A STUDY ON WORK-LIFE BALANCE AMONG FEMALE NURSES WITH SPECIAL REFERENCE TO PARIYARAM MEDICAL COLLEGE, KANNUR DISTRICT

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Abstract

The role of working women has changed throughout the world due to economic and social conditions. The increasing work pressure and responsibilities on the personal on the working women leaving them with less time for themselves. Work life integrated with personal life also creates stress on individual, family and work related areas. This affects the person's physical, emotional and social well-being. Thus, achieving work life balance is a necessity for working women to have a good quality of life. Working women are flooded with work and family commitments. Majority of working women are bogged down while trying to balance their work and family life. Health Care Sector is an area of interest because shift work, especially night work, overtime places lot of stress on the nurses both at professional and personal front. Research indicates that improper work scheduling and long working hours tend to cause adverse effect on employee's health and well-being. The main purpose of the paper is to discuss the various factors affecting Work Life balance of women employees in hospital sector.

Key words: Work life balance, quality of life, personal life, family and work related areas

Section I

1.1 Introduction

Indian families are undergoing rapid changes due to the increased pace of urbanization and modernization. Indian women belonging to all classes have entered into remunerated occupations. At the present, Indian women's exposure to educational opportunities is substantially higher than it was some decades ago, especially in the urban setting. This has opened new outlooks, increased awareness and raised aspirations of personal growth. This, along with economic pressure, has been instrumental in influencing women's decision to enter the work force. Most studies of employed women in India have reported economic need as being the primary reason given for working.

According to 2010 National Health Interview Survey Occupational Health Supplement data, 16% of U.S. workers reported difficulty balancing work and family. Imbalance was more prevalent among workers aged 30–44 (19%) compared with other age groups.

Work—life conflict is not gender-specific. According to the Center for American Progress, 90% of working mothers and 95% of working fathers report work—family conflict. However, because of the social norms surrounding each gender role, and how the organization views its ideal worker, men and women handle the work—life balance differently. Organizations play a large part in how their employees deal with work—life balance. Some companies have taken proactive measures in providing programs and initiatives to help their employees cope with work—life balance. Today there are many young women who do not want to just stay at home and do house work, but want to have careers. About 64% of mothers whose youngest child was under age six, and 77% of mothers

with a youngest child age 6-17 were employed in 2010, indicating that the majority of women with dependent care responsibilities cannot or do not wish to give up careers. While women are increasingly represented in the work force, they still face challenges balancing work and home life. Both domestic and market labour compete for time and energy. "For women, the results show that only time spent in female housework chores has a significant negative effect on wages".

1.2 Review of Literature

Hill (2001)¹ reported that gender was not significantly correlated to work family balance indicating that men and women report similar levels of work family balance and hence both of them has equilibrium.

Welsey and Muthuswamy (2005)² also did not find any gender differences in the experience of work to family conflict or family to work conflict and argued that it was because of the financial resources that were now being used to pay for the household activities which earlier women had to do and moreover, men has also started to share some work at home with their female counterparts.

The purpose of the study undertaken by **Grywacz** (2007)³ was to expand the understanding of how culture contributes to the occurrence and consequences of work to family conflict and family to work conflict. Grywacz's study evaluated predictions drawn from emerging models which emphasize the influence of cultural characteristics, such as collectivism and gender ideology on work family conflict and family work. The findings were similar with earlier research that individuals from more collectivists' cultures experience fewer conflicts between work and family, as in these cultures work and family are viewed as more integrated. Results also indicated that the level of work to family conflict differed with gender of the individuals.

Bardoel (2008)⁴ empirical study identified the major themes and research methods that have dominated work life research in Australia and New Zealand between the period 2001-2007. The identified themes from his empirical studies were grouped in eight categories, which are, organization approaches to work life and work family issues, work characteristics, occupations/industries, government policy and legislation, health outcome issues related to work life, family structure and children, gender and other additional themes.

