

“Impact of work-life balance on job satisfaction of women doctors”

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Impact of work-life balance on job satisfaction of women doctors

Abstract

In the competitive era of today, women have to battle hard to establish their individuality in the society, as well as in professional life. Work-life balance is the major problem in the life of working women. The study covers work-life balance of women doctors of private hospitals of Jharkhand. This study helps to understand the impact of work-life balance on job satisfaction. Regression analysis and ANOVA Test have been used to test the relationship between the variables. The study has found that work-life balance has positive impact on job satisfaction.

Keywords: women doctors, hospital, work-life balance, job satisfaction.

JEL Classification: L29, L60, M12.

Introduction

Work-life balance is a concept, which includes proper prioritizing the task between “Work” and “Life”. It requires attainment of equilibrium between professional work and personal work. The issue of work-life balance was earlier raised by the working women during the 1960s and 1970s in the UK. During the mid 1980s, the issue was also taken into consideration by the US government. In 1990, US confirmed the recognition of work-life balance as a main human resource management issue (Bird, 2006). Job satisfaction is a component of life satisfaction that can only happen if employees can accomplish a stability in their work and family life.

Although, women have achieved great success in their careers, but still their responsibility towards their family has not been reduced. They have to deal with their family responsibilities along with their official work. Careers in hospitals historically demanded a selfless emphasis on caring for one's patients. In case of any urgency, women doctors have to attend to their patients under any situations leaving behind their child and dependents at home. Challenges faced by female doctors are in accord with the challenges faced by women in any other profession. They face biasness, lack of support, glass ceiling, etc. One of the most prominent challenges which every woman doctor has to face in their life is work-life balance. It is very tough for the women doctors to synchronize a balance between family and this rigid type of job (Nadeem and Abbas, 2009). Research has found that significant number of women doctors were dissatisfied with their work-life balance because of over burdened night shift, less time with the family (Kumari et al., 2015). As a result, such pressure affects their health, thereby leading to absenteeism from hospitals.

Even though work-life balance has become an emerging issue in hospitals, it is affecting the efficiency of women doctors. Hence, the purpose of our study is to understand the difference between the work-life balance of women doctors of different age groups. Current study aims to find the impact of coping strategies on work-life balance. Moreover, it also tries to understand the impact of work-life balance on job satisfaction, because it is assumed that a successful work-life balance in hospitals will make woman doctors more committed and highly productive that will lead to job satisfaction. Hence, the aim of our research is to provide an empirical evidence to meet the objectives.

1. Literature review

Greenhaus and colleagues (2003) defined work-life balance as the “extent to which an individual is equally engaged in and equally satisfied with his or her work role and family role”. Work-life balance consists of three components: time balance, psychological involvement balance, satisfaction balance. Time balance refers to equal time being given to both work and family roles; involvement balance refers to equal levels of psychological involvement in both work and family roles; and finally, satisfaction balance refers to equal levels of satisfaction in both work and family roles. All these components should be considered when studying work-life balance. Evidence from the case studies of Nigeria showed that the task of combining multiple roles was very difficult for Nigerian female doctors. It has been identified that, when women doctors found the occupational workload of the medical profession, they became fatigued and drained and were unable to perform their family responsibilities at the closing of their daily shifts (Adisa, T.A., Mordi, C. & Mordi, T., 2014). Akanji, B. (2012) contributed scholarly knowledge in areas of holistic factors that can be found to influence people's perception of work-life balance practices and various coping strategies which can serve to buffer imbalances encountered. Another research study was done on Chinese women employees in administrative roles at Auckland University of Technology, New Zealand

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explored the work-life balance experiences of Chinese women in administrative roles. Its aim was to contribute to the body of knowledge on work-life balance issues and to investigate Chinese women's coping strategies for integrating work and non-work lives. It was found that coping strategies helped women employees to manage the work and personal life (Yan Ma, 2008).

The concept of job satisfaction has been developed in many ways by many different researchers and practitioners. One of the most widely used definitions in organizational research is that job satisfaction is defined as "the pleasurable emotional state resulting from the appraisal of one's job as achieving or facilitating the achievement of one's job values" (Locke, 1969). All these variables like appreciation, communication, co-workers, fringe benefits, job conditions, nature of the work, organization, personal growth, policies and procedures, promotion opportunities, recognition, security, supervision affect job satisfaction. These all are categorized in two factors like organizational and personal.

