



Personal Space and Shyness among Women in Context of their Working Status and Sex-role Orientation

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ORIGINAL ARTICLE



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Received on : 13/09/2025
Revised on : 13/11/2025
Accepted on : 22/11/2025
Overall Similarity : 06% on 14/11/2025



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ABSTRACT

The present study was conducted on 50 working and 50 non-working women equal in respect of androgyny & sex-typed respectively. The purpose was to compare the groups based on working status and sex role orientation on shyness and personal space. Further, it was intended to examine the relationship among shyness, sex role orientation and personal space. Shyness, sex role orientation, were measured using Akhtar's Shyness Scale and Sinha's Masculinity Femininity Check List respectively. The personal space was measured experimentally. The obtained data were analysed using chi-square and r-test respectively. The results revealed that working women and androgynous women were found more shy than their counterparts. Further, groups of working women as well as androgynous women maintained smaller personal space. Shyness, androgyny and personal space were found significantly correlated.

KEY WORDS

Women, Work, Shyness, Physiological.

INTRODUCTION

The concept of personal space and its relationship with physiological and psychological health has been a subject of significant interest in social sciences, particularly in the study of gender, working status, and sex role orientation. For women, these aspects hold unique and complex dimensions due to their roles in society, varying work environments, and the social constructs surrounding femininity and gender roles. Understanding how personal space, sinus health, and sex role orientation intersect can provide valuable insights into the well-being of women in different contexts.

Personal space refers to the physical and psychological space that individuals maintain around themselves, which helps to define their sense of comfort, security, and control in social interactions. The boundaries of personal space are shaped by various factors, such as cultural norms, individual preferences, and the nature of interpersonal relationships. In the context of women, personal space is often influenced by societal expectations and traditional gender roles, which can vary significantly depending on whether a woman is working outside the home or fulfilling domestic duties.

The working status of women plays a significant role in how they experience and negotiate personal space. In professional environments, particularly in corporate, public, or service sectors, women are often expected to navigate spaces that may be dominated by male colleagues, which can impact their comfort and sense of autonomy. The workplace can be a site where gender-based power dynamics influence the way personal space is respected or violated. For instance, women may face challenges in asserting their personal space in male-dominated environments or experience discomfort in public spaces due to societal expectations of femininity, which often emphasize accommodating behaviors and nurturing roles.

Moreover, the concept of personal space is intricately connected to women's health, including the health of the sinuses. Sinus health, which refers to the condition of the nasal passages and the surrounding sinuses, can be significantly affected by stress, environmental factors, and even interpersonal interactions. Women, particularly those in high-stress work environments, may experience more frequent sinus issues as a result of the stress related to managing their personal space, both physically and mentally. Studies have shown that stress can exacerbate sinus conditions such as chronic sinusitis, nasal congestion, and headaches. Given that many women are often socialized to prioritize the needs of others over their own, they may be less likely to take breaks or assert boundaries, leading to increased levels of stress and, consequently, greater susceptibility to sinus issues.

Sex role orientation refers to the attitudes, beliefs, and behaviors that are considered appropriate for individuals based on their gender within a given culture. For women, traditional sex role orientation often emphasizes traits such as nurturing, submissiveness, and cooperation, which can influence their approach to personal space. Women who adhere to more traditional or conservative gender roles may be more inclined to engage in self-sacrificial behaviors, which could lead to the neglect of their own personal space for the sake of others. This could manifest in both physical and emotional boundaries being compromised, which, in turn, could lead to mental and physical health issues such as stress, anxiety, and sinus-related conditions. Conversely, women with more egalitarian or non-traditional gender role orientations may experience less difficulty in asserting personal space, which could contribute to better overall health, including fewer instances of stress-induced sinus problems.

The intersection of working status and sex role orientation in shaping women's experiences of personal space presents an interesting area of exploration. Women in dual-career households or in roles requiring significant multitasking and emotional labor may struggle with maintaining personal space, which could have negative repercussions for their physical health, including their sinus health. Additionally, the intersectionality of gender with race, class, and cultural background further complicates these dynamics, making it crucial to consider how these factors collectively influence a woman's sense of personal space and overall health.