1.3 Statement of the Problem

Employee satisfaction is the main component that motivates the employees to deliver better performance at workplace. Employees get satisfaction in their job at workplace. Employees get satisfaction in their job only when they are able to balance their work life and personal life. In today's era, almost every employee faces many problems in their work place and that affects their personal life. This certainly leads to reduction in employees' performance. In India, an important section of important section of these employees' i.e. female nurses are highly exploited, with lack of respect and dignity at workplaces and more importantly paid extremely low salaries with lack of job security. Many nurses comes from poor background, have to pay lakhs of rupees to get a nursing degree and hence have to take huge loans thus leaving them indebted, despite shortage of nurses and other staffs from government hospitals, The government deliberately follows a totally unscientific method of recruitment, which keeps the majority of the aspirants from getting a posting in the government services and at the same time recruits nurses on a contract labour at extremely ling wages to fill some of the gap. In the private sector, the nurses are facing with extremely low paying job(between Rs 3000 to Rs 4000 per month)as against the labor standard of around Rs 6000. Even the most experienced ones only get paid about Rs 8000 to Rs 9000 per month. Most of the nurses are forced to work beyond the mandatory eight hours per working day, to more than ten to eleven hours. Apart from low wages, none of the nurses are given employment benefits like provident fund and gratuity. Another aspect is that there is human right violation in the form of sexual harassment to female nurses. There is

also the lack of work place ethics and respect for nurse profession, with harassment by either doctor or the management by constantly accusing them of dereliction of duty.

1.4 Scope and Significance of the study

Many researchers have found that women are challenged by work and family commitment at the end of each day in Government and private hospital. Majority of women are working through-out week and many are struggling to achieve work-life balance. Women reported that their life has become a juggling act as they have to shoulder multiple responsibilities at work and home. Both government and private hospital management need to be conscious of this status of female nurses and periodically review their status. They can create supportive environment to help these women for achieving Work Life Balance. This paper also gives an insight into the family, work and individual related factors which would facilitate work-life balance. This research is carried out to promote a better understanding of work-life balance among female nurse staffs in Pariyaram Medical College, Kannur District. This study sought to analyze the factors affecting the work-life balance among female nurse staffs. The factors viz, family, work and individual related variables that are causing balance or imbalance are studied.

1.5 Objectives of the study

The main objective of the study is to study the "Work-Life Balance among female nurse staffs in Pariyaram Medical College, Kannur District".

Specific objectives are as follows:

- 1.5.1 To study the family, work and individual related factors affecting work-life balance among female nurse staffs in Pariyaram Medical College, Kannur.
- 1.5.2 To analyze the demographic factors influencing work-life balance among female nurse staffs in Pariyaram Medical College, Kannur.

1.6 Hypotheses

- 1.6.1 There is a significant difference in the opinion related to the factors affecting work-life balance among married and unmarried nurses.
- 1.6.2 There is a significant difference in the opinion related to the factors affecting work-life balance among permanent and temporary employees.
- 1.6.3 There is a significant difference in the opinion related to the factors affecting work-life balance among respondents having and not having children.

1.7 Research Methodology

1.7.1 Research design

The study was conducted among the female nurse staffs in Pariyaram Medical College, Kannur. Here the population was women nurse staffs in Pariyaram Medical College. This study is descriptive in nature. Descriptive research is mainly used to gain information regarding the current status of the phenomenon and to describe "what is already exists" with respect to variables or conditions in a situation.

1.7.2 Sample Design

a) Sampling frame: To study the whole population in order to arrive at conclusion would be impractical. Since, it was not feasible to include all the employees in the study for data collection. It was considered inevitably to draw a representative sample. According to Taro Yamane 1970 use the following formula for finite population to fix the sample size.

n = N/1 + n (e) 2

N= total population=86

e= Chance for error (5%)

 $n = 86/1 + 86(.05)^2$

Sample size = 70.49 (approx.)

1.7.3 Sample size

Thus the 70 female nurses constitute the sample size. The simple random sampling technique used for selecting respondents as a sample.

1.7.4 Data Collection

Sources of Data: Data were collected from both primary and secondary sources. The primary data were collected through structured questionnaire based on the objectives. The secondary data were collected from books, websites, annual reports etc.

