



**RESEARCH PAPER**

**Workplace Stress and Coping Strategies: Exploring Lived Experiences of Emotional Expression and Work-Family Conflict among Sanitary Workers of Sargodha**

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**ABSTRACT**

This qualitative research investigates the stress in the workplace, emotional expression, and work-family conflict among sanitary workers in terms of a gendered and structural context. The study is based on the Stress Process Model, Gender Role Theory, and Work-Family Conflict Theory and focuses on the overlap of occupational demands and family-related demands and coping strategies. The data were collected through in-depth, semi-structured interviews with 9 sanitary workers who were working in the urban municipal area of Sargodha. Thematic analysis showed that physically demanding work, job insecurity, low pay, and social stigma are factors that contribute to stress. The Gender norms had a great impact on emotional expression, where men were likely to conceal distress and women to express more emotional and domestic pressures. The tension between work and family increased the psychological pressure, especially to women. In spite of these difficulties, resilience was displayed by participants through peer support, religious faith, and adaptive coping. The paper indicates that gender-sensitive policy and structural reforms are needed to solve occupational health disparities.

**KEYWORDS** Workplace Stress, Coping Strategies, Lived Experiences, Emotional Expression, Work-family Conflict

**Introduction**

Stress at work has become an issue of concern in modern societies, especially among employees who work in physically demanding and socially marginalized jobs. One of such groups is sanitary workers whose work is vital to public health and urban hygiene, but their stress-induced and emotional load, as well as the conflict between work and family, is under-researched. According to the occupational stress literature, occupational demands are only one of the factors that drive stress; individual differences, social situations, and infrastructures also contribute to stress (Semmer & Meier, 2003; Mazzola et al., 2011). It has also been found that gender is a critical determinant of stressful experiences, expression of emotions, and coping processes at the workplace (Miller et al., 2000; Spielberger & Reheiser, 1994). In this wider context, the current paper examines the experience and expression of workplace stress by sanitary workers and the interactions between these stressors and family life and coping mechanisms.

Much literature has been produced on gender disparities in emotional experience and expression. Research indicates that at times, men and women can be exposed to the same stressors; however, they vary in the way they process and express their emotions because of the socialization pattern and cultural demands (Deng et al., 2016; Bennie & Huang, 2010). The rates of depression and anxiety among women are reported to be higher;

psychosocial mediators play a role in this and are gendered in nature (Leach et al., 2008; Hyde et al., 2008; Kuehner, 2017; Khan, et al., 2020). It is proven through meta-analysis that the findings regarding gender disparity in depression are universal (Salk et al., 2017; Parker & Brotchie, 2010). Moreover, it is also well-documented that women are more vulnerable to stress-related disorders, such as posttraumatic stress disorder (Olf et al., 2007). Such differences are frequently explained not only by biological factors, but also by cognitive weaknesses and exposure to stress patterns (Mezulis et al., 2010).

Another dimension that is important in the concept of occupational stress is work-family conflict. The earlier studies by Duxbury and Higgins (1991) have revealed that there are major gender differences in work-family conflict, where women tend to be more affected by role strain. Later meta-analytic research has also confounded the gender and work-family conflict relationship by highlighting the role of structural and cultural factors (Shockley et al., 2017). It is also mediated by family organization and socioeconomic status and supports the effects of occupational stress to spread beyond the workplace into the family spheres (Barrett & Turner, 2005). For employees in low-income and labor-intensive industries, this conflict is compounded by financial pressures and inadequate resources, leading to the accumulation of stressful situations.