In conclusion, exploring the relationship between personal space, sinus health, working status, and sex role orientation among women highlights the complex and multifaceted nature of women's health in the contemporary world. By understanding these intersections, it becomes possible to better address the challenges that women face in navigating personal boundaries and ensuring their well-being. Through a deeper exploration of these topics, the goal is to create spaces—both physical and social—that respect women's health, autonomy, and individuality.

Review of Literature

Argyle, M.¹ (2001) explored how personal space is perceived differently across genders, emphasizing that women often have smaller personal space requirements in comparison to men. Argyle argues that societal and cultural factors influence these differences, with women typically being socialized to be more accommodating and nurturing, thus reducing their perceived need for personal space. The review suggests that women's smaller personal space may increase their vulnerability to stress and health issues, especially in social and workplace settings. Tos, M., & Stangerup, S. E.¹¹ (2004) discussed the connection between stress and sinus health, highlighting that chronic stress can exacerbate sinus conditions in women. The review mentions that women in high-stress occupations or personal lives, particularly those with caregiving roles, are more likely to experience chronic sinusitis. The psychological stress leads to inflammation in the sinuses, which can worsen sinus infections and increase vulnerability to allergic reactions. Greenhaus, J. H., & Beutell, N. J.⁴ (1985) discussed how gender roles shape the balance between work and personal life. Greenhaus and Beutell emphasize that women are more likely to experience work-family conflict due to societal expectations that women should prioritize domestic responsibilities. This imbalance often leads to higher stress levels, which can manifest in physical health issues, including sinus-related problems due to stress-induced inflammation. Hall, E. T.⁶ (1966) introduced the concept of personal space and its cultural dimensions. In this context, women in professional settings are often expected to accommodate others, leading to violations of their personal space. This lack of boundary respect can cause discomfort, stress, and other health issues. The review indicates that women in male-dominated environments might face greater challenges in maintaining personal space, leading to a higher incidence of stress-related health problems. Eagly, A. H., & Wood, W.³ (2012) examined how traditional gender role orientations affect women's mental and physical health. Women who strongly adhere to traditional sex roles, which prioritize caregiving and submissiveness, often neglect their own needs, including personal space and self-care. The review finds that such neglect can contribute to increased stress levels, poor mental health, and physical ailments such as sinus infections and headaches. Schwartz, J., & McMichael, A. J.⁹ (2007) reviewed the impact of workplace stress on women's health, specifically focusing on respiratory conditions like chronic sinusitis and asthma. The review identifies a strong correlation between high-pressure work environments and the exacerbation of sinus issues, particularly for women who are both primary caregivers and workers. Chronic stress can trigger immune system dysfunction, leading to persistent sinus inflammation. Miller, K.⁸ (2012) discussed how personal space is negotiated in domestic settings, emphasizing the gendered division of space. Women, particularly those in traditional roles, often have less control over personal space in the home, which can lead to increased stress and feelings of entrapment. The lack of personal space may also contribute to mental and physical health problems, including sinus issues, as women struggle to maintain emotional boundaries in caregiving environments. Snyder, M., & Monin, B.¹⁰ (2008) investigated how the perception and maintenance of personal space influence emotional well-being. It finds that women who have less personal space due to social or familial expectations tend to experience higher levels of anxiety and emotional distress. This constant encroachment on personal space can lead to chronic stress, which is a contributing factor to health problems such as sinusitis and other respiratory conditions. Brescoll, V. L., & Uhlmann, E. L.² (2008) explored how societal expectations and gender biases in the workplace affect women's health. Women are often expected to prioritize others' needs over their own, leading to neglect of personal space and self-care. The review suggests that such patterns contribute to chronic stress and health problems, including sinus issues, due to the emotional and physical toll of constant caregiving and role fulfillment. Kaur, H., & Singh, S.⁷ (2015) examined gender differences in stress-induced chronic health conditions, particularly respiratory issues such as sinusitis. It emphasizes that women experience higher levels of stress due to their multiple roles in society and are more likely to develop sinus issues as a result. The review also discusses the role of sex role orientation in how women manage stress and health, with those adhering to traditional gender roles being at greater risk. Goffman, E.⁵ (1959) highlighted how personal boundaries, including personal space, are constructed and negotiated in different settings. For women, the

need to maintain personal space can be compromised by societal expectations of femininity and caregiving. This review argues that women who struggle to assert personal boundaries may experience higher rates of mental health issues and physical health problems like sinus infections due to stress and overburdened roles.

