

A STUDY ON WORK LIFE BALANCE OF NURSES IN THOOTHUKUDI DISTRICT

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INTRODUCTION

Life is short journey of self-discovery. It is a journey of choices and challenges that a human makes. The ups and downs that occur, as a consequence of these choices and challenges, have to be tackled by man. The decision he/she takes to counteract these choices and challenges, determines his or her success in life.

Work Life Balance is a broad concept including proper prioritizing between 'Works' on one hand and 'life' on the other. In the broader sense, the terms include "life style balance". Globalization, downsizing and flexible work patterns have left many employees with a feeling of increasing work demands and pressure, and a daily struggle to manage their work and family responsibilities.

Unbalanced work life relationship can result in reduced health and low performance outcomes for individuals, families and organizations. Work Life Balance is a concept that supports the efforts of employees to split their time and energy between work and the other important aspects of their lives. It refers to the effective management of multiple responsibilities at work, at home and in the other aspects of life. Work life balance is a daily effort to make time for family, friends, community participation, spirituality, personal growth, self-care and other personal activities, in addition to the demands of the workplace.

Indian families are undergoing rapid changes due to the increased pace of urbanization & modernization. All classes of Indian women have entered into paid occupation. At the present time, Indian women exposure to educational opportunities is substantially increasing, especially in the urban setting. This has opened new vistas, increased awareness and raised aspirations of personal growth. Women are required to perform an accumulation of disparate roles simultaneously each one with its unique pressure. Multiple role-playing has been found to have both positive and negative effects on the mental health and physical health of professional women. In certain instances, women with multiple role reported better physical and psychological health than women with less role involvement.

A working woman has two roles to play namely professional and personal role. This has a significant role in shaping the performance of an individual especially in Indian context. Role clash is also caused by the reverse relation that is personal level stress affecting job performance. Work life balance is a state where an individual manages real or potential conflict between different demands on their time and energy in a way that satisfies their needs for well-being and self-fulfillment.

A person who enjoys the work and derives satisfaction alone can perform well and produce more. The achievement of tasks and goals leads for job satisfaction. The job satisfaction, achievement of goals and objectives, fulfillment of personal needs leads to well-being and happiness, which is the basic meaning of personal life.

The Indian healthcare industry is one of the biggest and fastest developing sectors of world. Healthcare sector can form a huge part of nation's economy. Indian health care sector is growing with a wide range of needs and expectations. The phenomenal changes in the caption of healthcare sector in India pave the way for the source of employment in the positive proportion. Due to privatization in healthcare sector, hospitals are confronting great competition. They are confronted with variety of challenges posed by the business environment internally and externally. In spite of having such challenges, hospitals are competing to achieve their goals effectively and efficiently. Hospital employees are also affected by workforce changes due to technological advancement and high rate of competition in this sector. Changes in the work style, work culture, family needs, work demands are rapidly taking place which eventually increased the population of dual earner couples, nuclear family system and eldercare responsibilities. These increased changes can have adverse impact on employees' as well as organizational performance. Increased pressure at workplace negatively affects the work life balance of the employees. Nurses occupy the largest employing group in health care industry. They are key players in meeting the patients' needs. The job nature of a nurse is basically they have to work in shifts, work for longer shifts with few breaks or without breaks. So they are struggling to achieve work life balance. They have to work for varied people even for mentally retarded, criminals and stressed persons, etc. Besides nurses are facing problems from other health care workers. Just like bullying, harassment, continuous unreasonable demands, improper or misleading communications, office politics and conflict among staff, etc., creates a heavy pressure on a nursing professional and it may affect family and work environment. Stress is termed to one of the major factors that affects the work life balance and leads to physical and mental disturbance there by affecting the productivity of the employees. The well known American author and motivational speaker ZigZagler said that, "I believe that being successful means having a balance of success stories across the many areas of your life. You can't truly be considered successful in your business life, if your home life is in shambles". This study titled is "Work Life Balance of Nurses in Thoothukudi District" marginally covered this viewpoint, by studying the balance between the work and life of a selected set of nurses.

