The Impact of Urban Life Style on Health of Corporate Executives

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In this competitive era, the compensation of employees especially executives is often linked to their performance and in achieving organizational objectives, executives have been forgoing their personal care and increasing family - life imbalance. In long run the impact of executive lifestyle and imbalances that it causes on family and social relations which ultimately affect the working and the productivity are enormous. The present research paper attempts to build an understanding of the impact of Urban life style, and the various stressors that it engenders, on the Health of Corporate Executives. This paper also put thrust on the changed urban life and living and its impact on various facets of human life. In this research work the researchers have studied two major variables, namely urban life style stressors and health of cooperate executives. The result of the research shows that even if there is general notion that the urban work life should effect the health status of the corporate executive the study does not show the significant negative relationship between the health and urban work life.

Keywords : Urban Life Style, Corporate Executive Health, Work Life Balance,Compensation Employee Performance

Introduction

In this competitive era, commercial organizations have been extracting as much work as possible from the employees, particularly the top executives. The compensation paid to them is often linked to their performance and in achieving organizational objectives, executives have been forgoing their personal care and increasing family-life imbalance. A person is not healthy unless one is emotionally and physically well as per the definition of WHO. In long run the impact of executive lifestyle and imbalances that it causes on family and social relations which ultimately affect the working and the productivity are enormous.

This paper attempts to understand the impact of Urban life style, and the various stressors that it engenders, on the Health of Corporate Executives. In recent years there has been a lot of discussion on the changed urban life and living and its impact on various facets of human life. Usually every urban individual faces these stressors in his day to day life and they impact his health in some ways.

In this is related to two major variables, namely urban life style stressors and health of corporate executives. Corporate life being the ideal and an epitome of urban life, is the ideal phenomenon which can give us an understanding about the relationship between the above two variables.

Conceptual Definitions

Urban Life style: "Urban life style is defined as the bundle of behaviors that comes along with people living in urban areas."

Social Support: Social support is a concept that is generally understood in an intuitive sense, as the help

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from other people in a difficult life situation. One of the first definitions was put forward by Cobb (Cobb, 1976). He defined social support as 'the individual belief that one is cared for and loved, esteemed and valued, and belongs to a network of communication and mutual obligations'

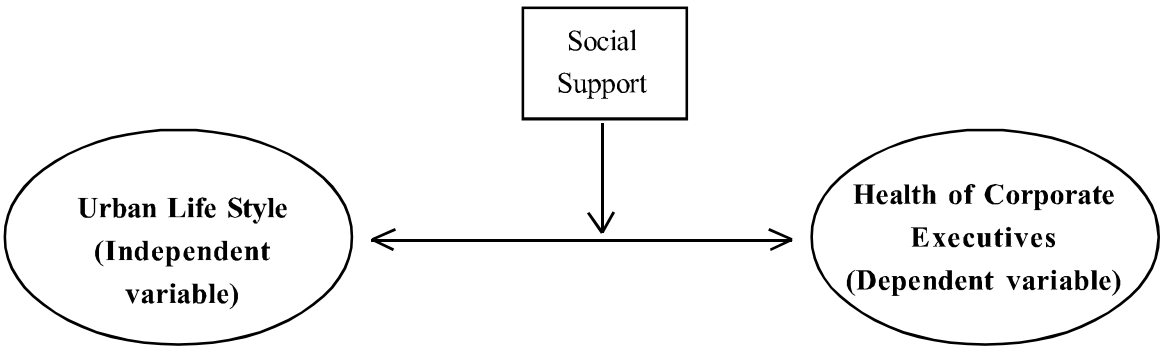
Health: "Health is a state of complete physical, emotional, spiritual well being."

