotions (Monat, Lazarus & Folkman, 1991; Bjorck, 2007). Cognitive coping strategies, which involve managing emotionally arousing information (Thompson, 1989), include techniques like acceptance, positive reappraisal, and refocus on planning. Research by Blaock and Joiner (2000) found that cognitive avoidance is linked to increased anxiety and depressive symptoms in women, but not men. Behavioral stress coping strategies involve proactive actions to mitigate the pandemic's mental health impact. Following social distancing and hygiene rules can be a form of active, prosocial coping, promoting a sense of empowerment and control over a stressful situation. This collective approach may help individuals cope

with the pandemic's mental burden. Emotion-focused coping is a strategy that targets emotional responses to stressors, involving techniques like venting, positive reappraisal, rumination, and self-blame. This approach can be beneficial when stressors are uncontrollable, with positive reappraisal linked to reduced negative emotions (Garnefski & Kraaij, 2006). However, emotion-focused coping can also be associated with increased anxiety, depression, and distress (Whatley et al., 1998), highlighting the need for context-dependent application.

Research suggests that men and women differ in their coping strategies, with women more likely to use emotion-focused coping and seek social support, while men tend to employ problem-focused or instrumental approaches (Billings & Moos, 1981; Folkman & Lazarus, 1987). Gender socialization plays a significant role in shaping these differences, with women encouraged to express emotions and seek help, while men are socialized to be more independent and self-reliant (Eagly & Crowley, 1986). These differences may contribute to women's higher reports of psychological distress, depression, and anxiety (Mazure & Maciejewski, 2003; Mezuli et al., 2002).

In view of the above background, the aim of the current study was to investigate gender differences in coping strategies among COVID-19 essential staff in Zimbabwe's Ministry of Local Government and Public Works. It sought to answer the following questions:

1. What are the most common stress coping strategies employed by COVID-19 essential staff in the Ministry of Local Government and Public Works?
2. Are there significant gender differences in stress levels among COVID-19 essential staff in the ministry?
3. Do male and female employees differ in their use of problem-focused versus emotion-focused coping strategies?
4. What is the relationship between stress levels and coping strategies among male and female employees in the ministry?

II. Material And Methods

The study recruited 53 COVID-19 essential staff from a population of 177 employees at the Ministry's Head and Provincial offices in Harare Metropolitan. The Psychological Stress Measure (PSM-9), a nine-item tool assessing the state of feeling stressed, and the COPE Inventory, a multidimensional coping inventory evaluating various stress responses, were used to collect data. Both instruments have demonstrated cross-cultural reliability and validity. Data were analysed using descriptive statistics via SPSS to examine gender differences in stress coping strategies.

Study Design: This study employed a quantitative research approach with a correlational design to examine the relationship between stress coping strategies and gender. This design allowed for the exploration of associations between variables without manipulation, providing insight into the associations between stress coping strategies and gender.

Study Location: Harare Metropolitan

Study Duration: November 2022 to November 2023.

Sample size: 53 Participants.

Sample size calculation: The sample size was estimated on the basis of a single proportion design. The target population from which we randomly selected our sample was considered 177. We assumed that the confidence interval of 10% and confidence level of 95%. The sample size actually obtained for this study was 53 Participants.

Subjects and selection method: 53 subjects randomly selected.

Inclusion criteria:

1. Employees at Head and Provincial offices in Harare
2. Either sex
3. Aged ≥ 18 years,
4. COVID-19 essential staff

Procedure methodology

Before data collection, the researchers secured ethical clearance from the Research Council of Zimbabwe and obtained permission from the Permanent Secretary of the Ministry of Local Government and Public Works. Participants provided informed consent prior to their involvement in the study. The researchers then administered

the Psychological Stress Measure (PSM-9) and the COPE Inventory sequentially to participants in a designated boardroom at the Ministry. Responses were collected immediately after participants completed both tools.

Data analysis

Data were analysed using descriptive statistics via SPSS (version 20, IBM, Chicago, IL), with percentages used to illustrate gender differences in stress coping strategies. The level $P < 0.05$ was considered as the cutoff value or significance.

III. Result

Respondents and Setting

Fifty-three participants (12% [6] = management staff; 22% [12] = support staff; 17% [9] = administrative staff; 26% [26] = technical staff; male = 57% [30]; female = 43% [23]; age range = 18 – 61+ years); marital status (single = 17% [9]; married = 66% [35]; widowed = 9% [5]; divorced = 8% [4]; educational qualifications = secondary education 11% [6]; college = 44% [23] degreed = 45% [24] working experience = 5-21+ years) were included in the study. All respondents were employees in the Ministry of Local Government and Public Works located in Harare Metropolitan.

Coping Strategies by Gender

The study found notable differences in coping strategies between male and female respondents. Key findings include: (a) Planning 57% (n=17) of males and 43% (n= 10) of females, (b) Suppression 80% of males (n= 24) and 21% (n= 5) of females, (c) mental disengagement 53% (n= 16) of males and 39% (n= 9) of females, and (d) Denial 70% (n= 21) of males and 43% (n= 10) of females, (e) positive reinterpretation 33% (n= 10) of males and 30% (n= 7) of females, (f) Acceptance was utilised by 33% (n=10) of males and 35% (n=8) of females, (g) Humour 60% (n= 18) of males and 39% (n= 9) of females, and (h) religion 23% (n= 7) of males and 57% (n= 13) of females. These findings align with Folkman and Lazarus' (1987) research on gender differences in coping strategies. Additionally, the results are supported by other studies (Haslam et al., 2009; Putnam, 2000; Stanislawski, 2019).

IV. Conclusion

This study highlights significant gender differences in coping strategies among respondents. The findings suggest that males tend to employ more confrontational and problem-focused coping strategies, such as planning and suppression, whereas females tend to utilise more emotional and social coping strategies, such as religion and acceptance. These differences may be influenced by traditional gender stereotypes and roles. The study's results have implications for the development of targeted interventions and support services that cater to the unique needs of males and females. By understanding these differences, mental health professionals can provide more effective support and guidance to individuals navigating stressful situations.

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