The Childhood of Workaholic Managers and Professional Workers

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ABSTRACT

Workaholism is a behavior with uncontrollable drive to work and tend to be compulsive. A workaholic person would encounter negative effect on their relationship, leisure times, and/or their health. It had been recorded, most workers with workaholism were managers and professional position. Very often workaholic behavior is used for a coping stress from negative experience(s) that had happened in their lives. Therefore, we will investigate the childhood experience of managers or professional workers specifically with their traumatic childhood events such as physical abuse, emotional abuse, sexual abuse, physical neglect, and emotional neglect. This study is important as there are numerous effects of childhood maltreatment. We used workaholic behavior measure, Bergen Work Addiction Scale / BWAS and childhood maltreatment scale, Childhood Trauma Questionnaire – Short Form / CTQ-SF that has been adapted to Bahasa Indonesia. We recruited 34 participants based on criteria, which are managers or professional workers with workaholism tendencies, has experienced at least one of the childhood maltreatments in *"low-moderate"* category. The results showed that there were 44% participants had experienced physical abuse, 62% had experienced emotional abuse, 53% had experienced sexual abuse, 74% had experienced physical neglect, and 68% had experienced emotional neglect. To conclude, managers or professional workers in this study tend to experienced physical neglect during their childhood.
These results must be interpreted with caution.

Keywords: Childhood Trauma, Workaholism, Managers, Professional.

1. INTRODUCTION

Oates [1] has referred workaholism as an addiction for individual to work, cannot control their working behavior, and work longer than they need. Oates also mentions that the type of addiction in workaholism behavior same as alcoholics [2]. Andreassen [1] added workaholics worries too much about work, cannot control their drive to works, which would negatively impact their relationships with others, leisure times, and/or health. Andreassen, Hetland, Molde, and Pallesen [3] also found that workaholics related to sleep problems. They could even work more than at least 50 hours per week according to Mosier [1]. Most of the workaholics were found to be managers and professionals [4], with a prevalence 8.3% in 2.160 participants [5].

Griffith explained, there are seven components in workaholism [5]. There are (1) *salience*, when individuals are dominated by working behavior and feel it is the most important thing in their lives; (2) *mood modification*, when individuals have the feeling of fly, numb, escape or distress to reduce their anxiety, helplessness, restlessness, depression or guilt by working; (3) *tolerance,* when individual feel the need to increase working behavior to get the same sensation.; (4) *withdrawal symptoms*, when individuals feel uncomfortable when working behavior is being reduced or stopped; (5) *conflict,* when individuals facing conflicts within themselves and/or their relationships

because of workaholic behavior. (6) *relapse,* when there is a tendency to repeat the same workaholic pattern, even when they tried to stop; (7), *problems,* when they encounter problems in their physical health, psychologically, and/or other areas.

Therefore, what drives their working behavior? According to many researchers, there are family dysfunction, vicarious learning from the environment, social culture, peer competition, organization culture [6]; self-esteem, reward, and threat [7]; Neurobiological, need for competence, neuroticism and consciousness personality, and cognitive [3]. Workaholism also has been found as negative coping, to handle stress [8]. There are many situations which can cause stress such as children and adolescence that has been exposed by marital conflict or divorce, war and terrorism, diagnosis of a severe medical illness [9], one of them is childhood trauma caused by childhood maltreatment [10].

There are five types of *childhood maltreatment* as a form of *childhood trauma* [11]. There are (1) *physical abuse,* when individuals have experienced things that caused bruise, scars, or things used to punish and harm physically even psychologically; (2) *emotional abuse,* when individual has experienced things that hinder the emotional development in childhood and negatively impact their self-image and competence with others, or unloved according to Hinberg; (3) *sexual abuse,* when individual has experienced touched physically in a sexual way, exploitation to be involved in prostitution or porn, and/or being commented or being asked to do something sexual verbally; (4) *physical neglect,* when individual has not eaten enough proper food, also not being taken care of when they sick during childhood; (5) *emotional neglect,* when the relationship consistently disregarded, ignored, invalidated or unappreciated [12]

When individual has experienced *childhood maltreatment*, it can cause many negative impacts in individual lives, such as personality disorder [13], avoidance behavior, self-blaming, internal conflict [14], and toxic stress, when individual continually receiving stressors in their stages of life according to Lotourneau [15]. The lack of study in childhood maltreatment that has been experienced by workaholics makes this study want to investigate the type of childhood maltreatment most experienced in workaholics specifically in managers and professionals. Therefore, the aim for this study is to understand what type of childhood maltreatment most experience in workaholics managers or professional.