Operational Definitions

Independent variables: Urban life style

Factors	Operational Measure
Family Life	Time spent with family, household related work, family type
Sedentary life style	Total sitting time at work
Urban work life	Shift in work, extended work hours, time taken to commute work, carry office work in home, work holidays, busy in work related phone calls, inflexibility in working hours, work pressures and deadlines
Food habits	consumption of semi cooked food, eating out, irregular food timing, excess consumption of beverage, skipping food
Health	Use of non prescriptive drugs, concern about consuming supplements, addictive habit, excess use of computer
Self related factors	No time for hobbies, distress with present financial situation, exercise duration, time for entertainment
Moderating variable	
Social support	Network of friend, social support
Dependent Variable	
Physical health	Body mass index, physical discomfort (backache, headache, indigestion and frequency of occurance, presence of life style diseases like heart ailments, blood pressure, bad cholesterol, diabetes, asthma, obesity, arthritis, and spondolytis.
Emotional health	frequency of feeling of unhappiness, depression, loneliness, sadness, abusive behavior, short temper, sentimental behavior, feeling of inner peace, comfort, love, connectedness with oneself and others.

Conceptual framework



Objectives

1. To observe the predominant characteristics of an urban life style.
2. To study the effect of characteristics of an urban life style to health and its related constructs.
3. To observe the effect of urban life style to the various components of health like physical, emotional, spiritual aspects.
4. To study the relationship between urban life style with good health.

Hypotheses

Hypothesis 1: Urban life style has negative impact on health

Hypothesis 1 (a): Urban life style has negative impact on physical health

Hypothesis 1 (b): Urban life style has negative impact on emotional health

Hypothesis 2 : Social support moderates the effect of Urban life style on health

Hypothesis 3 : Food habits in urban life style are negatively correlated with health

Hypothesis 4 : Urban work life is negatively related with health

Methodology

The study of impact of urban life style on health of corporate executives of Nepal especially the urban area is universe of the study. For the study sixty data collected from Corporate Executives from Kathmandu and Narayangarh city of Nepal. The data was collected using specially developed questionnaire through internet. The questionnaire was made online and request corporate executive through e-mail and telephone. The sampling design proposed for the study was non probability, convenience sampling. The data had transfer to the SPSS and different analysis made. The data subjected were analysed using suitable statistical tools like frequency proportion mean and standard deviation. Factor analysis was conducted to condense the different dimensions of different factors. Correlation Regression analysis with ANOVA was performed to test hypothesis.

Data Presentation and Analysis

In total, 60 respondents filled the online survey. The numbers of incomplete response were identified as 4 and were deleted from the sample. Altogether samples of 56 respondents were selected for further data analysis.

Table No: 4.1

Respondent profile-1

Gender	No. of respondent	Percentage %	Marital Status	No. of respondent	Percentage %
male	54	96.43	Married	42	75.00
female	2	3.57	Un married	14	25.00
Total	56	100	Total	56	100

Source: Sample survey, 2010

Table No: 4.2

Respondent profile-2

Family type	No. of respondent	Percentage %	Spouse employment	No. of respondent	Percentage %
Joint	11	19.64	Employed	36	85.71
Nuclear	45	80.36	Unemployed	6	14.29
Total	56	100	Total	42	100

Source: Sample survey, 2010

Table No: 4.3

Respondent profile-2

Age Group	No. of respondent	Percentage %	No. of children	No. of respondent	Percentage %
18-25	8	14.29	0	7	16.67
25-35	13	23.21	1	3	7.14
35-45	26	46.43	2	29	69.05
more than 45	9	16.07	3	3	7.14
Total	56	100.00	Total	42	100.00

Source: Sample survey, 2010

There were 54 males and 2 females as shown in table 4.1, where majority of the respondents were in the age group of 35-45 (46.43%). Similarly 75% were married and among them 85.71% have a spouse who is employed. While observing the family type 83.36% are reside in Nuclear family structure and 69% have 2 children with them.

Table 4.4 shows the means, standard deviation and bi-variate correlations for the study variables. The correlation matrix includes the bi-variate correlation of the different factors of urban lifestyle and physical, mental and spiritual health along with demographic variable.

Similarly Table 4.5 provides the results of the hierarchical regression models of physical and mental health. The different models are the regression analysis in Block including the different variables. The first model includes only the demographic variable, whereas the second model include the major two variables of urban lifestyle they are family life and urban work life. Similarly the third model is proposed including the different variables of urban life style whereas the forth model is including the combination of all the factors of urban lifestyle in a single variable.

