Original Article ISSN (Online): 2582-7472

AN ANALYSIS OF WORKLOAD AND WORK-LIFE BALANCE AMONG NURSES IN GOVERNMENT AND PRIVATE HOSPITALS IN MADURAI DISTRICT

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DOI

10.29121/shodhkosh.v5.i1.2024.280

Funding: This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

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ABSTRACT

This research article investigates the intricacies of family-work life balance and workload among nurses employed in both government and private hospitals within the Madurai district. The study aims to discern potential disparities between these two sectors and shed light on the challenges nurses face in reconciling their professional responsibilities with their personal lives. Through a rigorous empirical analysis, the study unveils notable variations in work-life balance and workload experienced by nurses in government and private hospital settings. Government hospital nurses are found to contend with higher workloads compared to their counterparts in private hospitals. Factors contributing to this disparity include patient volume, resource constraints, and organizational dynamics inherent in government healthcare institutions.

Keywords: Family-Work Life Balance, Nurses, Workload, Government Healthcare Institutions, Private Hospitals

1. INTRODUCTION

Human Resource Management (HRM) stands as the cornerstone of organizational functionality, regardless of its scale or scope. Within every organizational framework, employees emerge as pivotal resources whose efficient management is imperative for the attainment of organizational objectives. It falls upon the HR department to navigate and resolve the myriad challenges encountered by employees in their professional domains. Among these challenges, the delicate balance between work obligations and personal life commitments emerges as a significant concern globally. In the Indian context, the intricacies of family structures, cultural norms, societal expectations, and economic circumstances profoundly influence the work-life equilibrium, particularly impacting the lives of women. These factors compound the challenges individuals face in effectively managing their professional and personal spheres, creating a milieu where achieving balance becomes increasingly elusive. This complexity is further exacerbated within certain professions, such as nursing, wherein individuals shoulder multifaceted roles and responsibilities both within the workplace and the familial context.

For nurses, the quest for work-life balance represents a paramount concern, underscored by the myriad demands intrinsic to their profession juxtaposed with familial obligations. The juggling act required to fulfill these diverse roles often results in heightened stress levels, diminished job satisfaction, and compromised well-being. Moreover, the

ramifications extend beyond individual dissatisfaction, encompassing broader organizational concerns such as elevated turnover rates, escalated healthcare issues among employees, and compromised quality of patient care.

Recognizing the indispensable role nurses play in delivering high-quality healthcare, it becomes imperative to institute HRM practices that not only optimize their professional capabilities but also prioritize their holistic well-being. By fostering a supportive work environment, implementing flexible policies, and offering comprehensive support systems, organizations can effectively nurture and retain their nursing workforce while simultaneously enhancing the quality of care delivered. Thus, cultivating a harmonious work-life equilibrium emerges as not only a moral imperative but also a strategic necessity within the realm of contemporary HRM practices.

FAMILY-WORK CONFLICT (FWC)

Family-work conflict occurs when an individual grapples with the intricate balance between meeting the demands of their work responsibilities and fulfilling obligations within their familial roles and responsibilities. This conflict arises when the demands of personal life encroach upon the time and energy required for effective performance in the workplace, resulting in compromised job performance and limited opportunities for career advancement. The challenges stemming from familial issues can create a mental burden that hampers the employee's ability to concentrate and excel in their professional endeavors. Moreover, the interconnected nature of familial and work domains means that disruptions in one area can have ripple effects, impacting performance and well-being across both spheres of life. When familial issues spill over into the workplace, they can lead to decreased productivity, increased absenteeism, and heightened levels of stress and dissatisfaction among employees. Conversely, work-related stressors brought home can strain familial relationships and detract from the quality of personal life. This cyclical nature of conflict underscores the need for organizations to recognize and address the complex interplay between family and work dynamics to foster a supportive and conducive environment for employee well-being and organizational success. Employers can mitigate family-work conflict by implementing policies and practices that support work-life balance, such as flexible work arrangements, family-friendly policies, and access to employee assistance programs. By acknowledging and accommodating the diverse needs of their workforce, organizations can promote employee satisfaction, retention, and productivity while fostering a positive organizational culture that values the holistic well-being of its employees. Additionally, providing resources and support for employees to manage stress and navigate familial challenges can empower them to thrive both personally and professionally, contributing to a more engaged and resilient workforce. In summary, family-work conflict poses significant challenges for individuals and organizations alike, impacting performance, well-being, and organizational effectiveness. By recognizing the multifaceted nature of this conflict and implementing proactive measures to address it, employers can create a work environment that supports the integration of work and personal life, ultimately fostering happier, healthier, and more productive employees.

