

Two studies were conducted to investigate the influence of gender role socialization on the relationship between women's multiple roles and psychological distress. In Study 1, an initial pool of 62 candidate items for a Gender Role Socialization (GRS) scale for women was given to 128 female Chinese university students. After item elimination due to unbalanced distributions and skewness, exploratory factor analyses identified three components which were labelled "Traditional Ideal Womanhood," "Self-sacrificing," and "Competent without Complaint." Intercorrelations between components of the GRS scale, masculine and feminine gender role stress, and masculine and feminine gender role orientation provided evidence of validity. Although the relationships varied for each subscale, gender role socialization was largely unrelated to gender role orientation and slightly related to masculine and feminine gender role stress. In Study 2, confirmatory factor analyses (CFA) conducted on a sample of 225 Chinese working women suggested that the construct of gender role socialization is multidimensional. The three key roles of paid worker, spouse, and parent were examined in this study. From this group of women, 119 were single workers, 42 married workers, and 64 married and working mothers. Hierarchical multiple regression analyses were used to test the main research question of whether gender role socialization influenced psychological distress, as measured by the General Health Questionnaire (GHQ), beyond the effects of role quantity and quality variables. As expected, role quality was a better predictor of psychological distress than role quantity. Quality of the work role was the most influential variable affecting distress. Moreover, gender role socialization accounted for significant portions of explained variance even after

taking role quality into account. The Traditional Ideal Womanhood subscale was the only variable that had a significant effect on the indices of distress, with a high endorsement predicting more distress. All interaction terms between the three GRS subscales and the three role quality variables were entered in each of the regression equations last to examine all possible relationships. The term Self-sacrificing by Work quality consistently predicted all four indices of the GHQ – anxiety, depression, social dysfunction, and somatic symptoms. Competent without Complaint by Work quality predicted depression and Traditional Ideal Womanhood by Mother quality predicted somatic symptoms. The relative merits and shortcomings of the GRS scale and construct for Chinese women are discussed and suggestions for future investigations of multiple roles, well-being, and gender role socialization given.