1.8 Tools for Analysis

Factors related to family, work and individual was collected by using 5 point Likert scale. The collected data was analyzed with the help of both relevant descriptive and inferential statistical tools such as Percentage analysis, factor analysis and one sample independent t- test etc.

Section II

Data analysis and interpretation

In this study, data is analyzed with the help of both descriptive and inferential statistical tools. Here percentage analysis is used as one of descriptive statistical tool for describing the data. The tools like Cronbach's alpha, factor analysis and independent sample t- test are also used as the tool under inferential statistics.

Reliability analysis is a measure to check the internal consistency of an instrument constructed with multiple item scale. Internal consistency based on correlation among the factors of the instrument is checked with the help of Cronbach's Alpha.

Table 2.1 Reliability analysis

Cronbach's Alpha	N of Items
0.880	29

Source: SPSS Output

The table 2.1 shows the result of reliability analysis of 70 respondent's observation, related to work life balance. The value of Cronbach's alpha is 0.880 and the numbers of items taken are 29. An alpha value of 0.70 or above is considered to be criterion for demonstrating strong internal consistency, alpha value of 0.60 or above is considered to be significant. Here the alpha value is 0.880; it is more compared to the above value, so it means that the observed score is related to the true score that means the data is reliable.

Factor analysis

Factor analysis is a statistical method for reducing large number of variables to a small number of components or factors and used to describe the variability among observed, correlated variables in terms of potentially lower number of unobserved variables called factors. It is used as a data reduction method. It may be used to uncover and establish the cause and effect relationship between variables or to confirm a hypothesis.

KMO and Bartlett's Test

The KMO and Bartlett's test table display the results for interpreting the adequacy of data for factor analysis.

The **Kaiser-Meyer-Olkin** (**KMO**) measures the sampling adequacy and its value should be greater than 0.6 for our sample to be adequate for undertaking factor analysis. Also, the p-value of **Bartlett's Test**

of Sphericity should be less than 0.05. The off-diagonal elements should all be very small (close to zero) in a good model. In the table 4.2 the KMO measure is 0.713. There is universal agreement that factor analysis is inappropriate when sample size is below 50. Kaisen (1974) recommend 0.5 as minimum (barely accepted), values between 0.7-0.8 acceptable, and values above 0.9 are superb.

Table 2.2 KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure o	.713	
	Approx. Chi-Square	864.242
Bartlett's Test of Sphericity	df	300
	Sig.	.000

Bartlett's test of Sphericity and Kaiser-Meyer-Olkin (KMO) measures are adopted to determine the appropriateness of data set for factor analysis. High value (between 0.5 to 1) of KMO indicates that factor analysis is appropriate. In this study, the result of Bartlett's test of Sphericity (0.000) sig and KMO (0.713) indicates that the data are appropriate for factor analysis.

Communalities

The proportion of variance in any one of the original variables which is captured by extracted factor is communalities. Communalities help estimate the variance that is unique to each variables; this uniqueness is calculated by total variance explained by the variable minus the communality of that variable.

Table 2.3
Communalities

	Initial	Extraction
Work leaves little energy to do any other non-work	10	0.685
Family's pride in their work		0.727
Family's complaint about preoccupation with work	N VI	0.655
Unable to devote more time to work because of personal life	1	0.687
Tension and stress affects rest of the life	1	0.62
Work makes it difficult for scheduling personal time-offs	1	0.549
Work boost the self esteem	1	0.716
Personal life creates a drive to progress in career	1	0.566
Superior's complaint about preoccupation with personal life	1	0.651
Personal life needs does not allow to focus on career progress	1	0.765
Work strain and ignoring personal life needs	1	0.81
Economic rewards improves the quality of personal life	1	0.729
Satisfied by the rewards that is received for work	1	0.65
Content with earnings	1	0.729
Stay beyond stipulated hours to complete the work	1	0.659
Superior's help in resolving problems	1	0.68