WORK-FAMILY CONFLICT (WFC)

Inter-role conflict manifests when the demands and expectations of roles within the work and family domains clash in ways that are fundamentally incompatible. This conflict arises when engaging in one role, whether it be in the workplace or within the family, becomes significantly more challenging due to commitments and pressures from the other role. The impact of this conflict is often felt deeply within an individual's personal life, resulting in diminished satisfaction in fulfilling familial obligations. The conflicting demands of work and personal life create a sense of stress and strain, making it difficult for individuals to fully engage in social activities, spend quality time with family members, or attend to their own well-being.

The repercussions of this conflict extend beyond the individual, affecting familial relationships, social connections, and overall mental and emotional well-being. The inability to balance the demands of work and personal life can lead to feelings of guilt, frustration, and dissatisfaction, further exacerbating the cycle of stress and strain. Addressing inter-role conflict requires a multifaceted approach that acknowledges the complex interplay between work and family roles. Employers can support employees by implementing policies and practices that promote work-life balance, such as flexible scheduling, telecommuting options, and access to resources for managing stress and prioritizing personal well-being.

Additionally, individuals can take proactive steps to manage inter-role conflict by setting boundaries, prioritizing self-care, and communicating openly with employers and family members about their needs and limitations. By recognizing the challenges posed by inter-role conflict and working collaboratively to address them, organizations and individuals can cultivate healthier, more fulfilling lives both inside and outside of the workplace.

2. REVIEW OF LITERATURE

Kakkar, J., & Bhandari, A. (2016) The research paper explores the findings regarding work-life balance concerns through a gender lens, utilizing a combination of quantitative and qualitative data collected via interviews. The data underwent analysis employing cross-tabulations and chi-square tests. The study's findings indicate that a significant proportion, approximately 67.7%, of female managers perceive they can effectively balance their work and family responsibilities, whereas male managers exhibit varied responses.

N. Krishna Reddy et al. (2010) The study identified the factors contributing to both work-family conflict and family-work conflict. It revealed that among various demographic groups of women, married individuals with children aged between six to ten years experience notably high levels of conflict between their family responsibilities and work commitments. Specifically, the research indicates that women employed in hospital settings are more affected by work-family conflict, while those working in industrial sectors experience a greater impact from family-work conflict.

Sharma, S., & Parmar, J. S. (2017) The research examined how family-related factors influence the work-life balance of doctors working in Government Hospitals of Himachal Pradesh. Variables such as support from spouses, household responsibilities, parental demands, and the burden of family roles were investigated. Through Pearson correlation analysis, the study revealed that support from spouses and managing family role responsibilities positively affect work-life balance. Conversely, household responsibilities and parental demands were found to have a negative correlation with work-life balance. Mittal, K. et al. (2017) A research investigation was undertaken to assess the influence of individual, family, social, and organizational factors on work-life balance. Questionnaires were distributed to 150 employees across both manufacturing and service sectors. Findings indicated a significant impact of these factors on work-life balance within both sectors. Specifically, a majority (60.8%) of employees in the service sector reported experiencing imbalance, whereas only 44.8% of those in the manufacturing sector acknowledged challenges in maintaining a balance between work and family life.

Lakshmi, et al. (2012) A descriptive research study was conducted among nurses working in both Government and Private Hospitals in Chennai, Tamil Nadu, India. The research employed a weighted score methodology to assess factors contributing to stress and imbalance in both work and personal life. Similarly, factors influencing satisfaction levels, encompassing work environment and personal life, were evaluated using the same methodology. The findings underscore the necessity for both types of hospitals to regularly review issues pertaining to the work-life balance of nurses, as failure to do so could lead to significant stress among this workforce.

Tugsal, T. (2017) The study investigated the impact of socio-demographic factors and work-life balance on employees' emotional exhaustion. Hierarchical regression analysis was employed to assess the effects of various dimensions of work-life balance, such as neglecting personal life, prioritizing work over personal life, achieving work-life harmony, making time for oneself, and carrying work-related concerns home, on emotional exhaustion. The results section discussed the significant relationships observed between employees' emotional states and demographic variables, including marital status, monthly income, and sector of employment.

Jamuna Rani, J., & Devi. A (2018) An effort was made to explore the association between work-life balance and stress levels. Utilizing the Pearson correlation coefficient test, it was determined that there exists a positive correlation between stress and work-life balance. The factors influencing work-life balance included commitments to both family within the workplace and work within the family setting.