2. RESEARCH METHOD

2.1. Research Participants

2.1.1. Participants Characteristics and Sampling Method

In this study, the characteristics of the participants are (1) age above 18 years old, (2) workers, (3) managers and professionals' position, (4) have worked more than 50 hours per week within a past year. (5) Fulfil the workaholics tendencies, (6) had experienced at least one of the childhood maltreatments in at least *"low-moderate"* category. The measurements were used to screen which participants fulfilled the workaholics' criteria and which ones had experienced one of the childhood maltreatments in at least *low-moderate* category.

Purposive sampling was used to recruit the participants for this study. This study also uses snowball sampling by asking the participants to fill out the questionnaire and asked the participants whether they knew other people who met the criteria.

2.1.2. Participants Demographic

According to the participants demographic, there were 58.8% men and 41.2% women. Most participants of this study work in commerce/trade sectors, and mostly were aged 26-35 years old (38.2%). Below is the demographic data in table 1. We recruited 34 participants out of 96 who met the criteria according to Bergen Work Addiction Scale (BWAS) as a workaholic's measure, and Childhood Trauma Questionnaire – Short Form (CTQ-SF) as a childhood trauma measurement.

Table 1: Participants Demographic

Characteristic		n	(%)
Gender			
	Male	20	58.8%
	Female	14	41.2%
Age			
	18-25 years old	8	23.5%
	26-35 years old	13	38.2%
	36-45 years old	6	17.6%
	46-55 years old	5	14.7%
	> 56 years old	2	5.9%
Sectors			
	Energy and Mining	1	2.9%
	Pharmacy	1	2.9%
	Fintech	1	2.9%
	FMCG	1	2.9%
	Law	2	5.9%
	IT	1	2.9%
	Service	3	8.8%
	Construction	2	5.9%
	Consultant	3	8.8%

Electrical Contractor	1	2.9%
Manufacture	1	2.9%
Distribution	1	2.9%
Tourism	1	2.9%
Community and health services	3	8.8%
Banking	2	5.9%
Commerce/Trade	4	11.8%
Advertising	1	2.9%
HR Practitioner	1	2.9%
Professional	2	5.9%
Technology	1	2.9%
Telecommunication	1	2.9%
Department		
Assistant Manager	2	5.9%
Director	3	8.8%
Division Manager	13	38.2%
General Manager	2	5.9%
Professional	7	20.6%
Senior Manager	2	5.9%
Supervisor	4	11.8%
Vice President	1	2.9%

2.2. Research Design

This study used descriptive study design to describe a phenomenon and its characteristics [16].

2.3. Variable Measurement

2.3.1. Workaholism Measurement

Workaholism measurement was using Bergen Work Addiction Scale (BWAS) from Andreassen, Griffith, Hetland, and Pallesen in 2012 [5]. It contains 7 items with 7 components of workaholism in each item, which are salience, tolerance, mood modification, relapse, withdrawal, conflict, and problems. It was a Likert scale 1-5 (1 = *"never"*, 2 = *"usually"*, 3 = *"sometimes"*, 4 = *"often"*, 5 = *"always"*). We have adapted BWAS to Bahasa Indonesia and it was valid (according to corrected item-total correlation > 0.2 and expert judgment) and reliable ($\alpha > 0.821$).

2.4.2. Childhood Trauma Measurement

The childhood trauma measurement was using Childhood Trauma Questionnaire – Short Form (CTQ) [17]. It contains 28 items, which include five dimensions of childhood trauma based on childhood maltreatment (physical abuse, emotional abuse, sexual abuse, physical neglect, and emotional neglect), and 1 subscale Minimization/Denial (MD), which will detect individual who has not yet been reported the childhood maltreatment. The measurement was a Likert scale 1-5 (1 = *"never true"*, 2 = *"rarely true"*, 3 = *"sometimes true"*, 4 = *"often true"*, 5 = *"very often true"*) [18]. This scale was adapted to Bahasa Indonesia by Rahma, Alsarhi, Prevoo, Lenneke, Alink, and Mesman [19]. This study used 25 items from CTQ-SF from five types of childhood maltreatment subscale (physical abuse, emotional abuse, sexual abuse, physical neglect, & emotional neglect), and did not use the MD subscale. This decision with consideration according to one study [18] who found the effect of the MD subscale will reduce the total scores of CTQ-SF. Thus, they suggested eliminating the participants with high scores of MD, or not including the MD subscale at all.

2.4. Collecting Data Procedures

The data was collected online using google forms which contain inform consent to anyone who willingly fills out the questionnaires, and the measurements of workaholism (BWAS) and childhood trauma (CTQ-SF). The google forms and participants criteria were distributed on social media platforms to recruit the participants. This study also offers a door prize for 3 lucky participants as a reward. Collecting data was conducted from May 1st 2021 to May 31st 2021.