Frequent thinking about the work	1	0.696
Unable to create personal relationship networks	1	0.706
Difficulty in doing things that want to do in personal life	1	0.706
Draining in commuting between work and home	1	0.667
Flexibility to change start and end time	1	0.774
Can choose to work longer hours on some days and day off in exchange	1	0.718
Availabity of maternity leave in the hospital	1	0.68
Partners'/parent's support at career development	1	0.658
Enjoyment of leisure activities	1	0.693

As per table 2.3 shows how the variance (i.e. the communality value which should be more than 0.5 to be considered for further analysis). In this study, factor analysis was carried out in two stages. In stage one; known as the factor extraction process, objective was to identify (how many number of) factors to be extracted from the data.

Table 2.4

		Initial Eigenva	alues	Extractio	n Sums of Squa	ared Loadings	Rotation	n Sums of Squa	red Loadings
Component	Tr. 4. 1	% of	Cumulative	Tr. 4.1	% of	Cumulative	Tr. (1	% of	Cumulative
	Total	Variance	%	Total	Total Variance % Total	Variance	%		
1	7.507	30.029	30.029	7.507	30.029	30.029	2.984	11.938	11.938
2	2.504	10.016	40.045	2.504	10.016	40.045	2.789	11.154	23.092
3	1.822	7.287	47.333	1.822	7.287	47.333	2.624	10.495	33.587
4	1.565	6.260	53.593	1.565	6.260	53.593	2.417	9.667	43.254
5	1.425	5.701	59.294	1.425	5.701	59.294	2.194	8.777	52.031
6	1.285	5.141	64.435	1.285	5.141	64.435	2.144	8.575	60.606
7	1.067	4.267	68.702	1.067	4.267	68.702	2.024	8.096	68.702
8	.976	3.903	72.605						
9	.899	3.596	76.201						
10	.796	3.183	79.384						
11	.728	2.912	82.296						
12	.666	2.664	84.960						
13	.610	2.441	87.401						
14	.514	2.055	89.457						
15	.391	1.566	91.023						
16	.389	1.555	92.577						
17	.324	1.295	93.872						
18	.292	1.166	95.038						
19	.274	1.097	96.136						
20	.252	1.010	97.145						
21	.187	.747	97.892						
22	.178	.714	98.606						
23	.146	.584	99.191						
24	.119	.477	99.668						
25	.083	.332	100.000						

Extraction Method: Principal Component Analysis.

Using principle component analysis, 25 variables were extracted by 7 factors. Only the factors having latent roots or Eigen values greater than 1 were considered significant and all factors having Eigen value less than 1 were considered insignificant and were discarded. All the seven factors together accounted 68.70 % of total variance.

Table 2.5
Rotated Component Matrix

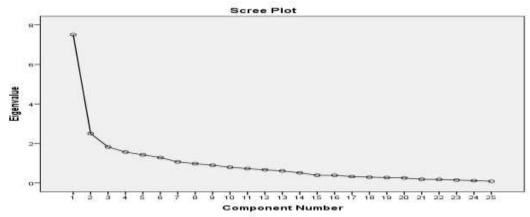
	Component								
	1	2	3	4	5	6	7		
A1	.177	.257	.201	.340	.654	.036	051		
A2	.557	.367	.318	.022	053	.421	011		
A3	214	.101	.040	.446	.592	079	.203		
A4	.330	.659	.014	.313	.109	.104	.155		
A5	.000	150	.679	.190	.077	.307	027		
A6	.107	.703	.182	.037	.081	039	021		
A7	.330	078	.261	043	.272	.661	142		
A8	.523	.253	.339	.161	030	156	.248		
A9	171	.271	082	.114	174	.702	079		
A10	.107	.359	.645	036	.178	338	.247		
A11	.085	.042	023	.451	.369	.667	.124		
A12	.505	.081	.596	.031	.308	039	.120		
A13	.159	.056	.142	033	.770	.085	.014		
A14	.753	.190	035	.231	.022	023	.264		
A15	.006	.244	.716	.258	.131	.002	.055		
A16	.693	.241	029	066	.342	.118	071		
A17	042	.066	.185	.793	.080	.100	.098		
A18	.244	.687	044	095	.244	.196	.257		
A19	.316	.017	.162	.694	.113	.125	265		
A20	.245	.327	.254	093	.118	.065	.639		
A21	.297	.311	.150	.270	.098	.144	681		
A22	.286	.186	.126	.229	.087	091	.719		
A23	.405	.431	.216	.505	.058	.123	095		
A24	.379	.124	.245	009	.425	.326	.389		
A25	.137	.522	.466	.292	.004	.312	.041		

Extraction Method: Principal Component Analysis.