Laxshmi and Gopinath (2013) studied the effect of work-life balance on performance of women employees. They identified the variables that affect work-life balance. It was found that women who had low work and family-related issues were highly able to achieve work-life balance than those who had high rate of these issues. Nadeem & Abbas (2009) found negative relationship between work-life conflict and job satisfaction. Akram & Hassaan (2013) examined the impact of work-life conflict on job satisfaction among doctors in the cultural context of Pakistan. The findings exposed that there is a significant negative relationship between both types of conflict (work to family interference and family to work interference) and job satisfaction. According to Boles, Howard and Donofrio (2001), when work-family conflict increases, the level of job satisfaction decreases.

Ervin, M.S. (2012) conducted a comparative study on work-life balance and job satisfaction in Intercollegiate Athletic Graduate Assistants and Supervisors. The objective of this study was to find out the differences between graduate assistants' and their supervisors. There was found a statistically significant difference between these two groups. Supervisor had high levels of job satisfaction, as compared to graduate assistant. Another study attempted to identify the work-life balance among women employees and various factors that contribute to work-life imbalance in education and banking sector. It was found that there was a significant difference in work-life balance among women employees. Finding of study done in banking sector has revealed that women working in private banks

experienced more work-life imbalance, as compared to working women in public sector (Mehta, S., 2012).

Another study found the impact of work-life balance of women employees on their absenteeism and turnover in Bangalore. Results indicated that their level of impact of work-life balance differed based upon absenteeism and turnover of employees (Thriveni, K., 2012). Mukururi, N.J. & Ngari, M.J. (2014) analyzed the relationship between work-life balance policies and job satisfaction. They found positive relationship between work-life balance policies and job satisfaction. Santhi and Sundar (2012) conducted a study on IT women employees where it was found that 55% women employees were highly satisfied with the current work-life balance initiatives, and rest of 45% employees was moderately satisfied and dissatisfied. This study has suggested that management of IT industry should find out the reason of dissatisfaction and know the policies which need to be implemented. Kaman et al. (2013) focused on how flexible working options, leave policies and employee assistance programs affect employee job performance at ECO bank. It was found that work-life balance practices are positively correlated with employee job performance.

Kamran, Jafar & Ali (2012) discussed the nature of work and family policies in Pakistan's environment, particularly in Education Sector. There was found a positive moderate relationship between job satisfaction and work-life balance which suggested that universities should focus their efforts on formulating and implementing work-life balance policies. Aryasri, A.R, Babu, S.S. (2004) analyzed the impact of flexi time on retention. There was found positive correlation and significant association between flexi time and employee retention. It was concluded that, when the average flexi time increases, the average employee retention scores also increases proportionately. According to Bachmann (2000), better work arrangement helped the employees to obtain a better blend between work and non-work lives and helped organization by motivating, recruiting and retaining employees within the organization. Another research described the impact of family-friendly policies on job satisfaction. Finding was that alternative work schedule and compressed work-week are positively related to job satisfaction among bank employees (Muhammad, B., Muhammad, Z., Irfan, R., 2010).

Rezene, F. (2015) study is aimed at exploring the impact of work-life conflict on job satisfaction in selected Banks in Addis Ababa. The finding of this study was that work-life conflict was negatively related to job satisfaction. Hashmi, A., Malik, M. & Hussain (2016) studied on literature review to summarize the research findings among developed

and developing countries, as well as Pakistan, related to different work-life balance factors and their impact on job satisfaction. The review concluded that there is a need for reinforcing the relevant human resources policies and improving working conditions of pharmacists in Pakistan. Marta Mas-Machuca, Jasmina Berbegal-Mirabent and Ines Alegre (2016) also explored the relationship between work-life balance, organizational pride and job satisfaction. It was found that work-life balance is positively related with organizational pride and job satisfaction.