3. OBJECTIVES

- To understand the concept of family work conflict and work family concept
- To analyse the work life balance among Nurses employed in Government & Private hospitals
- To analyse the Work-Family conflict of Nurses employed in Government & Private hospitals

4. ANALYSIS

Work-Life Balance Among the Nurses Working in Government And Private Sector Hospitals In Madurai City
The research focused on assessing the work-life balance perceptions of nurses working in both government and private
hospitals within Madurai city. Nurses' opinions were gathered using a Likert scale consisting of five response options
ranging from "strongly agree" to "disagree." Based on the nurses' responses, descriptive statistical analyses were
conducted to summarize the findings regarding work-life balance.

DESCRIPTIVE STATISTICS OF WORK-LIFE BALANCE AMONG THE NURSES

Statement	Hospital								
	Govern	ment		Private					
Work-Life Balance		Mean	Mean Rank	N	Mean	Mean Rank			
My personal life suffers because of work.	307	3.61	III	311	3.71	II			
I neglect personal care because of work.	307	3.60	IV	311	3.31	VI			
I miss participating in social gathering because of work.	307	3.42	VII	311	3.53	V			
My job commitments are not permitting me tospare my time with family.	307	3.58	V	311	3.66	III			
Job stress in my mind disturbs family commitments.	307	3.16	VIII	311	2.99	VII			
Family demands limit my job performance.	307	3.73	II	311	3.31	VI			
Family issues haunt me while I am at work.	307	3.82	I	311	3.96	I			
Family responsibilities are so time-consuming,that I get no time for career updating.		3.50	VI	311	3.60	IV			

Source: primary data

The provided table presents a comprehensive overview of the descriptive statistics pertaining to work-life balance among nurses employed in both government and private hospitals in Madurai city. Among nurses working in government hospitals, the analysis reveals that the most prominent aspect affecting their work-life balance is the interference of family issues while they are at work, with a mean score of 3.82, ranking it first. This is closely followed by the impact of family demands on limiting job performance, ranked second with a mean score of 3.73. Other significant factors affecting work- life balance include the adverse effects on personal life due to work (mean score: 3.61, ranked third), neglecting personal care because of work (mean score: 3.60, ranked fourth), and the inability to spare time with family due to job commitments (mean score: 3.58, ranked fifth). The analysis also highlights the time-consuming nature of family responsibilities, leading to a lack of time for career development (mean score: 3.50, ranked sixth), as well as the impact of job stress on disturbing family commitments (mean score: 3.16, ranked eighth). The mean range across all statements regarding work-life balance among government hospital nurses falls between 3.16 and 3.82, indicating a significant influence on their work-life balance.

In contrast, among nurses employed in private hospitals, the most salient aspect affecting their work-life balance is again the intrusion of family issues while they are at work, with a mean score of 3.96, ranking it first. This is followed by the adverse effects on personal life due to work (mean score: 3.71, ranked second) and the challenge of sparing time for family due to job commitments (mean score: 3.66, ranked third). The least influential factor affecting work-life balance among private hospital nurses is the impact of job stress on disturbing family commitments, with a mean score of 2.99. The mean range of descriptive statistics for work-life balance among private hospital nurses falls between 2.99 and 3.96. Furthermore, the study indicates that the overall level of agreement with statements regarding work-life balance is above the average level of 2.50 for both government and private hospital nurses in the study area. This suggests a consensus among nurses regarding the significance of work-life balance considerations within their respective work environments.

NULL HYPOTHESIS

There is no Work-life balance among the Nurses of both Government and Private Hospitals in Madurai city

ONE-SAMPLE T-TEST FOR WORK-LIFE BALANCE AMONG THE NURSES

Statements	Public					Private					
	N	М	SD	t- value	P-value	N	M	SD	t- value	P-value	
My personal life suffers because of work.	307	3.61	1.071	10.02	<0.000**	311	3.71	.810	15.536	<0.000**	
I neglect personal care because of work.	307	3.60	1.019	10.30	<0.000**	311	3.31	1.027	5.358	<0.000**	
I miss to participate in social gathering because of work.	307	3.42	1.095	6.77	<0.000**	311	3.53	1.132	8.212	<0.000**	
My job commitments not permitting me to spare my time with	307	3.58	1.312	7.69	<0.000**	311	3.66	1.234	9.373	<0.000**	

family.										
Job stress in my mind disturbs family commitments.	307	3.16	1.309	2.09	0.037*	311	2.99	1.384	5.347	0.005**
Family demands limit my job performance.	307	3.73	1.198	10.62	<0.000**	311	3.31	1.337	4.071	<0.000**
Family issues haunt me while I am at work.	307	3.82	1.196	11.97	<0.000**	311	3.96	1.002	16.913	<0.000**
Family responsibilities are so time consuming, that I get no time for career										
updating.	307	3.50	1.310	6.62	<0.000**	311	3.60	1.352	7.887	<0.000**