Resilience and coping mechanisms have received extensive research on stress. The styles of coping and cognitive hardiness have a significant impact on the effectiveness of people's reactions to stressful events in their lives (Beasley et al., 2003). Gendered patterns among coping styles have also been identified, where men tend to adopt problem-focused or avoidance coping styles and women tend to adopt emotional or social support strategies (Ptacek et al., 1994; Ojo et al., 2019; Makhbul & Hasun, 2011). The literature in occupational contexts such as policing and management has shown that work environment and coping strategies have dissimilar effects on the male and female employees (He et al., 2017; Fielden & Davidson, 1999). Moreover, minority stress models focus on the realization of compounded stressors experienced by disadvantaged populations attributed to the stigma of social exclusion and inequality (Flentje et al., 2020). Such frameworks are especially applicable in the setting of sanitary workers, where the labor of such workers is stigmatized.

The studies have also touched upon the effects of workplace harassment and organizational injustice on psychological and physical health outcomes, especially in women (Chan et al., 2008). In the learning and other working environments, gender differences in the degree of job satisfaction, self-efficacy, and stress levels have been reported (Klassen & Chiu, 2010). Additionally, relaxation methods such as music and other emotional control techniques have been proven to have quantifiable impacts on stress reactions (Thoma et al., 2013). The subjective health complaints among adolescents that were context-utilized by perceived stress and gender also highlight the implications of gendered stress experience throughout the lives of adolescents (Wiklund et al., 2012). Together, these works confirm that stress is a culturally constructed phenomenon that is predetermined by multiple overlapping factors of gender, profession, socioeconomic status, and cultural standards.

In spite of such extensive literature, little qualitative research has studied the emotional expression and work-family conflict of sanitary workers, especially in gendered contexts. Marginalized labor groups often lack quantitative surveys and standardized measures based on much of the existing literature, resulting in a gap in knowledge regarding perceptions of the lived experience and the subjective meaning ascribed to stress. To address this gap, the present study adopts a qualitative design to comprehend how sanitary workers narrate about their stress at the workplace, how gender norm influences expression of feelings, and the war between work and family commitments. The study will aid in further development of the knowledge in occupational health disparities and resilience processes among the workers who often go unvalued although they play critical yet undervalued roles in society and therefore the study will aim at locating the stories within the lenses of broad sociological theories of gender, stress, and coping.

## **Literature Review**

The theoretical model applied in this paper is integrative; it rests on the Stress Process Model, the Gender Role Theory, and the Work-Family Conflict Theory as well as the knowledge regarding coping and resilience. Together, the frameworks will aid in providing a sociological insight on how sanitary employees feel the stress in the workplace, how they express these emotions, and how they juggle the two aspects of life work and family in the gendered and structurally mediating situation.

This research bases the major part of its analytical background on the Stress Process Model (Barrett & Turner, 2005; Semmer & Meier, 2003). The model views stress as a dynamic process where the social structures and roles produce stressors that are mediated by the coping resources and social support to the mental and emotional consequences. Among the sanitary workers, the physically demanding labor, low socioeconomic status, job insecurity, and workplace stigma are the main stressors, whereas work-family conflict and emotional strain are the secondary stressors (Bukhari et al., 2025). The model also stresses the buffer effects of negative psychological outcomes by means of access to coping resources (family support, peer solidarity, and religious practices). It is a framework that is especially applicable when it comes to the study of ways in which structural inequalities influence personal emotions.

This study includes the Gender Role Theory in order to comprehend gendered variations in the expression of emotions because the theory argues that norms regarding the way men and women express their emotions are socially constructed (Bennie & Huang, 2010; Deng et al., 2016). Masculinity is commonly linked to emotion control, strength, and vulnerability suppression whereas femininity is associated with emotional expressiveness and caregiving. Such norms determine the way the male and female sanitary workers perceive and express stress (Bukhari et al., 2024). Studies have repeatedly indicated that females have increased prevalence of depression and anxiety, which can be explained by the role that psychosocial mediators play and the overall difference in exposure to stressors (Hyde et al., 2008; Kuehner, 2017; Salk et al., 2017). In the meantime, men might deny emotional distress because of stoicism expectations (Ptacek et al., 1994). Gender Role Theory can therefore be used to explicate differences in emotional control and coping mechanisms as depicted among respondents.