STATEMENT OF THE PROBLEM

Traditionally the role of women was confined to cooking, cleaning, raising children, etc. They were looked upon as care giver or as home keeper and were denied access outside home. But now the story is different. They have an important role to play even outside the home. With the potential education and employment opportunities today, most homes became dual earners because of increase in expenses and necessities. The expansion of higher education has also enhanced job prospects for women and there is a shift in the role models from stay-at-home mothers to successful professional women. Women achieved tremendous progress in every walk of life and made a mark where ever they are. But her role at home has not changed much. The wife still cooks, does household work, takes care of the family members, family commitments and runs the house. With increase in pressure at work place and important demands at home, the work life balance is at stake.

Healthcare sector offer employment opportunities to women in various working avenues. They have chosen their career as per their wish and eligibility. One of the important among them is nursing professional. Health care industry is fully service oriented. In the competitive world, the demand of health care industry is also increased because of huge population and change of life style of the people. Still the health care sector is in growing phase with certain limitations, which creates a heavy pressure on nursing professionals and it may affect their work life. That pressure leads for extended working hours, compulsory overtime, chances of getting deceased, increased stress level of the nurses at their job and lead to job dissatisfaction which ultimately end up with higher attrition rate and low morale. Work life balance is the imperative instrument in the modern working life of any individual irrespective of their occupation. It is normally a challenging exercise among the occupants to manage work situations, family circumstances and the intervention of these two at different conditions. In addition to that the influence of predictable and extraneous factors relevance to work life balance and imbalances are countless. The healthcare sector carries heavy responsibility and accountability make women to encounter work life balance related issues. In this context, it would be more relevant to make an attempt to study the problem related to work life balance of nurses which may help the health care sector to drastically reduce the attrition rate and to provide high level of job satisfaction to their nurse.

SCOPE OF THE STUDY

This study emphasized on the work life balance of Nurse in Private Hospital at Thoothukudi District. The researcher has made a sincere attempt to determine the work life balance of nurses. The study is expected to identify the level of WLB of nursing professionals in Thoothukudi District. This research focused on analyzing the factors determining the work life balance. The study covered the working environment, employment of spouse, relationship with colleagues, working hours, and stress because of work &family role, level of job satisfaction, motivations and other issues related to work life balance of the respondents. The study also covers the social/family circumstances of the nurse, i.e., type of family, monthly income and etc.

OBJECTIVES OF THE STUDY

1. To study the socio-economic profiles and working conditions of the respondents.
2. To analyze the work life balance of the sample respondents.
3. To suggest the specific recommendations according to the findings of the study for the betterment of maintaining work life balance.

METHODOLOGY

The present study is based on both primary data and secondary data. The primary data are collected through the questionnaire from the nurse working in private hospital at Thoothukudi district. Before undertaking a final survey, a pre-test is conducted. During the pre- test, it was found some changes needed to be made like re-

sequencing questions, addition, and deletion of questions, simplifying some questions and reducing the length of the questions. All these changes were incorporated in the questionnaire. The pre-test is also helped to identify the potential practical problem in data collection.

The secondary data will be collected from published thesis, records, books, journals, websites, research papers, other related projects and etc.

SAMPLING DESIGN OF THE STUDY

The study area is Thoothukudi District. The researcher has collected information from nurse those who are worked in private hospital at Thoothukudi District. There are 62 private hospitals functioning in Thoothukudi District. About 1498 nurses are working in this private hospital. Since the population is more, the researcher decided to use sampling technique.

For the selection of respondents, the researcher has adopted Proportionate Stratified Random Sampling Technique. The study area is classifying into Taluk. It consists of eight taluk namely Ettayapuram, Kovilpatti, Sathankulam, Srivaikundam, Thoothukudi, Tiruchendur, Vilathikulam and Ottapidaram. In ottapidaramtaluk, there is no private hospital. The researcher has used the following formula to calculate the sample size.

$$n = \frac{N}{1 + N(e)^2}$$

Where,

n = Sample Size, N = Population Size, e = Level of Precision (0.05)

Calculation of Sample Size

$$= \frac{1498}{1 + 1498(0.05)^2}$$

$$n = 400$$

The researcher has collected the data from 400 respondents in Thoothukudi District. So, the researcher has to proportionately elect 26.07 per cent of the respondents from each taluk.