Rotation Method: Varimax with Kaiser Normalization.

From the rotated component matrix table, select those variables that has loading 0.5 or above. There are 5 variables that have high factor loadings on factor 1; 4 variables that have high factor loadings on factor 2 and 4 variables that have high factor loadings on factor 3, 2 variables that have high factor loadings on factor 5, 2 variables that have high factor loadings on factor 6 and 2 variables that have high factor loadings on factor 7.





The scree plot graph shows the Eigen value against the factor number. From the seventh factor onwards the line is almost flat, it indicates that the each successive factor is accounting for smaller and smaller amounts of the total variance.

Table 2.6
High loading greater than 0.5

Factor label	Rotated factor loading
	.557-Family's pride in the work
Factor 1	.523-Personal life creates a drive to progress in career
Psychological Motivation in	.505-Economic rewards improve the quality of personal life
work	.753-Content with earnings
7	.693-Superior's help in resolving problems
1	.659-Unable to devote more time to work
Factor 2	.703-Work makes it difficult to schedule personal time-offs
Work Stress	.687-Inability to create personal relationship networks
The state of the state of	.522-Regularly enjoying leisure activities
	.679-Tension and stress affects rest of the life
Factor 3	.645-Personal life does not allow to focus career progress
Personal life interference	.596-Economic rewards improves the quality of personal life
with work	.716-Stay beyond stipulated hours to complete the work
	.793-Frequent thinking about the work
Factor 4	.694-Difficulty in doing things in personal life due to work overload
Work interference with	
personal life	
Factor 5	
Satisfaction with work and	.592-Family's complaint about preoccupation with the work
non work activity	.770-Satisfied by the rewards earned for work
Factor 6	
Work interference with	.661-Work boost the self-esteem
personal life	.667-Ignoring personal life needs due to work strain

F. 4. 5	.639-Draining in commuting between work and home
Factor 7 Flexibility in work	.719-Choose to work longer hours on some days and day off in exchange

Source: Spss output Levene's t – test

It is an inferential statistical test that determines whether there is a statistically significant difference between the means in two unrelated groups. This test for homogeneity of variance provides an F-statistic and a significance value (p-value). We are primarily concerned with the significance value – if it is greater than 0.05 (i.e., p > .05), our group variances can be treated as equal. However, if p < 0.05, we have unequal variances. From the result of Levene's Test for Equality of Variances, we can reject the null hypothesis that there is no difference in the variances between the groups and accept the alternative hypothesis that there is a statistically significant difference in the variances between groups. Levene's t test is used for testing of equality of variance assumed and equality of variance not assumed among the married and unmarried respondents, permanent and temporary respondents and parents having children and not having children. The following variables like family, work and individual related variables etc. are taken to test whether the variance of the two groups are equal or not.

H0: There is no significant difference in the opinion related to the factors affecting work-life balance among permanent and temporary employees.

H1: There is significant difference in the opinion related to the factors affecting work-life balance among permanent and temporary employees.