Another theory used in the study is the Work-Family Conflict Theory, which argues that conflict is experienced in situations where the demands of work and family roles are mutually incompatible (Duxbury & Higgins, 1991). Time pressures, emotional spillover, and role overload, along with the fact that this conflict is often gendered, are shaped by unequal domestic roles (Shockley et al., 2017; Imran et al., 2024). In the case of sanitary workers, the fact that they spend prolonged hours on their duty, are fatigued, and stressed economically prevents them from carrying out their family duties, worsening their emotional condition (Bukhari, 2025). Mental health also depends on family structure and socioeconomic status (Barrett & Turner, 2005). Through this framework, the paper reviews the extent of occupational stress that spills over to personal life, especially to women who have to carry on with two responsibilities.

Also, the Coping and Resilience Theory serves as the source of information regarding the way the workers are coping with stress. Cognitive and behavioral attempts to cope with internal and external demands are perceived to be taxing, thus they are understood as coping strategies (Beasley et al., 2003; Bukhari, Khan & Haq, 2024). It is shown that there is a gendered difference in coping styles, with women showing more tendencies to employ emotion-focused coping and men more toward avoidance or problem-focused coping (Makhbul & Hasun, 2011; Ojo et al., 2019). The development of resilience can be determined by more than individual characteristics as well as by community and culture, such as social networks or religious practices (He et al., 2017; Uddin, 2016). The interpretative approach

enables the research to go beyond a deficit model of stress to emphasize on adaptive means and agency among sanitary workers.

Lastly, this framework is enlightened by the knowledge of the minority stress theory, which highlights that stigmatized social status leads to chronic stress because of discrimination and marginalization (Flentje et al., 2020; Bukhari et al., 2024). Sanitary workers typically have undesired jobs socially and the stigma of this type of work may add to the psychological pressure. An amalgamation of these theoretical explanations enables the research to theorize workplace stress as the socially constructed phenomenon influenced by structural disparities, gender ideals, the working environment, and family unit. This is a multidimensional model that enables subtle actualization of interpretation, expression and coping processes of the sanitary workers in their realities of living every day.

## Material and Methods

The research design used in this paper was a qualitative one; the aim was to understand how sanitary workers in Sargodha lived with stress at work, emotional expression, and work-family conflict. The study was conducted on an interpretivist paradigm; it aimed to learn how the participants make up and make sense of their experiences as they exist in particular gendered, cultural, and organizational situations. The 9 sanitary workers (5 males and 4 females) in urban municipal settings in Sargodha were selected through a purposive sampling method, with both genders represented, to investigate possible similarities and differences between the male and female workforces in terms of emotional expression and coping mechanisms. In-depth and semi-structured interviews were adopted to gather the data, which provides the respondents with an opportunity to share their own experiences of occupational stress, family concerns, and methods they apply to cope with emotional and practical challenges. The interviews took about 45-60 minutes, and the language used was one that was comfortable to the participants to make them open up. The interviews were audio-taped with informed consent and transcribed verbatim. Thematic analysis was applied to data analysis and it followed the following codes, categorization, and the formulation of themes that give rise to recurring themes that can be attached to gender norms, cultural expectations, organizational pressures, and coping mechanism. Ethics in the research was maintained in that the ethics of conducting research like voluntary participation, confidentiality, anonymity, and entitlement to pull out of the research at all times was maintained without infringing on the protection and dignity of the respondents.

## Results and Discussion

**Table 1**  
**Demographic Profile of Respondents**

Respondent ID	Gender	Age	Marital Status	Years of Experience	Education Level
R1	Male	45	Married	18	Primary
R2	Male	38	Married	12	Secondary
R3	Male	29	Unmarried	6	Secondary
R4	Male	50	Married	22	Primary
R5	Male	34	Married	10	Secondary
R6	Female	41	Married	15	Primary
R7	Female	32	Married	8	Secondary
R8	Female	27	Unmarried	5	Secondary
R9	Female	46	Widowed	20	Primary

Table 1 provides demography information of 9 sanitary workers who voluntarily participated in this study. The sample included 4 female respondents, 5 male respondents, and with varying age groups, married and those who were single and with varying time of experience of work.