The size of the sample is shows in the following table 1.1

**TABLE 1.1
TALUK WISE DISTRIBUTION OF PRIVATE HOSPITAL IN THOOTHUKUDI DISTRICT**

S. No.	Name of the Taluk	No. of Hospital	No. of Nurses (Population)	Sample Respondents (26.70%)
1.	Ettayapuram	4	61	16
2.	Kovilpatti	19	376	100
3.	Sathankulam	1	20	5
4.	Srivaikundam	5	81	22
5.	Thoothukudi	21	725	194
6.	Tiruchendur	11	225	60
7.	Vilathikulam	1	10	3
	Total	62	1498	400

Source: Birth & Death – New Common Software-Participate of Government and Private Institution

DISCRIMINANT ANALYSIS

Discriminant analysis is used to predict group membership. This technique is used to classify objects into one of the alternative groups on the basis of a set of predictor variables. The dependent variable in discriminant analysis is categorical and on a nominal scale, whereas the independent or predictor variable are either interval or ratio scale in nature. Discriminant analysis is used to identify the variables / statements that are discriminating and on which people with diverse views will respond differently. The mathematical form of the discriminant analysis model is:

$$Y=b_0+b_1X_1+b_2X_2+b_3X_3+.....+b_kX_k$$

Where, Y = Dependent variable, b_s = Coefficients of Independent variable, X_s = Predictor or Independent variable

The method of estimating b_s based on the principle of ratio ‘between group sum of squares’ to ‘within group sum of squares’ be maximized. This will make the groups differ as much as possible on the values of the discriminant function. After having estimated the model, the b_s coefficients are used to calculate Y, the discriminant score by substituting the values of X_s in the estimated discriminant model. The relative importance of the independent variables could be determined from the standardized discriminant function co-efficient and the structure matrix. The difference between the standardized and unstandardised discriminant function is that the unstandardised discriminant function has a constant term, whereas in the standardized discriminant function, there is no constant term. Factor values obtained from Factor analysis have been used for discriminant analysis. By using SPSS, the discriminant analysis has been applied.

WILKS’ LAMBDA TEST

In discriminant analysis, the researcher should first analyze the Wilks’ Lambda test for validity of the model. Wilks’ Lambda test is a test, which identifies whether the variables contribute significantly to discriminant function, if the Wilks’ Lambda value is closer to zero the model is more contributed by the variable. The test also explains the group membership through Chi-Square test. If the P-value is less than 0.05, it concludes that the corresponding function explains the group membership well. Table 1.2 shows the Chi-Square and Wilks’ Lambda values.

TABLE 1.2 - WILKS’ LAMBDA

<i>Test of Function(s)</i>	<i>Wilks’ Lambda</i>	<i>Chi-square</i>	<i>Df</i>	<i>Sig.</i>
1	.516	259.022	14	.000

Source: Computed Data

Table 1.2 shows the significance of the discriminant model. The value of Wilks’ Lambda is 0.516 that is, 51.6 per cent of the variables not explained by the group differences. The Wilks’ Lambda takes a value between 0 and 1 and lower the value of Wilks’ lambda, the higher is the significance of the discriminant function. The statistical test of significance for Wilks’ lambda is carried out with the Chi-Squared transformed statistic, which in our factor is

259.022 with 14 degrees of freedom (degrees of freedom equals the number of predictor variables) and a P value is 0.000 which is less than the cutoff point 0.05. Therefore, the researcher concludes that there is a relationship between dependent and independent variables. Hence, the researcher further analyses the other tests for effectiveness of the model.

TABLE 1.3 - CLASSIFICATION RESULTS^{a,b,c}

		<i>Level of Work Life Balance</i>	<i>Predicted Group Membership</i>		<i>Total</i>
Original	Count	Imbalanced	298	32	330
		Balanced	8	62	70
	%	Imbalanced	90.3	9.7	100.0
		Balanced	11.4	88.6	100.0

Source: Computed Data.

a. 90% per cent of original grouped factors correctly classified.

Table of Eigen value is often cited in Discriminant function analysis. The Eigen values describe the effectiveness of discriminant function. Larger Eigen values indicate that the discriminant function is more useful in distinguishing the groups and canonical correlation indicates a function that discriminates well. The canonical correlation is the multiple correlations between the predictor and the discriminant function. With only one function it provides an index of overall model fit which is interpreted as being the proportion of variance explained (R^2). The Eigen values are presented in the Table 1.4.