Table 4.4
Means, Standard Deviations, and Correlations

SN		Mean	S.d.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1	Gender	1.04	.187																
2	Type of family	1.20	.401	.147															
3	Number of children	4.61	2.29	-.235	-.297*														
4	family life	1.25	1.03	.246	-.291*	-.174													
5	Sedentary	3.93	2.33	.173	.444**	-.076	-.067												
6	Urban work life	16.98	7.90	.123	.041	.103	-.025	.220											
7	Food habit	13.13	5.57	-.074	-.044	.036	-.204	-.124	.442**										
8	Health conscious	4.86	3.054	-.182	-.051	.064	-.409**	-.186	.313*	.365**									
9	Self related	5.09	3.97	.066	.046	-.333*	.486**	-.179	.080	-.037	-.069								
10	Physical discomfort	6.91	2.59	.082	.192	-.012	-.341*	.020	-.019	.582**	.231	-.083							
11	Presence diseases	2.61	1.86	.150	.184	-.073	-.082	.088	.219	.419**	-.099	.372**	.412**						
12	Sad depressed	10.25	3.92	.359**	.280*	-.348**	-.475**	.070	.254	.501**	.199	-.151	.487**	.417**					
13	Temper	3.61	1.34	.273*	.146	-.282*	-.098	.072	.210	.330*	.256	.097	.303*	.385**	.636**				
14	Inner piece	1.84	1.04	.123	.251	-.301*	.218	.153	-.131	-.100	-.248	.377**	.150	.150	-.084	.045			
15	Connected with others	4.88	1.43	.153	.234	-.052	-.227	.134	.385**	.272*	.271*	.221	.095	.277*	.330*	.211	.268*		
16	Social support	3.50	1.44	.135	.142	-.343**	.204	.185	-.089	-.466**	-.269*	.002	-.320*	-.049	-.093	.009	.030	-.093	
17	Connected with friend	3.07	1.31	.138	-.027	-.230	.211	-.058	.217	.034	.071	.650**	.045	.375**	.227	.493**	.250	.317*	.135

N = 54 For Gender male = 1 and Female = 2
** Correlation is significant at the 0.01 level (2-tailed).
* Correlation is significant at the 0.05 level (2-tailed).

Hypothesis 1a proposed the urban life style has negative impact on physical health. As shown in model 3 of table 4.5 the relationship of physical health with factors family life (= -0.541, p<.05), urban work life (= -0.128, p<.05), Food habit (= -0.492, p<.05), self related (= -0.304, p<.05) are negative and significant. Therefore finding support for the hypothesis 1a.

Hypothesis 1 b suggested that urban life style has negative impact on emotional health. As shown in model 3 of table 4.5 the relationship of emotional health with factors family life (= -1.332, p<.01), Food habit (= -0.396, p<.05), health consciousness (= -0.36, p<.05) are negative and significant. Regression value -1.332 of family life is highly significant which indicate the high association of emotional value with the time devoted to family. Therefore finding hold true for the hypothesis 1b significantly.

Food habits in urban lifestyle are negatively correlated with health status was the third hypothesis. Which is verified by the model 3 of table 4.5 where the regression coefficient of physical health on food habit found to (= -0.492, p<.05), and of emotional health on food habit found to be (= -0.396, p<.05) and is supported by table 4.6 where the correlation coefficient between health with food habit was found (r = -0.592, p < .01).

Regarding fourth hypothesis, the relationship between urban work life and health of corporate executives does not show the significant relationship. The correlation coefficient from table 4.6, it is observed (r = -0.193, p > 0.05). So our forth hypothesis cannot be justified by the observed data.

