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Structural model of personal qualities influence on professional health of sales managers

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Received: 19/03/2018 • Approved: 30/05/2018

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ABSTRACT:

The article is devoted to an empirical research of the personal qualities influence on the professional health of sales managers. Due to the modeling performed with the structural equations the authors defined that the influence is of a hierarchical structure and found two major determining factors. The personal maturity factor explicates 63% of dispersion; the indicators of this factor are socialization, self-control, tolerance, achievement through independence, existential values. The self-actualization factor explicates 26% of dispersion, the factor indicators being intellectual efficiency, synergy, sociability, cognition, selfacceptance. The researchers also defined the influence of exogenous factors of gender and nationality and the negative impact of premorbid rigidity and motivation of avoiding failures on the professional health. The research was conducted in Russia in the Republic of Khakassia in 2017. Keywords: professional health, structural modeling, factors and personal determinants of professional health, self-actualization, personality maturity

RESUMEN:

personalidad

El artículo está dedicado a una investigación empírica de la influencia de las cualidades personales en la salud profesional de los gerentes de ventas. Debido a la modelización realizada con las ecuaciones estructurales, los autores definieron que la influencia es de una estructura jerárquica y encontraron dos factores determinantes principales. El factor de madurez personal explica el 63% de la dispersión; los indicadores de este factor son la socialización, el autocontrol, la tolerancia, el logro a través de la independencia, los valores existenciales. El factor de autoactualización explica el 26% de la dispersión, los indicadores de los factores son la eficiencia intelectual, la sinergia, la sociabilidad, la cognición, la autoaceptación. Los investigadores también definieron la influencia de factores exógenos de género y nacionalidad y el impacto negativo de la rigidez premórbida y la motivación de evitar fallas en la salud profesional. La investigación se realizó en Rusia en la República de Khakassia en 2017. Palabras clave: salud profesional, modelado estructural, factores y determinantes personales de la salud profesional, autorrealización, madurez de la

1. Introduction

The urgency of the public health issue in Russia is confirmed with the Russian Federation Federal Law No. 323-FZ of November 21, 2011 "On fundamental healthcare principles in the Russian Federation " (last updated on December 29, 2017). Furthermore, according to the Concept of long-term social and economic development till 2020 one of the state policy priorities is protection and promotion of the public health, disease record reduction and increase in the duration of the active creative life.

The majority of foreign researchers consider that the negative factors that affect the professional health are stress (R. S. Lazarus, 1984; J. & R. Useem, 1958; U. Lundberg & M. Frankenhaeuser, 1999; J. Turnage & Charles D. Spielberger, 2007; etc.), emotional burnout (A. Pines & E. Aronson, 1988, etc.), harassment and mobbing (N. P. Serantes, M. A. Suares, 2006, etc.), presenteeism and abstenism (M. Miraglia, G. Johns, 2016, etc.), pro-active behavior as negative factor (D. Fay, A. Hüttges, 2017) and others.

The positive factors are viability (S. Maddi, 1998, etc.), enthusiasm for work (G.Becker, 2010; W. Shaufeli, M. Salanova, 2010), human capital (G. Becker, 1964, etc.), preventive behavior (C. S. Wilbur, T. D. Hartwell, P. V. Piserchia, 1986) emotions as personal resources (G. Buruck, D. Dörfel, J. Kugler, S. Brom, 2016) and pro-active behavior together with self-efficiency (A. Schmitt, F. Belschak, D. Hartog, N. Deanne, 2017), etc.

The Russian psychologists point out such positive psychological factors influencing the professional health as emotional competence (R. A. Berezovskaya, A. A. Kirilova, 2013), style and emotional features of humour (A. G. Buyenok, R. A. Berezovskaya, 2013), fulfilled existence (L. R. Pravdina, O. S. Vasilyeva, E. W. Gauss, 2015), etc. The psychologists describe criteria for professional health, such as adaptability of coping strategies, mature mechanisms of psychological protection (A. L. Katkov, 2002), emotional and behavioral flexibility, internal control locus, synergy, time competence, creativity (T. G. Glukhova, 2003), working capacity (G. S. Nikiforov, V. I. Shostak, L. A. Yanshina, 2006), reflexive self-control (G. G. Verbina, 2011), psychological safety (N. V. Kozlova, A. S. Gulyaev, 2012), high level of consciousness development (S. D. Tsydypova, 2013), etc.