Table 2.7

	Group Statistics										
	Nature of Job	N	Mean	Std. Deviation	Std. Error Mean						
Avg of family related variables	Permanent	25	2.893	0.6271	0.1254						
	Temporary	45	2.315	0.6753	0.1007						
Avg of work related	Permanent	25	2.684	0.5352	0.107						
variables	Temporary	45	2.356	0.5983	0.0892						
Avg of individual related	individual Permanent		2.733	0.7481	0.1496						
variables	Temporary	45	2.365	0.6568	0.0979						

Table 2.8

Independent Samples Test										
	for Equ	e's Test nality of ances	t-test for Equality of Means							
		F Sig.		t	df	Sig. (2- tailed	Mean Differenc e	fferenc Error Differenc		nfidence l of the rence Uppe
)		e	Lowe r	r
Avg of family related variables	Equal variance s assume d	0.44 9	0.50 5	3.52 1	68	0.001	0.5785	0.1643	0.250 6	0.906 4
	Equal variance s not assume d			3.59 7	52.91 1	0.001	0.5785	0.1608	0.255 9	0.901 1
Avg of work	Equal variance s assume d	0.85 9	0.35 7	2.28	68	0.026	0.3284	0.1439	0.041	0.615 6
related variables	Equal variance s not assume d			2.35 7	54.55 5	0.022	0.3284	0.1393	0.049	0.607 7
Avg of individu al related variables	Equal variance s assume d	0.04 6	0.83 1	2.13 6	68	0.036	0.3679	0.1722	0.024	0.711 5
	Equal variance s not assume d			2.05	44.50 1	0.046	0.3679	0.1788	0.007 7	0.728 1

Source: Spss Output

The results of SPSS analysis shows that there is significant variance among the permanent and temporary respondents opinion related to the factors affecting work-life balance as compared to the P values are less than the alpha (0.05). There is a significant difference in the opinion related to family, work and individual related variables among permanent and temporary nurse respondents.

H0: There is no significant difference in the opinion related to the factors affecting work-life balance among married and unmarried employees.

H1: There is significant difference in the opinion related to the factors affecting work-life balance among married and unmarried employees.

Table 2.9

	Group Statistics								
	Marital Status	N	Mean	Std. Deviation	Std. Error Mean				
Avg of family related variables	Married	29	2.92	0.6403	0.1189				
	Unmarried	41	2.24	0.6237	0.0974				
Avg of work related variables	Married	29	2.824	0.5578	0.1036				
	Unmarried	41	2.224	0.4883	0.0763				
Avg of individual related variables			2.862	0.7162	0.133				
	Unmarried	41	2.238	0.5835	0.0911				

Source: Spss Output

Table 2.10 Independent Samples Test

	Tubic 2010 independent bumples 1050									
Levene's Test					t-test for Equality of Means					
		for Equa	lity of							
		Varian	ces							
		F	Sig.	t	df	Sig. (2-	Mean	Std. Error	95% Co	nfidence
						tailed)	Difference	Difference	Interva	of the
									Diffe	rence
									Lower	Upper
Avg of family	Equal variances assumed	.053	.818	4.443	68	.000	.6797	.1530	.3744	.9850
related variables	Equal variances not assumed			4.422	59.449	.000	.6797	.1537	.3722	.9872
Avg of work	Equal variances assumed	.001	.976	4.771	68	.000	.5997	.1257	.3489	.8506
related variables	Equal variances not assumed			4.663	55.217	.000	.5997	.1286	.3420	.8575
Avg of	Equal variances	.405	.526	4.006	68	.000	.6236	.1556	.3130	.9342
individual	assumed									
related variables	Equal variances not assumed			3.868	52.382	.000	.6236	.1612	.3001	.9470

Source: Spss Output

The results of SPSS analysis shows that there is significant variance among the married and unmarried respondents opinion related to the factors affecting work-life balance as compared to the P values are less than the alpha (0.05). There is a significant difference in the average responses among married and unmarried respondents towards family, work and individual related variables.

H0: There is no significant difference in the opinion related to the factors affecting work-life balance among the respondents having children and not having children.

H1: There is significant difference in the opinion related to the factors affecting work-life balance among the respondents having children and not having children.