Table 4.5

Result of Hierarchical Regression Models of Physical and Emotional Health

	Physical Health				**Emotional Health**			
variables	Model 1	Model 2	Model 3	Model 4	Model 1	Model 2	Model 3	Model 4
Demographic								
Age	0.18	-0.283	0.301	0.38	-1.118	-2.358**	-2.502**	-2.503**
Sex	2.156	3.327	5.35*	5.436**	7.952*	10.551**	10.754**	10.753**
family type	2.006	0.843	1.143	0.378	2.824	-0.159	-0.176	-0.171
urban lifestyle								
family life		-0.508*	-0.541*	-0.24		-1.278**	-1.332**	-1.333**
urban work life		0.032	-0.128*	-0.48		0.136*	0.055	0.058
Food habit			-0.492*	0.203			-0.396*	0.398
health consciousness		-0.155	-0.414			-0.36*	-0.358	
self related			-0.304*	-0.677*			0.0318	0.029

combined effect								
Urban lifestyle				0.315				-0.00
F	1.132	1.584	8.821**	8.475**	5.979	12.507**	14.731**	12.816**
R2	0.061	0.137	0.6	0.624	0.256	0.556	0.715	0.715
R2 adjusted	0.007	0.05	0.532	0.55	0.214	0.511	0.666	0.659

a Standardized coefficients are shown n=54
* $p < .05$
** $p < .01$

Table 4.6

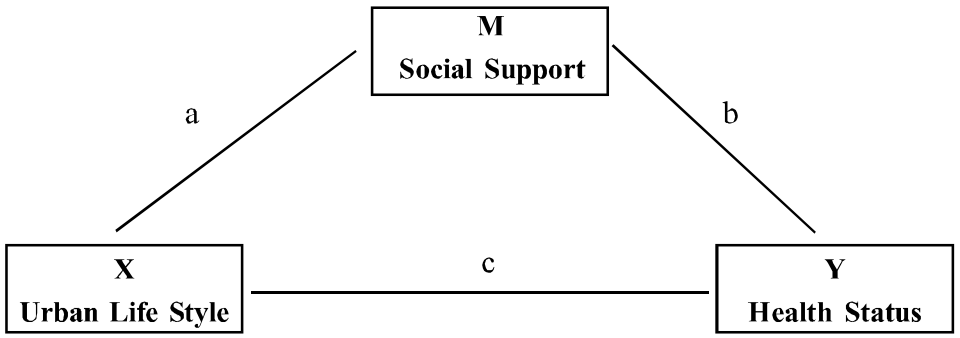
Correlations coefficients between food habit and urban work life with health of the corporate executives

		Health
Food habit	Pearson Correlation	-.592(**)
	Sig. (2-tailed)	.000
	N	56
Urban work life	Pearson Correlation	-.193
	Sig. (2-tailed)	.154
	N	56

Sobel Test

The second hypothesis of the study tries estimate whether the relationship between urban lifestyle and health status is mediated by social support. To establish the mediating effect of social support to health status (dependent variable) and urban lifestyle (independent variable), a sobel test was performed. The result of the sobel output uses mean score of three variables where variables X, Y and M are explained as below:

X= Urban life style
Y= Health status
M = Social support



It can be seen from direct and total effects table the regression coefficients of dimensions of urban lifestyle. The effect of urban life style on social support, health status on social support taking urban lifestyle as constant is significant where as the effect of social support on urban life style is insignificant. To establish the mediating effect of social support, all the above three conditions should be satisfied. Since the effect of social support on urban life style is not significant the test does not hold true. Therefore the last hypothesis i.e. the relationship between awareness and readiness is mediated by perception is rejected.

Descriptives Statistics and Pearson Correlations

Variable	Mean	SD	X	Y	Z
X	60.2143	14.81733	1	.419**	.009
Y	25.2143	7.70765	.419**	1	.26
M	11.4464	2.66915	.009	.26	1

Direct and Total Effect

relationship	Coefficient	Standard Error	t	significance
b (YX)	0.218	.064	3.395	0.001
b (MX)	0.002	0.025	0.070	0.945
b (YM.X)	0.738	0.346	2.136	0.037
b (YX.M)	0.217	.062	3.485	0.001

Indirect Effect And Significance Using Normal Distribution

Value		s.e.	LL 95 CI	UL 95 CI	Z	Sig(two)
Effect	.0013	.0200	-.0379	.0404	.0631	.9497

Conclusion

The living style of the corporate executives is changing as the time changes. Usually every urban individual faces these stressors in his day to day life and they impact his health in some ways. This paper attempts to understand the impact of Urban life style, and the various stressors that it engenders, on the Health of Corporate Executives.