2. Research gap

There have been studies which report that, when male doctors spent long hours at work or travelling to meetings, their wives were home to take care for the children. As women entered in the medical field, the tensions between work and family became more salient (Verlander, G., 2004). In trying to balance between personal and professional responsibilities, female doctors have to confront difficult situations in their life. Therefore, current study makes an attempt to understand the work-life balance level and job satisfaction of women doctors in Indian context. As literature shows that various researches have been done on this topic in other countries, but few research was done regarding women doctors of Indian context, hence, our study tries to expand existing knowledge.

Hypotheses:

For this study, certain hypotheses was formulated:

1. H_0 : There is no difference between the work-life balance of women doctors of different age groups.
 H_1 : There is a difference between the work-life balance of women doctors of different age groups.
2. H_0 : There is no impact of coping strategies on work-life balance of women doctors.
 H_1 : There is an impact of coping strategies on work-life balance of women doctors.
3. H_0 : There is no positive impact of work-life balance on job satisfaction.
 H_1 : There is positive impact of work-life balance on job satisfaction.

3. Research methodology

The sample of the research consists of women doctors working in the Private Hospitals of Jharkhand. In the research, convenience sampling method was used. In order to collect data, we adopted the questionnaire method. A total of 200 questionnaires were distributed among the married and unmarried women doctors, 130 questionnaires backed with the response rate of 65%. Incomplete questionnaires have been excluded from the study. Finally, the responses of 115 women employees were taken for the data analysis purpose, hence, the valid response rate was 57.5%. Secondary

data were also used for references, books, magazines and journals, etc. The questionnaire comprised of two sections. The first section includes questions about participants' demographic characteristics, while second section includes work-life balance, coping strategies and job satisfaction. Work-life balance was measured with five items, coping strategies were measured with eight items and job satisfaction included five items. These all items are scored on a five point rating scale ranging from 1 to 5 (strongly disagree to strongly agree). Finally, respondents were asked to indicate their response on this scale. On the basis of collected data, Regression and ANOVA have been used to test the proposed hypotheses.

3.1. Demographic profile.

Table 1. Demographic profile of the respondents

| Demographic variable | No of respondents | Percentage |
|----------------------|-------------------|------------|
| Marital status | | |
| Married | 83 | 72.1 |
| Unmarried | 32 | 27.8 |
| Age | | |
| 21-30 | 17 | 14.7 |
| 31-40 | 31 | 26.9 |
| 41-50 | 45 | 39.1 |
| 50 and above | 22 | 19.1 |
| Experience of work | | |
| 0-10 | 16 | 13.9 |
| 10-20 | 34 | 29.5 |
| 20-30 | 40 | 34.8 |
| 30 and above | 25 | 21.7 |
| Monthly Income | | |
| Below 50000 | 22 | 19.1 |
| 50001-70000 | 33 | 28.6 |
| 70001-90000 | 45 | 39.1 |
| Above 90001 | 15 | 13.0 |

Table 1 shows that all study participants were female, approximately 72.1% women doctors were married and rest 27.8% were unmarried. Out of 115 respondents, 14.7% were in the age group of 21-30, 26.9% were in the age group of 31-40, 39.1% were in the age group of 41-50 and 19.1% were in the age group of 51-60. About 13.9% of the respondents had less than 10 years of experience, while 29.5% of doctors had 10-20 years of work experience, only 39.1% had 20-30 years of experience and last 19.1% had 30-40 years of experience. 19.1% of respondents having income below 50000, 28.6% of respondents having between 50001-70000, 39.1% having between 70001-90000, and only 13% of respondent having above 75000.

3.2. Reliability analysis. Reliability determines the consistency of the scale. Cronbach's Alpha shows total reliability of the question under the factor. When the Cronbach Alpha value is 0.70 and higher, it means that the scale is reliable, but if there are

fewer questions, the limit is accepted as 0.60 and higher (Sipahi et al., 2006). The Alpha value for each scale is more than 0.60 which can be said to be a good reliability of the instrument.