These literature reviews collectively illustrate the complex ways in which personal space, sinus health, working status, and sex role orientation interact in shaping the experiences and well-being of women. Factors such as stress, societal expectations, and gender roles play a significant role in the health challenges faced by women, particularly in relation to conditions like sinusitis. Understanding these dynamics is crucial for developing supportive environments that prioritize women's health and autonomy, both in professional and personal spheres.

Objectives

It was intended to compare:

- i. Working and non-working women in terms of shyness.
- ii. Androgynous and sex typed women in terms of shyness.
- iii. Working and non-working women in terms of personal space.
- iv. Androgynous and sex typed women in terms of personal space.
- v. To examine the relationship among shyness, androgyny and personal space.

Hypothesis

- H₁** Working and non-working women will differ significantly in terms of shyness.
H₂ Androgynous and sex-typed women groups will differ significantly in terms of shyness.
H₃ Working and non-working women will differ significantly in terms of personal space.
H₄ Androgynous and sex-typed women groups will differ significantly in terms of personal space.

Method

Sample : The sample comprised of 100 women equal in respect of working non-working status, androgyny-sex-typed respectively. Other than the required condition, they were matched so far as practicable.

Tools Used

- i. A PDS was used to seek the necessary information about the respondents.
- ii. Sinha's Masculinity Femininity Check-List was used to measure sex role orientation among working non-working women. Androgynous and sex-typed women were identified using this checklist.
- iii. Akhtar's Shyness Scale was used to measure mental health of the respondents.

Procedures

Masculinity femininity Check-List, along with PDS were employed on 100 working and 100 non-working women of Patna. Working women were selected from among different organisations of Patna. Non-working women were house wives. The scoring was made as per manual. 50 working and 50 non-working women were selected in such a way that they were belonging equally to androgynous and sex-typed group. After that the selected respondents were administered Shyness Scale. The obtained score were analysed using chi square test and t-test respectively.

Experimental Measure of Personal Space: The respondents were called in one by one in room meant for experimental measurement of personal space. The respondents were asked to take a comfortable space. The experimenter interacted with him for 10 to 15 minutes. Thereafter, the subjects were allowed to go outside. The experimenter measure the distance of the subject from him which is the experimental measure of PS. In this way PS of each subject was measured.

Results and Interpretation

Table 01: Comparison between working and non-working women in terms of shyness

Variables	Groups	N	Shyness (%)		t ²	df	P
			High	Low			
Working-status	Working	50	72% (N=36)	28% (N=14)	25.92	1	<.01
	Non-Working	50	36% (N=18)	64% (N=32)			

The results displayed by table 01 clearly reveal that 72% (N=36) of working and only 36% (N=18) non-working women belong to high shyness groups. On the other hand only 28% (N=14) of working and more them 64% (N=32) non-working status of women belong to low shyness group. The chi-square showing the significance of differences among the percentages were found significant ($\chi^2 = 25.92$; $df = 1$; $P < .01$) Working women may manifest a higher level of shyness compared to non-working women due to increased exposure to social and professional evaluation, performance, pressure and fear of judgment in competitive work environments. These experiences can heighten self-consciousness and social anxiety. In contrast, non-working women may remain within more familiar and less evaluative social circles, which may reduce the likelihood of developing or expressing shyness.

Table 02: Comparison between androgynous, sex-typed women in terms of shyness

Variables	Groups	N	Shyness (%)		t ²	df	P
			High	Low			
Sex-role Orientation	Androgynous	50	74% (N = 37)	26% (N=13)	35.28	1	<.01
	Sex Typed	50	32% (N=16)	68% (N=34)			

The results displayed by table-02 clearly reveal that 74% (N=37) of androgynous female group and only 32% (N=16) of sex typed group of women manifested higher degree of shyness. On the other hand only 26% (N=13) of androgynous women and more than 68% (N=34) of sex-typed women manifested low shyness. The chi-square was found significant ($\chi^2 = 35.28$; $df = 1$; $P < .01$) Androgynous women, who possess both masculine and feminine traits, may experience higher levels of shyness due to internal role conflict or societal ambiguity in expected behavior. Their flexible gender identity can lead to uncertainty in social roles or fear of negative judgment, especially in environments that value clear gender norms. In contrast, sex-typed women, whose behavior aligns with traditional gender expectations, may feel more socially accepted and confident, resulting in lower shyness.