In totality the physical and mental health of the corporate executives has negative impact by the factors family life, urban work life, Food habit, self consciousness. This age of modernization people used to eat instant foods and due to the lack of time corporate executives may have irregular food habit and sometimes skipping foods also. The study shows that there is significant negative relationship between the healths of the executives due to these un-natural food habits.

Even if there is general notion that the urban work life should affect the health status of the corporate executive the study does not show the significant negative relationship between the health and urban work life. This indicates that the executives have build capacity

to tolerate with the urban work life.

Regarding the mediator of the social support have a great role in mediating the health status due to the urban life style; the study does not support the notion. In the case of corporate executives the researcher does not found significant role of social support as a mediator in relation of health status of the corporate executives due to urban life style. The social support influences the health status but cannot be mediator for study the relationship between urban lifestyle and health.

References

Allen E. Bergin et. All (1998) (, Religious Life-Styles and Mental Health: An Exploratory Study, Journal of Counseling Psychology, Vol. 35, No. 1,91-98

Brenda Parlee, John O'Neil and Lutsel K'e Dene First Nation (2007), The Dene Way of Life": Perspectives on Health From Canada's North, Brenda Parlee, John O'Neil, Volume 41 o No. 3.

Brian D. Steffy (1990), John W. Jones and Ann Wiggins Noe, The impact of health habits and life-style on the stressor-strain relationship: An evaluation of three industries, Journal of Occupational Psychology (1990), 63, 217-229.

Cary L. Cooper and Valerie J. Sutherland, 1992. The Stress of the Executive Lifestyle: Trends in the 1990s. Management Decision, 30 (6): 64-68.

Clyde R. Pope (Apr., 1982), Life-Styles, Health Status and Medical Care Utilization, Medical Care, Vol. 20, No. 4 pp. 402-413.

Cooper, C.L. and Davidson, M.J., Stress Survivors, Gratton Books, London, 1991.

Cooper, C.L. (1981), Executive Families under Stress, Prentice-Hall, Englewood Cliffs, NJ,.

Fred D. Reynolds, Melvin R. Crask and William D. Wells (1987), The Modem Feminine Life Style, The Journal of Marketing, Vol. 41, No. 3, pp. 38-45.

J. J. F. Soares, G. Grossi, and O. Sundin (2007), Burnout among women: associations with demographic socio-economic, work, life-style and health factors, Arch Womens Ment Health, 10: 61-71

Katarina Hjelm, Jan Sundquist and Jan Apelquist(2002), The influence of socio-economic status and life style on self-reported health in diabetics and non-diabetics: a comparison of foreign-born and Swedish-born individuals, Primary Health Care Research and Development; 3: 249-259

Kathryne . A. Villani (1975), , Personality Life Style and Television Viewing Behavior, Journal of Marketing Research, Vol. 12, No. 4 pp. 432-439

M. J. Naughton and I. Wiklund (1993), A critical review of dimension-specific measures of health-related quality of life in cross-cultural research,Quality of Life Research, Vol. 2, No. 6.

Makin, P., Cooper, C.L. and Cox (1989), C, Managing People at Work, Routledge & Kegan Paul, London,.

Nan Lin Walter M. Ensel (Jun., 1989), Life Stress and Health: Stressors and Resources, American Sociological Review, Vol. 54, No. 3 pp. 382-399.

Ott, Attiat F (1990), Life styles, job environment and health status: Some empirical findings for West Germany, Social Science Journal, Vol. 27 Issue 3, p339, 20p, 13 chart

R. F. Swift (Jul., 1924), Security in Modern Life, International Journal of Ethics, Vol. 34, No. 4), pp. 357-363.