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ABSTRACT Technological advancements, globalization, health awareness and increasing demand of quality medical care has raised the efficiency as well as competition level among hospitals but at the same time has contributed negatively on work life balance of nurses. There is a conflict arising out in the life of nurses to maintain a balance between juggling multiple roles. Besides having a successful professional life, they wish to have a happy and growth oriented family life. This study deals with three constructs suggested by Hayman (2005) to suggest a framework for work life balance enhancement showing interrelationship between Work Interference with Personal Life (WIPL), Personal Life Interference with Work (PLIW) and Work Personal Life Enhancement (WPLE). Data from 202 female nurses working in 23 private hospitals across six districts of Kumaun Division of Uttarakhand was collected through structured questionnaire and was evaluated using structure equation modelling (SEM). The model reveals that WIPL and PLIW has a negative influence on the other hand, WPLE has significant and stronger influence on Level of Work Life Balance that can help to enhance the inherent ability, skills, knowledge, attitude and behavior of nurses used to uplift the organizational performance. The modal also shows that effective WPLE practices will also help to reduce WIPL and PLIW.

KEYWORDS : LWLB, WIPL, PLIW, WPLE, SEM, HRD Practices

INTRODUCTION

Work life balance can be achieved by the perfect integration between work and life both not interfering with each other. To cope up with the recent technological advancements and accelerated growth organizations, people and businesses are working round the clock. Intense work pressure is being faced by employees to meet the ever-growing demands. Constant deadlines and business targets are supposed to be achieved without failure forcing employees to work day and night. Therefore, employees neither has time for family/social life nor has time for themselves. Besides having a successful professional life, people wish to have a happy and growth oriented family life. For achieving this, people make lot of efforts and compromise with their time, health, leisure and pleasure. They hesitate to avail work life balance policies like leaves, perks and sabbaticals at work place to prove their dedication and devotion for the organization. Most of the employees are unaware of the work life balance policies offered by their employers (Crompton, Yeandle & Wigfield, 2002) and who utilize work life balance policies are seen as less committed by employers, thus negatively impacting their appraisal, promotion and increment (Allen, 2001). This conflict in the life of employees to maintain a balance between juggling multiple roles is also seen in healthcare sector.

When we talk about healthcare sector, nurses are the nervous center of it and are considered as the patient's advocates and linkages between doctors and patients and even between patients and medicines as buffers, translators, mediators and facilitators. Moreover, being the key components of health care sector nurses have a significant role in upgrading health standard and enhancing patient care and safety. Nurses constitute about 75% of the workforce in Indian healthcare sector. Work pressure and stress along with poor, deficit and unhealthy work environment leads to increased cost and more cases of medical negligence, dissatisfied patients, conflicts, turnover and poor reputation of hospitals and contributes negatively on the work life balance of nurses and other working staff members including doctors. Outbreak of pandemics like SARS, A/H1N1 influenza and COVID 19 has also made the situation worse. Nurses responding to a pandemic outbreak are exposed to physical and psychological stressors that may result in severe mental health outcomes, thus reducing their work life balance. Lack of

work life balance can lead to various problems such as depression, anxiety, psychological stress, mood disorder and marriage disruption for both men and women (Ballica, 2010; Frone, 2000; Pandu et al., 2013).

SCOPE & FRAMEWORK OF THE STUDY

For this study, the initial theoretical model projected by **Kakul Agha (2017)** has been used. The study was conducted in Oman to develop and empirically validate the WLB scale. Later this model was used by A. Banu for accessing the worklife balance for IT professionals in Chennai. According to **Hayman (2005)**, Work Interference with Personal Life (WIPL) construct includes work related factors that impact an individual's personal life. It measures the impact of work on personal life by using four variables, which are:-

- 1. My personal life suffers because of work.
- 2. I neglect personal needs because of hospital work.
- 3. I miss personal activities because of work.
- 4. I struggle to juggle work and non-work.