Source: primary data

The above table provides insights from the One-sample t-test conducted to assess the work-life balance among nurses employed in both government and private hospitals in Madurai city. The analysis reveals that the p-values for all work-life balance statements, excluding 'Job stress in my mind disturbs family commitments', are less than 0.01, signifying statistical significance at the 1% level. Consequently, the null hypothesis is rejected at this level of significance. This implies that government hospital nurses effectively balance their work responsibilities in the study area. However, for the statement 'Job stress in my mind disturbs family commitment', the p-value is 0.037, indicating statistical significance at the 5% level.

Similarly, the findings regarding work-life balance statements for private hospital nurses also demonstrate p-values of less than 0.01. As a result, the null hypothesis is rejected at the 1% level, suggesting that private hospital nurses successfully manage their work-life balance within their profession.

In summary, based on the results obtained through the one-sample t-test, it can be concluded that both government and private hospital nurses effectively balance their work commitments within their respective workplace environments. This underscores the importance of maintaining a harmonious balance between work and personal life for nurses in their professional roles.

WORK-FAMILY CONFLICT DESCRIPTIVE STATISTICS OF TIME FACTORS OF WORK-FAMILY CONFLICT OF NURSES

	Government				Private			
Time Factors	N	Mean	Mean Rank	N	Mean	Mean Rank		
Working hours allotted for my shift takes uptime I would like to spend with my family.	307	3.99	III	311	3.83	VI		
Compulsory overtime hinders me in balancingfamily life.	307	3.95	V	311	3.92	IV		
Dealing with more responsibilities in day shiftaffects my family workload.	307	3.72	VI	311	3.56	VII		
Working in Night shift disturbs my personal life.	307	3.98	IV	311	4.12	I		
I find it difficult for myself working alternatively in day and night shift.	307	3.19	VIII	311	3.46	VIII		
Attending emergency call duties affects my fam-ily responsibilities.	307	3.15	IX	311	3.08	IX		
Attending meetings after hospital duty hoursaffect my regular family work.	307	3.52	VII	311	3.87	V		
Traveling time to the hospital affects Quality time with my family.	307	4.04	II	311	4.06	III		
Training time interfere with the fulfillment of the needs of my family members.	307	4.22	I	311	4.09	II		

Source: Primary data

The provided table presents the descriptive statistics concerning time factors among nurses, distinguishing between those employed in government hospitals and those in private hospitals in Madurai city. Among government hospital nurses, the mean range of time factors falls between 3.15 and 4.22. Notably, all mean values for the time factors

statements surpass the average level of 2.50, indicating a significant management of time factors among these nurses. As a result, the study concludes that government hospital nurses effectively handle time-related aspects within their work environments. Conversely, among private hospital nurses, the mean range of time factors statements ranges from 3.08 to 4.12. Similar to government hospital nurses, all mean values for these time-related statements exceed the above-average level of 2.50. This suggests that private hospital nurses also adeptly manage time factors within their professional roles. Thus, based on the descriptive statistics findings, the study concludes that nurses in private hospitals in Madurai city effectively handle time-related challenges within their work-family dynamic.

WORK LOAD FACTORS DESCRIPTIVE STATISTICS OF WORK LOAD FACTORS OF WORK-FAMILY CONFLICT OF NURSES

	Govern	ıment		Private			
Work Load Factors	N	Mean	Mean	N	Mean	Mean Rank	
			Rank				
I cannot perform efficiently and effectively at	307	3.38	IV	311	3.55	III	
home because of the heavy workload in the job.							
Workload affects the active participation in festi-vals	307	3.68	III	311	3.44	IV	
and celebrations.							
The disproportion between the number of nurs-es and	307	3.98	II	311	3.87	I	
services labor makes me disappointed.							
Dealing with the patients in the Intensive Care Unit	307	3.10	VI	311	2.99	VI	
increases the mental stress.							
Non- medical and non - care tasks like frequentreport	307	4.08	I	311	3.78	II	
writing affects my interest in the job.							
Due to work-related duties, I have to often		3.25	V	311	3.39	V	
change my plans for personal life.							