TABLE 1.4 - EIGEN VALUES

<i>Function</i>	<i>Eigen Value</i>	<i>% of variance</i>	<i>Cumulative %</i>	<i>Canonical Correlation</i>
1	.940	100.0	100.0	.706

Source: Computed data

a. First 1 canonical discriminant functions were used in the analysis.

The last column of Table 1.4 indicates canonical correlation, which is the simple correlation coefficient between the discriminant score and their corresponding group membership (Unbalanced/Balanced). An Eigen Value indicates the proportion of variance explained. A large Eigen value is associated with a strong function. A high correlation indicates a function that discriminates well. The present correlation is 0.706, the square of the canonical correlation is $(0.706)^2 = 0.508$, which means 50.8 per cent of the variance in the discriminating model between a prospective group balanced/ unbalanced is due to the changes in the 14 predictor variables, namely long working hours, compulsory over time, weekend work, night shift work, attitude of supervisor, availing leave, relationship with colleagues, work environment, home duties, family responsibilities, care for the family members, relationship with relatives and friends/neighbors, health conditions after duty and attitude of family members.

CANONICAL DISCRIMINANT FUNCTION CO-EFFICIENT

These unstandardised coefficients (b) are used to create the discriminant function (equation). It operates just like a regression equation. The discriminant function coefficient b or standardized form beta both indicate the partial contribution of each variable to the discriminate function controlling all other variables in the equation. Table 1.5 presents the unstandardized canonical co-efficient of the discriminant model. The purpose of unstandardized canonical discriminant analysis is to found out the best co-efficient estimation to maximize the difference in mean discriminant score between groups.

TABLE 1.5
UNSTANDARDIZED CANONICAL DISCRIMINANT FUNCTION CO-EFFICIENT

S. No.	Factors	Function
		I
1.	Long working hours	.082
2.	Compulsory over time	.553
3.	Weekend work	-.609
4.	Night shift work	.139
5.	Attitude of supervisor	.225
6.	Availing leave	.235
7.	Relationship with colleagues	.271
8.	Work environment	.221
9.	Home duties	.341
10.	Family responsibilities	.274
11.	Care for the family members	-.032
12.	Relationship with relatives and friends / neighbours	.328
13.	Health conditions after duty	.303
14.	Attitude of family members	.718
	Constant	-11.930

Source: Computed Data

Each ratio's discriminant score would be computed by entering the raw data for each of the variable in the equation. The equation of discriminant function is

$$D = -11.930 + (\text{Long working hours} \times .082) + (\text{Compulsory over time} \times .553) + (\text{Weekend work} \times -.609) + (\text{Night shift work} \times .139) + (\text{Attitude of supervisor} \times .225) + (\text{Availing leave} \times .225) + (\text{Relationship with Colleagues} \times .271) + (\text{Work environment} \times .221) + (\text{Home duties} \times .341) + (\text{Family responsibilities} \times .274) + (\text{Care for the family members} \times -.032) + (\text{Relationship with relatives and friends / neighbours} \times .328) + (\text{Health conditions after duty} \times .303) + (\text{Attitude of family members} \times .718).$$

The standard canonical discriminant co-efficient can be used to rank the importance of variables in the analysis. A high standardized discriminant function co-efficient describes that the grouped variable differ a lot among the variables in the group.

TABLE 1.6
STANDARDIZED CANONICAL DISCRIMINANT FUNCTION CO-EFFICIENT

S. No.	Factors	Function
		I
1.	Long working hours	.068
2.	Compulsory over time	.436

3.	Weekend work	-.378
4.	Night shift work	.224
5.	Attitude of supervisor	.166
6.	Availing leave	.215
7.	Relationship with colleagues	.212
8.	Work environment	.150
9.	Home duties	.299
10.	Family responsibilities	.216
11.	Care for the family members	-.029
12.	Relationship with relatives and friends / neighbours	.332
13.	Health conditions after duty	.289
14.	Attitude of family members	.574

Source: Computed Data

Table 1.6 provides an index of the importance of each predictor through standardized regression coefficient. It indicates that factor 14- Attitude of family members, followed by factor 2 – Compulsory over time and factor 12 – Relationship with relatives and friends / neighbours are the three variables with large coefficients stand out as those that strongly predict allocation to the highly balanced group and unbalanced groups. All the remaining 7 variables are less successful as predictors.