However, personality factors and determinants of the professional health, including the health of sales managers are still an acute research area.

In total, the business efficiency depends on the professional success of sales managers, where one of the basic factors is the ability to maintain their health required for personal and professional potential. On the other hand, the profession of the sales manager stands at the top of the list of stressful professions, for it deals with the high informational and emotional overload leading to the loss of the professional health and decrease in the company efficiency. All this determined the choice of the research topic.

2. Methodology

Research techniques

 The empirical techniques: A. Shostrom's self-actualisation test adapted by L. Ya. Gozman, Yu. E. Alyoshina, M. V. Zagika and M. V. Kroz; the motivation test of H. Hekhauzena in L. N. Sobchik's adaptation; Californian personality questionnaire of G. Goukh adapted by N. A. Grafinina and N.V. Tarabrina; the professional health questionnaire developed by G. S. Nikiforov, N. E. Vodopyanov, E. S. Starchenkova, R. A. Berezovskaya; the SF-36 questionnaire; rigidity and flexibility questionnaire of G. V. Zalevsky.

2) Mathematical statistics methods: SEM (Structural Equation Modeling), with calculations carried out by means of the statistical program SPSS IBM AMOS.

3. Results

The research target is to study and reveal personality determinants of the professional health of sales managers.

To create the model we have used structural modeling, or SEM (Structural equation modeling). The structural modeling is based on a number of preliminary mathematical procedures to develop a structural model, such as correlation analysis, multiple regression

analysis, confirmatory factor analysis, etc.

The model is considered valid (confirming the initial hypotheses) if it corresponds to the original data according to the accepted criteria (criteria of consent) (2).

The model is a flowchart transformed by the computer program into the system of linear equations. The basic elements of the model are variables (explicit, implicit, measurement errors) and links between them (directed and not directed).

To recognize the model as corresponding to the data we applied the following consent indexes and their admissible values: chi-square /df<2; p>0,05; GFI>0,95; AGFI>0,9; CFI>0,95; RMSEA<0,05 (2). Figure 1 shows that all the consent indexes have admissible values and, therefore, the developed model is possible to interpret (Figure 1).

At the first stage of the structural equation modeling we developed an aprioristic model that reflects hypothetic concepts on interrelation of explicit variables and implicit variables. The hypothetic assumption was that the integrative indicator of the professional health is influenced by such exogenous factors as gender and nationality, the level of the development of personal maturity and self-actualisation and motivators in the activities aimed at avoiding failures.

Our assumptions were based on the confirmatory factor analysis that had been previously carried out with the structural equation modeling program IBM SPSS AMOS. We calculated "secondary factors" to be saved as new variables for the data reduction and reduction of the quantity of the studied variables according to the statistical requirements. The sampling is acceptable on quantity (n), if it is ratio n > 5T (where T is the quantity of the estimated parameters).

In the described case, the sampling is possible to consider acceptable after reduction of variables (N=244, T=47). The names of the reduced variables are given in Table 1.

Nº	Variable	Decoding
1.	Ie	Intellectual efficiency
1.	So	Socialization
1.	Sc	Self-control
1.	Ai	Achievement through independence
1.	То	Tolerance
1.	PMR	Premorbid rigidity
1.	IAF	Instrumental activities for avoiding failures
1.	Integrativind.	Integrative indicator of the professional health

Table 1Decoding of the shortcut names of the variables of the model

Having developed the aprioristic measuring model we constructed the structural model of influence that includes two secondary factors (implicit variables F1 and F2.).

The indicators of the first self-actualisation factor (F1) are such explicit variables as selfacceptance, synergy, sociability, cognition, intellectual efficiency. Almost all explicit variables (indicators) are scales of the self-actualisation test of E. Shostrom, which caused the name of the first factor. According to K. Rogers the high level of self-acceptance development assumes authenticity, acceptance of oneself with all one's merits and demerits and a certain level of personal maturity. The data obtained within this research agree with interrelation of self-actualisation and psychological health which is considered in the research as one of the structural components of the professional health.