Table 2.11

Group Statistics								
	Parental Status	N	Mean	Std. Deviation	Std. Error Mean			
Avg of family related variables	Having Children	22	3.045	0.6489	0.1384			
	Not having Children	48	2.281	0.6055	0.0874			
Avg of work related variables	Having Children	22	2.877	0.6047	0.1289			
	Not having Children	48 2.288		0.4932	0.0712			
Avg of individual related variables	Having Children	22	2.899	0.769	0.1639			
	Not having Children	48	2.313	0.601	0.0868			

Table 2.12
Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means							
		F	Sig.	t	df	Sig. (2- tailed	Mean Differenc e	Std. Error Differenc e	Interva	nfidence l of the rence Uppe	
						,			r	r	
Avg of family related variables	Equal variance s assume d	0.00	0.95 3	4.79 3	68	0	0.7642	0.1594	0.446 1	1.082	
	Equal variance s not assume d			4.67	38.37 2	0	0.7642	0.1636	0.433	1.095	
Avg of work related variables	Equal variance s assume d	0.27	0.60 5	4.32	68	0	0.5898	0.1365	0.317	0.862 1	

	Equal variance s not assume d			4.00	34.33 2	0	0.5898	0.1473	0.290 6	0.889
Avg of individu al related variables	Equal variance s assume d	0.53 7	0.46 6	3.46 5	68	0.001	0.5865	0.1693	0.248 7	0.924
	Equal variance s not assume d			3.16	33.24 3	0.003	0.5865	0.1855	0.209	0.963 8

Source: Spss Output

The results of SPSS analysis shows that there is significant variance among the respondents having children and not having children. Their opinion related to the factors affecting work-life balance as compared to the P values is less than the alpha (0.05). There is a significant difference in the average responses among the respondents having children and not having children. There is a significant difference in the average responses among married and unmarried respondents towards family, work and individual related variables. There is a significant difference in the opinion related to family, work and individual related variables among permanent and temporary nurse respondents.

Section III Findings, Suggestions and Conclusion

Major findings of the study:

- Out of the total sample (70), 41.4% of the respondents are married and 58.6% of respondents are unmarried.
- 31.4% of respondents are having children and 68.6% of respondents are not having children from the sample selected.
- Sample of 58.6% have experience below 5 years, 32.9% of respondents have 5 to 10 years of experience and 8.6% of respondents have above 10 years of experience.
- Out of the total sample, 35.7% of respondents are permanent and remaining 64.3% of respondents are temporary.
- Most of the respondents strongly disagree that their family has pride in their nursing profession.
- Results reveals that nearly 50% of respondents somewhat disagree about family's complaints about their preoccupation.
- Only 8.65% of respondents strongly agree about that their personal life creates a drive to progress in their career.
- Most of the respondents (35.7%) neither agree nor disagree about the statement that the economic rewards of work improve the quality of their personal life.
- About 34.3% of respondents somewhat disagree and 8.6% of respondents strongly agree that they are frequently thinking about their work.

- Only about 4.3% respondents strongly agree about their ability to create personal relationship networks despite their workload.
- Nearly to 50% of respondents somewhat disagree that they have difficulty in doing things that they want to do in personal life because of their work demands.
- Most of the respondents somewhat disagree about the maternity leave available in their hospital.
- Only about 8.6% of respondents somewhat agree about their partner/parental support at various stages in their career development.
- Enjoyment of leisure activities like watching movies, going out for dinner was strongly agreed by 12.9% of respondents.
- More than half (67.1%) of respondents somewhat disagree that they have little energy to do other non-work.
- Inability to devote more time to their work because of their personal life demands was strongly agreed by only about 5.7% of respondents.
- Most of the respondents (35.7%) somewhat disagree that the tension and stress from work often adversely affects rest of my life.
- Only about 5.7% of respondents strongly agree that their work makes it difficult for them to schedule their personal time offs.
- Equal percentages (27.1%) of respondents strongly disagree and neither agree nor disagree that their nursing profession boosts their self-esteem.
- Results reveal that only about 2.9% of respondents strongly agree that their superior often complains about their preoccupation with their personal lives.
- Equal percentages of respondents (25.7%) strongly disagree and neither agree nor disagree that their personal life does not allow them to focus on their career progress.
- Majority of the respondents (32.9%) strongly disagree that due to work strain they ignore their personal life needs.
- More than half (58.6%) of respondents somewhat disagree that they are satisfied by the rewards that they receive for the work accomplished by them.
- Only about 1.4% of respondents strongly agree that they are content with what they earn.
- About 12.9% of respondents somewhat agree that they have to often stay beyond stipulated hours to complete their work.
- Equal percentages of respondents (25.7%) strongly disagree and neither agree nor disagree that they are getting superior's assistance in resolving problems at their work.
- Only about 2.9% of respondents strongly agree that commuting between work and home drains them.
- Most of the respondents (40%) somewhat disagree that they have flexibility to change their start and end time to suit their convenience.
- About 14.3% of respondents somewhat agree and 37.1% of respondents somewhat disagree about the statement that they can choose to work longer hours on some days and have a day off in exchange.
- Only about 4.3% of respondents strongly agree that their nursing profession boosts their self esteem.
- Equal percentage of respondents (12.9%) neither agree nor disagree and somewhat agree that that they are satisfied by the rewards that they receive for the work accomplished by them.
- Most of respondents (32.9%) neither agree nor disagree that they are content with what they earn.