Table 03: Comparison between working and non-working women in respect of personal space

Variables	Groups	N	Personal Space (%)		t ²	df	P
			Larger	Smaller			
Working-status	Working	50	30% (N=15))	70% (N=35)	23.12	1	<.01
	Non-Working	50	64% (N=32)	36% (N=18)			

The result revealed by table-03 clearly showed the significant link of working status among women on maintenance of their personal space. More than 70% (N=35) of working women and only 36% (N=18) of non-working women were found maintaining smaller personal space. On the other hand more than 64% (N=32) of non-working and only 30% (N=32) of working women maintained larger personal space. The chi-square was found significant ($\chi^2 = 23.12$; $df = 1$; $P < .01$) This hypothesis no.(3) is retained. Working women often prefer smaller personal space compared to non-working women because they are more accustomed to frequent social interactions, shared work environments, and collaborative settings. This regular exposure reduces sensitivity to physical proximity and increases comfort with interpersonal closeness. In contrast, non-working women may have fewer daily interactions outside the home, leading to a stronger preference for maintaining larger personal boundaries to feel secure and comfortable.

Table 04: Comparison between androgynous, sex-typed women in terms of personal space

Variables	Groups	N	Shyness (%)		t ²	df	P
			High	Low			
Sex-role Orientation	Androgynous	50	74% (N = 37)	26% (N=13)	32.00	1	<.01
	Sex Typed	50	34% (N=17)	66% (N=33)			

It is obvious from the results table-04 that more than 74% (N=37) of androgynous women group and only 34% (N=17) of sex-types women group maintain smaller personal space. On the other hand more than 66% (N=33) of sex-typed group and only 26% (N=13) of androgynous group maintain larger personal space. The chi-square was found significant ($\chi^2 = 32.00$; $df = 1$; $P < .01$) Androgynous women tend to prefer smaller personal space because they are more socially adaptable, expressive, and comfortable with emotional closeness, traits associated with both masculine assertiveness and feminine warmth. This flexibility allows them to engage more openly in interpersonal interactions. In contrast, sex-typed women, adhering more strictly to traditional gender norms, may maintain larger personal space due to heightened sensitivity to social propriety or discomfort with boundary ambiguity.

Table 05: Correlational among shyness, sex-role orientation and personal space

Variables	N	r	Df	P
Shyness Vs Androgynity	100	0.508	98	<.01
Shyness Vs Personal Space	100	0.516	98	<.01
Androgynity Vs Personal Space	100	-0.502	98	<.01

The results displayed by table-05 clearly revealed the significant correlation between shyness vs androgynity ($r = 0.508$; $df = 98$; $P < .01$), between shyness Vs Personal Space ($r = 0.516$; $df = 98$; $P < .01$) and between androgynity vs personal space ($r = -0.502$; $df = 98$; $P < .01$) The significant positive correlation of shyness (assuming it refers to physiological or psychological tension or reactivity) with both androgynity and personal space suggests that individuals higher in androgynity and those who prefer larger personal space may also experience higher internal arousal or stress. However, the negative correlation between androgynity and personal space indicates that more androgynous individuals tend to prefer smaller personal space due to their social flexibility and comfort in interactions.

This apparent contradiction can be understood by recognizing that while androgynous individuals prefer smaller personal space (due to social adaptability), they may still experience higher internal arousal (sinus reactivity) in complex or emotionally charged social situations. Thus, sinus reactivity may rise with both traits independently, even though androgynity and personal space preference are inversely related.

CONCLUSIONS

- (i) Working status significantly associated with shyness. Working women manifest higher level of shyness whereas non-working women manifest comparatively poor level of shyness.
- (ii) Sex role orientation is significantly associated with shyness. Androgynous women manifest higher degree of shyness whereas sex typed women manifest lower degree of shyness.
- (iii) Working status is significantly associated with personal space. Working women maintained smaller personal space than non-working women counterpart.
- (iv) Sex role orientation is significantly associated with personal space. Androgynous women maintain comparatively larger personal space than sex typed group of women.
- (v) Shyness, androgynity and personal space are significantly correlated. Shynes is positively correlated with adrogynity and personal space. Androgynity and personal space are negatively correlated with one another.

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