It is characteristic for psychologically healthy people to show interest in life, to be initiative and involved in activities and work engagement. So, sociability and cognition indicate the high level of the psychological health.

E. Fromm describes efficiency as one more characteristic of a self-actualized person; it is considered to be a condition of full life together with activity satisfaction and success as an objective factor (6).

The second personal maturity factor (F2) includes such indicators as socialization, selfcontrol, tolerance, achievement through independence and values. The variable of value belongs to E. Shostrom's SAT scales and defines to what extent the testee shares values of the self-actualised personality. Achievement through independence factor describes people capable to work efficiently and independently to make effective decisions in a crisis.

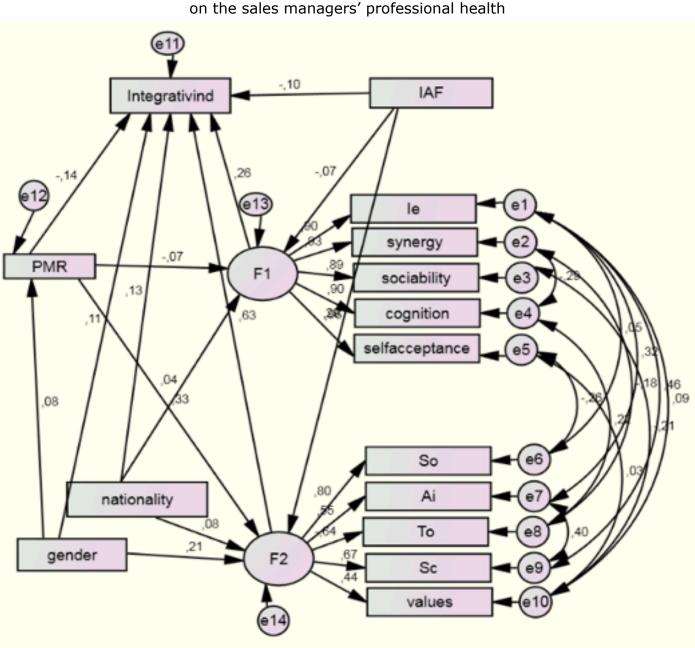


Figure 1 Structural model of the influence of personal qualities on the sales managers' professional health

CMIN=87,815;df=71; p=,086; GFI=,913; CFI=,983; RMSEA=,044

The variables of socialization, tolerance and self-control form a class of scales that show maturity of the personality. That is why the second factor is called personal maturity (6). Almost all the regression weights that we have gained have statistical validity (p < 0,001). Figure 1 shows that the second factor explicating 63% of dispersion has the greatest

influence on the integrative indicator of the professional health. The first self-actualisation factor comes second in its influence on the professional health and explicates 26% of dispersion. The premorbid rigidity follows next to influence the professional health. This indicator has a negative regression weight and, accordingly, negative impact on the professional health of sales managers. G.V. Zalevsky interprets premorbid rigidity as personal features that prevent personality from showing flexibility and tolerance in social interaction and "getting stuck" on negative experiences in stressful situations (21). The premorbid rigidity influences self-actualisation and personal maturity, with the greatest impact on the last factor.

The significant determinants of the professional health are also nationality that explicates 13% of dispersion, gender with 11% and instrumental activities aimed at avoiding failures (10%). Besides the last indicator shows a negative regression weight and, as a result, has negative impact on the professional health.

4. Conclusions

So, we assume that our hypothetical assumptions have been confirmed. The personal qualities marked out during our research do influence the integrative indicator of the professional health. We particularized the participation of each factor by means of the aprioristic model. The model of the personal qualities influence on the professional health can be described consistently, according to the largest regression weight gained:

personal maturity factor including such indicators as socialization, achievement through independence, tolerance, self-control and values;

self-actualisation factor including such indicators as intellectual efficiency, synergy, sociability, cognition, self-acceptance;

personal qualities presented with the dichotomy "rigidity – flexibility", namely, premorbid personality features;

exogenous factors of nationality and gender;

motivation associated with the activities to avoid failures.