**Table 2**  
**Major Themes and Subthemes**

Theme	Subthemes
1. Expressions of Workplace Stress	Physical exhaustion, humiliation, job insecurity, public disrespect
2. Gender Norms and Emotional Regulation	Masculinity and suppression, emotional burden among women, cultural expectations
3. Work–Family Conflict	Time constraints, emotional spillover, financial pressure
4. Coping Strategies and Resilience	Social support, religious coping, avoidance, collective solidarity

Thematic analysis generated four major themes aligned with the research objectives: (1) Expressions of Workplace Stress, (2) Gender Norms and Emotional Regulation, (3) Work–Family Conflict, and (4) Coping Strategies and Resilience.

### **Theme 1: Reports of Stress on the Workplace**

The respondents termed stress at work as physically and emotionally challenging. Some of the stress factors included heavy workload, unsafe working conditions, poor pay, and social opportunities.

R1 (Male): *“Our work is very hard. We get up earlier than the sun sets, and in the afternoon the body is fully tired.”*

R4 (Male): *“We are treated like nothing by people. That is worse than manual labor.”*

R6 (Female): *“Sometimes, the smell and dirt make me feel sick, but we can do nothing about it, as we must go.”*

R2 (Male): *“The supervisors scream at us when we do not clean up the place well. It produces a pressure in the mind.”*

R9 (Female): *“There is a lack of job security. Whether the contract will be renewed every day is a concern to me.”*

R7 (Female): *“On festival we are twice overburdened, and not overpaid.”*

Such narrations draw attention to the reality that all forms of stress at work are multidimensional that is, physical stress is linked to emotional anguish that is linked to disrespect and financial insecurity.

### **Theme 2: Control of Emotions and Gender Norms**

Gender regulations were significant in the showing or hiding of emotions by the respondents. Employees who were male were more likely to report on hiding distress, and women employees tried to demonstrate emotional strain although were constrained by social issues.

Selected Quotes:

R2 (Male): *“I am a man and I cannot be a weakling. I also do not express myself when I am stressed.”*

R6 (Female): *“Women cry, however, we have to get the job done.”*

R8 (Female): *“Home and at work, we are bearing feelings and nobody wants to know about our feelings.”*

R5 (Male): *“I would have moments when I am angry, but I can handle it as it would cause problems.”*

R7 (Female): *"Men are not afraid to show their anger, but women must be silent."*

These stories highlight how the effects of cultural construction of masculinity and femininity would be on the expression of emotions and coping with stress.

### **Theme 3: Work-Family Conflict**

The majority of respondents discussed the challenges of balancing work and family life. Their relationships and caregiving jobs were usually affected by long working hours and fatigue.

Selected Quotes:

R1 (Male): *"I do not have enough time to speak to my children after work because I am too tired."*

R6 (Female): *"I must cook and care about the family even when I am sick."*

R4 (Male): *"My wife says that I do not spend time at home."*

R7 (Female): *"On the day when my child was sick, I still had to report to work."*

R9 (Female): *"As a widow, I am a mother and a father. The stress is doubled."*

R3 (Male): *"Sometimes I have some guilt that I cannot take good care of my parents."*

Results imply that job stresses often enter into the family life, escalating emotional stress, especially to women who have children to look after.

### **Theme 4: The coping strategies and resilience**

Although the level of stress was high, the participants were found to use a wide range of coping mechanisms, among them, social support, religious belief, emotional denial, and peer solidarity.