2.5. Data Processing

Total data before final screening was 96 participants. After that, we sum every score for workaholism measurement using BWAS and childhood trauma measurement using CTQ-SF for favorable and unfavorable items. The data was analyzed using descriptive statistic and processed using SPSS version 22. There are 34 participants recruited as a final screening data.

3. RESULTS

As for the result, the table 2 below was a categorization of childhood maltreatment that workaholics had experienced, despite the different type of maltreatment from 34 final participants. One thing should be noticed from Table 2 is that all participants experienced various of childhood maltreatment. Not all of them experienced all five types of child maltreatment. Some of them might experience only one type of maltreatment, others might two or even four and so forth.

Table 2: Childhood Trauma Categorization

Childhood Trauma Category	n	%
Physical Abuse		
Non - Low	19	55.9%
Low - Moderate	1	2.9%
Moderate - High	7	20.6%
High - Severe	7	20.6%
Emotional Abuse		
Non - Low	13	38.2%

Low - Moderate	14	41.2%
Moderate - High	2	5.9%
High - Severe	5	14.7%
Sexual Abuse		
Non - Low	16	47.1%
Low - Moderate	10	29.4%
Moderate - High	5	14.7%
High - Severe	3	8.8%
Physical Neglect		
Non - Low	9	26.5%
Low - Moderate	7	20.6%
Moderate - High	9	26.5%
High - Severe	9	26.5%
Emotional Neglect		
Non - Low	11	32.4%
Low - Moderate	17	50%
Moderate - High	0	0%
High - Severe	6	17.6%

Table 3 describe the total workaholic participants who had experienced type of childhood maltreatment in total based on participants characteristics for this research.

Table 3: Type of Childhood Maltreatment

Childhood Trauma	n	%
Physical Abuse	15	44%
Emotional Abuse	21	62%
Sexual Abuse	18	53%
Physical Neglect	25	74%
Emotional Neglect	23	68%

According to the type of childhood maltreatment, physical neglect was the most type of childhood trauma which workaholics managers and professionals had experienced, and the least type of childhood trauma was physical abuse.

4. CONCLUSION, DISCUSSION, AND FURTHER RESEARCH

According to this research, it can be concluded the type of childhood maltreatment that workaholic managers and professionals had experienced in this study was physical neglect. Physical neglect has been defined as an experienced one had when they have not enough proper food, clothing, or had not taken care of when they are sick during their childhood [11]. This might happen due to physical and safety needs has not been met according to Holistic-Dynamic Theory [20].

Maslow [20] explained there are five human needs to be satisfied in order to achieve self-actualization. The five human needs are (1) *physiological needs* which include food and water, oxygen, body temperature, and other physical needs; (2)

safety needs, which include physical security, stability, dependency, medical illness, fear, chaos, anxiety, and natural disasters; (3) *love and belongingness needs,* which include, the desire of friendship, the wish for partner and children, need to belong to a family, community, or nation; (4) *esteem needs,* which include self-respect, confidence, competence, and the acknowledge to make them still in a state of high esteem; (5) *self-actualization needs,* which include *self-fulfilment,* the realization of their own potential and a desire to become creative the full of sense.

According to Maslow, there are consequences when an individual's basic needs such as physical needs and safety needs have not yet been satisfied. For physical needs, they have tendencies to live primarily strive to satisfy their physical needs [20]. When an individual was threatened in their childhood because of illness or other fears continually, it can cause them to live as if they facing their parent's punishment, in their adult life. They might try to spend more energy to satisfy safety needs, but if they're not successful, which cause basic anxiety and tend to form neurotic needs [20].

The neurotic needs will not make a person productive, but instead will develop an unhealthy lifestyle and has no interest in striving for self-actualization. Instead, they tend to be reactive and serve as compensation to satisfied those basic needs [20]. Maslow [20] gives an example for a person who doesn't satisfy safety needs may develop a desire to hoard money or property. Individuals who experienced physical neglect, might not have satisfied their basic needs in their childhood. Especially in physical and safety needs, which may lead to basic anxiety and neurotic needs and caused them to do workaholics behavior to compensate their unmet needs.

This study has not explained the dynamics of how childhood maltreatment experience specifically childhood neglect until they choose the workaholism behavior. Therefore, further research can investigate how is the dynamics of workaholics' behavior to reduce anxiety caused by childhood trauma, specifically physical neglect in qualitative or mix method study.

AUTHORS' CONTRIBUTIONS

Conceived and designed the study: PE RR NS. Performed the study: PE. Contributed reagents/materials/analysis tools: PE. Analyzed the data: PE. RR NS. Wrote the paper: PE. Performed background research: PE. Collated, organized, and processed raw data: PE. Collated author feedback: RR NS. Edited the final: PE RR NS.

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