- Only about 4.3% of respondents strongly agree about their inability to create personal relationship networks.
- About 20% of respondents somewhat agree that commuting between work and home drains them.
- Only about 12.9% of respondents strongly agree that they can regularly enjoy leisure activities like watching movies, going out for dinner etc.
- There is significant variance among the permanent and temporary respondents regarding opinion related to the family, work and individual related factors affecting work-life balance as compared to the P values are less than the alpha (0.05).
- There is significant variance among the married and unmarried respondents regarding opinion related to the family, work and individual related factors affecting work-life balance as compared to the P values are less than the alpha (0.05).
- There is significant variance among the respondents having children and not having children regarding opinion related to the family, work and individual related factors affecting work-life balance as compared to the P values is less than the alpha (0.05).

Suggestions

Almost everyone agrees that achieving a work-life balance is a good thing. Without it, we risk long-term negative effects on our physical and mental health, our relationships, and our work performance. But many nurses have a hard time achieving this balance due to job demands, erratic work schedules, or inability to say no when someone asks for help.

Some of the suggestions to achieve work-life balance are

- Align priorities and values between home and work.
- Sit down with spouse or partner to discuss and negotiate relationship expectations.
- Set limits with patients while still conveying empathy and instilling their confidence in your care.
- Look for areas where should set limit and boundaries on your time—both at home and at work—and stick to them.
- Seek mentors who model good time management, and ask for their advice and guidance.
- Engage in necessary conversations regarding conflict. Addressing conflict and moving beyond it can make an enormous difference in your feelings and perceptions.
- Set regular times to get together with family and friends, and stick to those plans. Find time for regularly scheduled family meetings and meals together. Everyone may have to give a little to make this happen, but it will be worth it.
- Be open to reasonable feedback.
- Ask for help and delegate responsibilities and duties when possible.

Conclusion

Health service is one of the industries that provide a continuous service around the clock for the benefit of all citizens in any country. It is therefore expected that a healthy and psychologically balanced workforce provides health care. Nurses are those females who face mental or physical stress and are being pressurized by work. They are unable to devote time to their family and to themselves because of their nature of work and timings, which further leads to disturbance between work and life further affecting their- occupational life. Women reported that their life has become a juggling act as they have to shoulder multiple responsibilities at work and home.

The study reveals that majority of the respondents has real problem in striking balance between work and family and though many of them enjoy their work in serving people they are facing stress related health issues. Most of the respondents feel if proper work scheduling and timely support provided by both family and hospitals they will be stress free to some extent and will be able to strike balance between work and family. From the research study it is reasonable to conclude that the hospitals should address the Work Life Balance related issues and to support the female nurses to manage their work life balance which would add to the performance of these staff members. The results also indicated that work life balance is a challengeable one. Their need to be a periodical review in terms of their work and personal life satisfaction, otherwise, they would be subjected to severe stress.

The study reveals that there is a significant difference in the average responses among the respondents having children and not having children, among married and unmarried respondents and among permanent and temperorary nurse respondents towards family, work and individual related variables.

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