Selected Quotes:

R5 (Male): *"I hang out with my colleagues after a working day and discuss with them. That reduces stress."*

R6 (Female): *"Prayer helps me to feel stronger to live on."*

R2 (Male): *"I only keep quiet and pretend that I do not see the tension sometimes."*

R8 (Female): *"I like to listen to music when I am relaxing after duty."*

R1 (Male): *"We are like a family when it comes to work."*

R9 (Female): *"I say to myself, it is because of the future of my children."*

All these coping strategies indicate personal resilience and community-based solidarity among sanitary workers in coping with work-related and emotional stress.

These findings indicate that physically demanding work, social insignificance, and financial insecurity determine the workplace stress among sanitary workers. Emotional expression and coping styles have a strong influence of gender norm, work-family conflict raises psychological strain especially in female gender. However, employees utilize the

adaptive modes of coping which are based on social support, cultural values, and personal strength to overcome the difficulties in their work and family life.

## **Discussion**

The findings in this study are useful data regarding the life experience of workplace stress, emotional expression, and work-family discord among sanitation workers and contextualize their descriptions in the framework of the greater sociological and psychological literature. Independent of the study was consistent with the Stress Process Model (Semmer & Meier, 2003; Barrett & Turner, 2005) in that accounts of the participants revealed that structurally embedded stressors (e.g. physically demanding labor, job insecurity, low wages, and social stigma) caused both primary and secondary strains. The emotional distress that respondents referred to was intricately connected to physical exhaustion, in particular, feelings of humiliations and lack of recognition. This follows the qualitative evidence that occupational stress is a multidimensional concept that is not only expressed through workload but also organizational injustice and social devaluation (Mazzola et al., 2011).

The difference between the genders in terms of their emotional expression became one of the leading themes that supported the literature on gender socialization. Male participants tended to focus more on emotional suppression which indicates the dominating constructions of masculinity that consider strength and stoicism to be the same (Bennie & Huang, 2010; Deng et al., 2016). The fact that they are not willing to talk about distress openly is corroborated by the fact that men tend to internalize distress because of societal pressures (Ptacek et al., 1994). Conversely, the women respondents tended to express emotional loads more so those concerning care giving duties and this is aligned with research studies that highlight that women report more on depression and anxiety (Hyde et al., 2008; Kuehner, 2017; Salk et al., 2017). But, although women were seen as more expressive, their stories were also characterized by limited agency, with the expression of emotions not automatically being accompanied with the institutional assistance. This two-fold weight justifies the previous studies that have pointed out the role of psychosocial mediators in increasing the susceptibility of women to stress (Leach et al., 2008; Parker & Brotchie, 2010).

Work-family conflict was one of the major causes of strain on both the male and female respondents albeit in different ways. The results support the initial studies conducted by Duxbury and Higgins (1991), which demonstrated the existence of tenderized patterns of work-family conflict, and are also supported by meta-analytic studies that revealed the impact of structural and cultural expectations on conflict experience (Shockley et al., 2017). Female sanitary workers explained role overload and the necessity to play domestic roles nevertheless having occupational fatigue as continuing gender inequalities of unpaid labor. In the meantime, male respondents said that family interaction causes them to develop emotional withdrawal because of fatigue which means that work-family conflict also compromises the relational interaction of men.

The resilience shown in this paper through coping mechanisms can be seen both at the individual level and the group level. The participants depended on peer solidarity, religious faith, silence, avoidance and recreational activities like listening to music. These results are echoed by coping and resilience studies that indicate that cognitive hardiness, together with coping style are very important determinants of stress outcomes (Beasley et al., 2003). Gendered patterns of coping were also noted: men were more likely to use suppression or avoidance whereas women were more prone to emotional or spiritual support, as it was previously observed (Makhbul & Hasun, 2011; Ojo et al., 2019). The collective support among coworkers indicates the relevance of social networks as buffering processes, as it is also seen with occupational groups like policing and management (He et al., 2017; Fielden & Davidson, 1999). In addition, the application of music and other self-

regulating activities is consistent with the evidence that the methods can have a positive effect on stress responses (Thoma et al., 2013).