The discriminant analysis helps the researcher to compute the mean discriminant score of the highly balanced and imbalanced employees separately, using the estimated discriminant function that has been yielded by discriminant analysis score for each respondent. If the score is higher than zero, then the respondents are treated as balanced group. If it is less than zero they are grouped under imbalanced group. Table 1.7 presents the mean discriminant score of each group.

TABLE 1.7 - FUNCTIONS AT GROUP CENTROIDS

<i>S. No.</i>	<i>Satisfaction of the Employees</i>	<i>Function</i>
		<i>I</i>
1.	Imbalanced	-.445
2.	Balanced	2.099

Source: Computed Data

Table 1.7 shows the mean discriminant scores of the balanced respondents and imbalanced respondents groups separately. The value of function at group centroids can be used for designing a decision rule to classify the employees into balanced and imbalanced. If the variables whose discriminant score is greater than zero would be classified as a balanced group, whereas the one whose score is less than zero would be classified as imbalanced group. This work out to be 2.099 for a balanced Group and -.445 for imbalanced group. This is presented in the above Table 1.7.

If the size of the sample for the two groups is the same while estimating the model, the cut-off score used for classification in to the balanced and imbalanced classification can be obtained by taking the average of the two – group centroid.

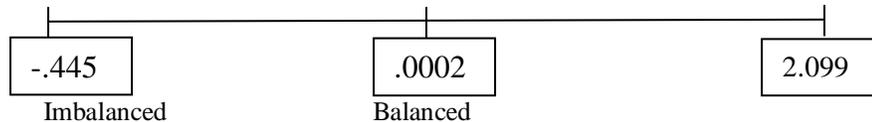
The average works out to be

$$= \frac{(n1)(Imbalanced) + (n1)(Balanced)}{n1 + n2}$$

$$= \frac{(70) \times (2.099) + (330) \times (-.445)}{70 + 330}$$

$$= 0.002$$

The centroids are the extreme point to formulate the decision rule and are represented below



The Discriminant score for each of the respondents has been computed and, as already mentioned, the discriminant score is greater than 0.0002, the individual is classified as balanced group and the discriminant score is less than 0.0002, the individual is classified as imbalanced group.

SUGGESTIONS

- Application of discriminant analysis reveals that the factors weekend work (-.378) care for the family members (-.029) got negative score, hence the hospital and family should try to consider these variables for betterment of work life balance.
- The hospital management should arrange picnics and tours for employees, which not only recreate or refresh them but also helps in building inter-personal relation among the entire staff or employees.
- The hospitals are advised to establish a work life balance cell at their office in order to analyse the level of their employees’ expectations and perception on the work life balance concept. Then only they can ensure the well-being to their employees and try to maximize the employees’ satisfaction. In order to increase the productivity of the employees, the hospital management is advised to focus the main key dimensions of work life balance for facing high competition in the healthcare industry. Then only the employers are retained their talented employees.
- Generally, the working women expect motivation and support from their family members. So the family members should try to give motivation and moral support to the working women of their family.

CONCLUSION

Generally, the employees are the main pillars of any organization. If they are fully satisfied they only they perform their job whole hearty. In healthcare industry, staffs are having a direct and close relationship with people. The people are also having high confidence about the services provided by the hospital. So to protect the confidence of the people the staffs are served full hearted services to patients. If their working conditions are encouraging, they in turn, would provide good services to the people and the nation at large. This study concludes that the major factors are stress, workload, working hours, night shift work, job satisfaction, family support and hospital support that may

cause imbalance in the personal and professional life of the respondents. Out of which weekend work, long working hours, work environment, attitude of supervisor, toughness of night shift work and care of family members are the most important predictors for affecting work life balance of the respondents and organizational wellness.

Further the study also identifies the demographic variables such as age, marital status, family monthly income and place of residence were affect the work life balance of the respondents. Whereas working conditions such as designation of the nurse, long working hours and job satisfaction are affect the work life balance of the respondents. The source of stress is also affect the work life balance of the respondents. So, the HR department should try to design the work life balance policies after analyzing the employees' perception and expectations for achieving work life balance.

Before framing the work life balance policies, the organization must have a clear idea about the employees work life balance. The organization should also assist employees to learn how to achieve and maintain suitable work life balance. It is hoped that the research will form a stepping stone in the process and provide a basis for improving the work life balance amongst the nurses working in private hospital from Thoothukudi District.

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