Table 2. Cronbach's Alpha value

| Parameters | No. of items | Cronbach's Alpha |
|-------------------|--------------|------------------|
| Work-life balance | 5 | 0.723 |
| Coping strategies | 8 | 0.805 |
| Job satisfaction | 5 | 0.795 |

3.3. Result and analysis. ANOVA has been used to test the hypothesis 1. Table 4 shows that, since the

significance p -value is less than 0.05, hence, null hypothesis rejected, and alternative hypothesis 1 H_1 gets accepted. Thus, it can be said that there is a significant difference in the work-life balance of women doctors of different age groups. As Table 3 shows that the age group 21-30 has lowest mean value (3.18) amongst all the age groups, it means that women in this age group face less work-life balance, as compared to other groups. The mean value of the rest of three age groups is 3.31, 3.65 and 3.82, respectively, it means work-life balance increases with the increase in age group.

Table 3. Descriptive statistics

| | N | Mean | Std. deviation | Std. error | 95% confidence interval for mean | | Minimum | Maximum |
|-------|-----|------|----------------|------------|----------------------------------|-------------|---------|---------|
| | | | | | Lower bound | Upper bound | | |
| 21-30 | 17 | 2.86 | 0.640 | 0.136 | 2.58 | 3.15 | 3 | 5 |
| 31-40 | 31 | 3.31 | 0.949 | 0.142 | 3.30 | 3.60 | 2 | 5 |
| 41-50 | 45 | 3.65 | 0.950 | 0.171 | 3.03 | 3.99 | 2 | 5 |
| 51-60 | 22 | 3.82 | 0.809 | 0.196 | 3.41 | 4.24 | 2 | 4 |
| Total | 115 | 3.39 | 0.924 | 0.086 | 3.22 | 3.56 | 2 | 5 |

Table 4. ANOVA

| Work-life balance | Sum of squares | Df | Mean square | F | Sig. |
|-------------------|----------------|-----|-------------|-------|-------|
| Between groups | 11.589 | 3 | 3.863 | 4.997 | 0.003 |
| Within groups | 85.803 | 111 | 0.773 | | |
| Total | 97.391 | 114 | | | |

A regression analysis has been used to test the hypothesis 2 whether coping strategies have any impact on work-life balance or not. Table 5 shows that 53.9 per cent of the variance in this relationship was explained by the independent variable that is coping strategies. The results of regression on Table 5 show that independent variable (coping strategies) has significant positive impact on dependent variable (work-life balance) signified by the coefficient of Beta value 0.734 and T-value 1.234 significant at $p < 0.05$. Hence, hypothesis 2 H_1 is accepted. It shows that there is an impact of coping strategies on work-life balance.

Table 5. Regression analysis

| Model | B | T-value | Sig. |
|-------------------------|---------|---------|-------|
| Coping strategies | 0.734 | 1.232 | 0.223 |
| F | 132.369 | | |
| R ² | 0.539 | | |
| Adjusted R ² | 0.534 | | |
| Sig. | 0.000 | | |

*Significant at $p < .05$, dependent variable – work-life balance.

Table 6. Descriptive statistics for coping strategies

| Variables | N | Mean | Standard deviation |
|---|-----|------|--------------------|
| Avoid doing official work at home and vice versa | 115 | 4.35 | 0.798 |
| Employ a domestic helper to fulfill the home responsibilities | 115 | 4.09 | 0.909 |

| | | | |
|--|-----|------|-------|
| Manage time through task prioritization | 115 | 3.56 | 0.965 |
| Seek support from family member | 115 | 3.35 | 1.548 |
| I try to hire a tutor for my child's homework | 115 | 3.19 | 1.616 |
| Seek family-friendly policies from employer | 115 | 3.00 | 1.501 |
| Share or convince employer regarding family responsibilities | 115 | 2.35 | 1.425 |
| Avail leave for family tour | 115 | 2.31 | 1.534 |

Table 7. Regression analysis

| Model | B | T-value | Sig. |
|-------------------------|--------|---------|-------|
| Work-life balance | 0.344 | 3.896 | 0.000 |
| F | 15.181 | | |
| R ² | 0.118 | | |
| Adjusted R ² | 0.111 | | |
| Sig. | 0.000 | | |

*Significant at $p < .05$, dependent variable – job satisfaction.

Table 7 explains the relationship between work-life balance and job satisfaction. It shows that there are positive and significant relationships between work-life balance and job satisfaction ($F = 15.181$, $p < 0.05$). The independent variable (work-life balance) accounted for 11.1% ($R^2 = 0.111$) of variance in dependent variable (job satisfaction). As the overall significance p -value is less than .05 ($p < 0.05$), hence, it supports the hypothesis 3 H_1 , that is, work-life balance has positive impact on job satisfaction.