Notably, the stories shared by respondents captivate the aspects of marginalization and stigma in the workplace, which can be explained using the minority stress views (Flentje et al., 2020). The fact that sanitary workers claim they are disrespected and invisible to society implies that the stress is further aggravated by the marginalized nature of their jobs. The inequalities in the structure can serve to create psychological strain on top of the immediate job demands. Even though most of the available literature on workplace stress is based on quantitative features (Spielberger & Reheiser, 1994; Klassen & Chiu, 2010), the qualitative accounts of stress as described in the current document make the process of interpreting, embodied, and negotiated stress in real-life situations less theoretical.

Overall, the argument demonstrates that the issue of workplace stress in the group of sanitary workers cannot be regarded as a personal psychological issue but, conversely, it is embedded into the gender norm, socioeconomic limits, organizational structure, and even culture. The role of the study in the literature is the anticipation of the voices of an underserved occupational group and the demonstration of how the functioning of feelings, relationships in work families, and coping strategies are combined under structural and gendered overlapping realities. These findings bring out the need to make adaptations in the organization, gender, and some encouraging interventions that have the ability to combat not only the material dimension of the job of sanitary workers, but also the emotional dimension.

## **Conclusion**

A paper of this nature analyzed workplace stress and coping during sanitary workers, which is actually grounded on emotional expression and work-family conflict concerning gendering and organizational dynamics. The findings indicate that the structural demanding work conditions, low socioeconomic status, job insecurity, and social stigmatization are some of the factors that have institutionalized work stress among sanitary workers. The stress was not necessarily experienced physically in the form of fatigue but also emotionally as a result of disrespect, invisibility and financial insecurity.

Gender has come out to be a considerable factor that helps to create stress experience and expression. Male respondents favored the act of suppressing emotional distress more so that it was in line with the hegemonic masculine ideals and female respondents more likely expressed the emotions burdens but were strained by the pressures of care giving and child care roles. The conflict between work and family was rampant in both categories but more in women because they had more workloads because of the historical gender inequality in the unpaid labor. The interpretation of these findings is to reinforce the assumption that whatever happens to be the stress at workplace must be genetically represented as the social and gendered occurrence, rather than a person-centered situation.

The presence of different stressors turned out not to affect sanitary workers since they adopted different coping strategies that included peer solidarity, religious faith, emotional regulation, and informal social support. These adjustment strategies indicate the role of the individual agency, as well as the relevance of collective networks in reducing the impact of occupational strain. Structural change cannot however be replaced with relying on individual coping mechanisms.

## **Recommendations**

The results of this research recommend that, a number of practical, organizational and policy level recommendations are offered in order to overcome the problem of stress at

the workplace and work-family conflict among sanitary workers: Municipal authorities and employing organizations should enhance the material working conditions of the sanitary workers by providing appropriate protective equipment, rational workloads, the access to clean facilities and organized working rests. Physical and emotional stress is greatly reduced by lowering the unnecessary physical pressure and making working conditions safer. Considering that the anxiety about the unpredictability of the contract terms and minimum salaries is present, the policy directions must aim at improving job security, standardization of the employment relationships where feasible, and ensuring the equitable and prompt payment. Financial security has the potential of lessening stress over spill into family life, better overall well-being. Gender-responsive policies should be embraced by the organizations to understand the difference in experiences and expressions of stress between men and women. This can encompass a flexible schedule, maternity, paternity leaves, and the support systems to curb any form of discrimination or harassment at work place. To minimize the conflict between work and family, it is necessary to identify the duality of roles performed by women in both paid and unpaid work. The employers are expected to introduce convenient counseling services, stress management workshops as well as peer-support programs that are specific to sanitary worker's needs. The emotional health awareness of employees can be carried out to minimize the stigma of seeking psychological assistance, especially in male employees who may be suppressing distress according to social expectations. One way the workers can cope with family responsibilities better is through flexible work arrangements, family emergency leave policy and supporting supervision. The employers ought to pay attention to family friendly practices that recognize the overlap between occupational and household needs.

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