Therefore, the fundamental determinants influencing the professional health level are personal qualities as well as exogenous factors and motivational features.

Bibliographic references

Becker G.S. (1964) Human Capital. Columbia University Press. N.Y.

Bentler P.M. (2007) Can Scientif cally Useful Hypotheses Be Tested With Correlations? // American Psychologist. Vol. 62, N 8.- pp. 769–782.

Berezovskaya R.A., Kirillova A.A. (2012) To the question of the formation of the psychology of occupational health in Russia // Psychological Journal (Minsk). No. 1-2 (31-32).- pp. 18-23.

Buruck, G., Dörfel, D., Kugler, J., & Brom, S. (2016) Enhancing well-being at work: The role of emotion regulation skills as personal resources. Journal of Occupational Health Psychology, 21(4).- pp.480-493.

Fay D., Hüttges A. (2017) Drawbacks of proactivity: Effects of daily proactivity on daily salivary cortisol and subjective well-being. // Journal of Occupational Health Psychology. Vol. 22 (4).- pp.429-442.

Gough H.G. (1987) The California Psychological Inventory. N.Y.

Kozlova N.V., Gulyaev A.S. (2012) Psychological safety as a criterion of professional health of students of senior courses of innovative universities // Medical psychology in Russia. N 4 (15).

Lazarus R.S., Folkman S. (1984) Stress, appraisal, and coping. N.Y.: Springer.

Lundberg U., & Frankenhaeuser, M. (1999). Stress and workload of men and women in high-ranking positions. Journal of Occupational Health Psychology, 4(2).- pp.142-151.

Maddi S. (1998) Hardiness in health and effectiveness // Encyclopedia of Mental Health. 2.pp.323–335.

Murphy L.R. (2009) Stress management techniques: Secondary prevention of stress // Handbook of work and health psychology / Ed. by C.L. Cooper, J.C. Quick, M.J. Schabracq. New Jersey: Wiley-Blackwell Inc., 2009 (3rd ed.). pp. 427—442.

Pravdina L.R., Vasilyeva O.S., Gaus E.V. (2015) Existential fulfillment as a factor of professional health / Engineering Bulletin of the Don. Nº 3.

Schmitt A., Belschak F., Hartog D., Deanne N. (2017) Feeling vital after a good night's sleep: The interplay of energetic resources and self-efficacy for daily proactivity//Journal of Occupational Health Psychology, Vol. 22(4), Oct., pp.443-454.

Shostak V.I. (2006) Professional Health // Psychology of Occupational Health: Textbook. allowance / ed. Nikiforova GS - St. Petersburg. - P.480.

Tsydipova S.D. (2013) Reguljativnaja function of a productive self-estimation of professional health of the teacher of the higher school // Izvestiya of the Russian state pedagogical university of a name of AI. Herzen. № 160. - St. Petersburg: RSPU them. A.I. Herzen.- pp. 257-262.

Turnage J. & Spielberger C. (2007) Job stress in managers, professionals, and clerical workers// Work & Stress.- pp.165-176.

Useem J., Useem R. (1958) Social stresses and resources among middle management men // Patients, physicians and illness, sourcebook in behavioral science and medicine/ Ed. by E. G. Yaco. Glencoe.- pp. 74-79.

Verbina, G.G. (2011) Psychological and acmeological concept of the development of professional health specialist: the thesis ... of Doctor of Psychology: 19.00.13 / Verbina Galina Georgievna.- Tambov. – P. 523.

Vodopyanova N.E., Starchenkova E.S. (2009) The Role of Resource-Investment Coping in the Emotional Experience of Extreme Situations and the Development of Individual Stress Resistance // Bulletin of St. Petersburg State University. Series 12. Sociology. Nº3-2.

Wilbur C.S., Hartwell T.D., Piserchia P.V. (1986) The Johnson and Johnson life to life program: its organization and evaluation plan // Health and industry: a behavioral medicine perspective New York. - pp. 338-350.

Zalevsky G.V. (2000) The Tomsk rigidity questionnaire of G.V. Zalevsky // SPZ. № 12.pp.129-137.

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