Source: Primary data

The table above presents the descriptive statistics concerning workload factors contributing to Work-Family conflict among nurses employed in both government and private hospitals in Madurai city. Among government hospital nurses, the mean range of workload factors spans from 3.10 to 4.08. Notably, the most impactful statement regarding workload factors is "Non-medical and non-care tasks like frequent report writing affects my interest in the job," which ranked first with a mean score of 4.08. This is closely followed by the statement "Disproportion between the number of nurses and services labor, makes me disappointed," ranking second with a mean score of 3.98. Other significant workload factors include the impact of workload on active participation in festivals and celebrations (mean score: 3.68, ranked third), the hindrance to efficient performance at home due to heavy workload in the job (mean score: 3.38, ranked fourth), and the necessity to frequently alter personal plans due to work-related duties (mean score: 3.25, ranked fifth). The statement "Dealing with patients in the Intensive Care Unit increases mental stress" ranked sixth, with a mean score of 3.10.

The study reveals that the mean value of all workload factor statements among government hospital nurses exceeds three, indicating significant impact on these nurses within the study area. In contrast, among private hospital nurses, the descriptive statistics for workload factors range from 2.99 to 3.87. The most notable statement regarding workload factors is "Disproportion between the number of nurses and services labor makes me disappointed," ranking first with a mean score of 3.87. This is followed closely by the statement "Non-medical and non-care tasks like frequent report writing affects my interest in the job," which ranked second with a mean score of 3.78. The least significant workload factor statement is "Dealing with patients in the Intensive Care Unit increases mental stress," which ranked sixth with a mean score of 2.99. In summary, the descriptive statistics highlight the varying degrees of impact of workload factors on nurses working in government and private hospitals in Madurai city, underscoring the need for tailored interventions to address these challenges effectively.

5. CONCLUSION

The research article "Family-Work Life & Workload Analysis of Government & Private Hospital Nurses with Reference to Madurai District" presents a comprehensive examination of the challenges faced by nurses in balancing their professional responsibilities with their personal lives, specifically within the context of government and private hospitals in the Madurai district. One of the primary focuses of the study is the comparison between nurses working in government hospitals and those in private hospitals. Through rigorous data collection and analysis, the researchers have illuminated significant differences in the work-life balance and workload experienced by nurses in these two sectors. The findings reveal that nurses employed in government hospitals tend to encounter higher workloads compared to their

counterparts in private hospitals. This heightened workload may stem from various factors such as patient volume, resource constraints, and organizational structure. Government hospitals often serve larger populations with limited resources, leading to higher patient-to-nurse ratios and increased demands on nursing staff.

Moreover, the study highlights the intricate interplay between work and family life for nurses. Nurses, regardless of their workplace setting, are confronted with the challenge of juggling their professional commitments with familial responsibilities. However, the research suggests that nurses in government hospitals face additional hurdles in achieving a satisfactory work-life balance. The demanding nature of their work coupled with potential constraints on scheduling flexibility and support systems may exacerbate the struggle to reconcile work and family obligations. These findings hold significant implications for healthcare policymakers, administrators, and stakeholders. Addressing the disparities in work-life balance and workload between government and private hospital nurses is crucial for ensuring the well-being of healthcare professionals and, by extension, the quality of patient care. Implementing measures to alleviate excessive workloads, enhance support systems, and promote flexible work arrangements can contribute to fostering a healthier and more resilient nursing workforce. Furthermore, the research underscores the need for targeted interventions tailored to the specific challenges faced by nurses in government hospitals. This may involve investing in additional staffing resources, improving infrastructure and facilities, and implementing policies that prioritize nurses' well-being. Additionally, initiatives aimed at promoting work-life balance, such as offering childcare support, flexible scheduling options, and mental health services, can play a pivotal role in supporting nurses in managing their dual roles as healthcare providers and caregivers.

In conclusion, the research article provides valuable insights into the complex dynamics of nurses' professional and personal lives within the healthcare landscape of Madurai district. By identifying the challenges faced by nurses in government and private hospitals and proposing potential strategies for improvement, the study contributes to ongoing efforts to enhance the overall quality of healthcare delivery and ensure the vitality of the nursing profession.

CONFLICT OF INTERESTS

None.

ACKNOWLEDGMENTS

None.

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