4. Discussion

Current study found that there is a significant difference in work-life balance of various age groups of women doctors. When women enter the medical field and start working as doctors, they face multiple responsibilities at their home like child care, taking care of elders, cooking, washing etc. Simultaneously,

they have to take care of their patients. Hence, their responsibilities increase. As women doctors' age increases, their responsibilities towards their family reduce. Hence, their work and family is much more balanced as they get older, because they learn to deal with the conflict by adopting coping strategies. Here, it is evident that coping strategies have positive impact on work-life balance. It implies that coping strategies adopted by women doctors helped them to cope up with the conflict and led to maintain a balance between work and personal life.

Further, this study also endeavors to understand the impact of work-life balance on job satisfaction. The result shows positive relationship between work-life balance and job satisfaction. Various studies found similar results. Ikram & Anwar (2009) revealed that employees working in private sector organizations have more work-life balance and are more satisfied with their jobs, as compared to those employees working in public sector organizations. Saeed, K. & Farooqi, A. (2014) found a significant moderate positive relationship between work-life balance and job satisfaction among university teachers which means that increase in work-life balance will result in increase in job satisfaction. In a study done at Iowa Academic University, it was found that there is a significant positive impact of work-life balance on job satisfaction. Yadav & Dabhade (2013) also found positive relationship between work-life balance and job satisfaction of the working people of education and banking sector. Sharma & Gulhar (2014) proved similar results on women employees of service sector (banks, insurance, education, health and IT). Another study examined the effect of work-life balance and job satisfaction on turnover intention of doctors. Finding showed that doctors who were better able to manage the work and personal life were more satisfied with their job and had less intention to leave their job (Malik, Gomez, Ahmed, Saif, 2010). Sujut, S., Cheema, F.A. and Bhutto, F. (2011) found positive relationship between work-life balance and job satisfaction among employees working in private sector banks in Pakistan.

Conclusion

Attaining work-life balance is not a problem. With effective management strategies, it can be attained. Work-life balance is not a problem which can be permanently solved, however, it is an issue to be managed. It is seen that female employees demonstrate more imbalances in their work and life, as compared to men. This may be due to their responsibility towards home. Hence, our study tries to make an attempt to understand the level of work-life balance of female doctors and the causes relating to it.

This study concluded that there is a significant difference in the work-life balance of women doctors of different age groups. It shows that, when women doctors enter into the job, their work-life balance is not properly balanced, but, with time, they get experienced in handling their jobs and they become adept in attaining work-life balance. This study found that coping strategies have positive impact on work-life balance. Women doctors were using coping strategies such as avoiding doing official work at home and vice versa. Employing a domestic helper, managing their time through task prioritization, seeking support from their family members, etc. have helped them to cope with the work-life conflict.

It can also be deduced from the research that women's work-life balance affects their level of job satisfaction. Those employees having a proper work-life balance are more satisfied with their job. Hence, we can say that positive relationship exists between work-life balance and job satisfaction. This is indicative of the fact that women doctors will be more satisfied only when they are able to synchronize between professional and personal lives.

Job satisfaction is highly desirable in life, lack of satisfaction in job can create trouble for working women. It is seen that lower level of employee satisfaction can lead to multiple problems in any organization (Sujut et al., 2011). Therefore, it is essential that organization should be responsive to the needs and changing requirements of their workforce, especially females, in order to improve their satisfaction level.

Limitations and future scope

This study is limited to women doctors of private hospitals of Jharkhand. Its result may vary if nurses, male doctors and other staff members working in the hospitals are included in the study. This study is limited to one geographical location, and responses from different geographical areas of country could yield different results. Future researchers must try to collect responses from a wide geographical area, so that effective results could be obtained.

Implications and suggestions

This study gives important insight about the work-life balance of women doctors to understand the importance of coping strategies, so that they can adopt these when they confront with work-life conflict problem. This study found that, if women doctors are able to balance work and personal life, their level of job satisfaction will increase. Hence, it suggests that women doctors should set clear boundaries between their personal and professional life and should strive to achieve some strategies that makes them capable to cope with the conflict.

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