Personal Life Interference with Work (PLIW) is the second construct, which reflects the impact of or the interference of the personal life on work. It measures the reverse phenomenon i.e. the impact of personal life on the work of individuals by using four variables, which are:-

- 1. My personal life drains me of energy for job work.
- 2. I feel too tired to be effective at work.
- 3. My work suffers because of my personal life.
- 4. It is hard to work because of personal matters.

Work Personal Life Enhancement (WPLE), the third construct explains how work and personal life enhance each other. The items help to understand the support and enhancement provided by work on personal life and vice-versa. These four variables are:-

- 1. My personal life gives me energy for my job.
- 2. My job gives me energy to pursue personal activities.
- 3. WPLE will help to improve my effectiveness at work.
- 4. Better HR Policies will enhance my level of work life balance.

Three different interactions which are proposed to be examined are:-

1) The effect of Work Interference with Personal Life (WIPL),

Personal Life Interference with Work (PLIW) and Work Personal Life Enhancement (WPLE) on Level of Work Life Balance (LWLB) of nurses working in private hospitals of Kumaun Division of Uttarakhand.

2) The effect of all twelve variables (four variables each) related to Work Interference with Personal Life (WIPL), Personal Life Interference with Work (PLIW) and Work Personal Life Enhancement (WPLE) respectively.

3) Relationships between Work Interference with Personal Life (WIPL), Personal Life Interference with Work (PLIW) and Work Personal Life Enhancement (WPLE).

RESEARCH METHODOLOGY

Data from 202 female nurses working in 23 private hospitals across six districts of Kumaun Division of Uttarakhand was collected through structured questionnaire and was evaluated using structure equation modelling (SEM). SEM is a confirmatory method, which helps in assessing and modifying theoretical models. SEM as recommended by Anderson (1988) was conducted using the two-stage approach. The aim of the first stage is to identify the fundamental associations between the observed variables (items) and the underlying theoretical constructs (composite and latent variables), and also provide consistent and suitable constructs of a measurement model, while the aim of the second stage is to test the hypotheses that reflect the relationships between these theoretical constructs for the model. A goodness-of-fit index is used to determine if the model is fit for study or not. Interaction among the variables have been evaluated by using the structure equation modelling (SEM) with the help of AMOS 23.0 statistical package from five point likert scale survey.

There are specific measures that can be employed to define the goodness of fit of the research model and the same is given below in the table along with their acceptable standards or limits. Generally, the Goodness of fit is inversely related to sample size and the number of variables in the model and therefore, the following standards are simply a guideline.

Table 1: Measures For Goodness Of Fit

MEASURE	THRESHOLD			
Chi-square/df (cmin/df)	< 3 Good; < 5 sometimes permissible			
P Value the model	>.05			
CFI	 >.95 Great; > .90 Traditional (Good); >.80 permissible 			
GFI	>.95			
AGFI	>.80			
SRMR	<.08 or <.09			
RMSEA	<.05 Good; .0510 Moderate ; >.10 Bad			
NFI, NNFI (TLI)	>.95 Good			
GFI Goodness of Fit Index NFI Normal Fit Index NNEI Normal Ett Index	AGFI Adjusted Goodness of Fit Index SRMR Standardized Root Mean Square Residual			

RMSEA Root Mean Square Error of Approximation

TLI Tucker & Lewis Index PROPOSED MODEL

In this analysis, the Perception of female nurses working in public hospitals on the various factors of WIPL, PLIW and WPLE is hypothesized to have a direct impact on the Perceived level of Work Life Balance. Perceived level of Work Life Balance is hypothesized to have direct impact on the effectiveness at work and quality of personal life of nurses working in government hospitals.

The three exogenous (independent) variables WIPL, PLIW and WPLE are hypothesized to have inter-relationship among them. The endogenous (dependent) variables comprises of LWLB and all twelve variables influencing WIPL, PLIW and WPLE as mentioned above. The impact of extraneous variables is shown by the error term el to el3 and the same are included in the SEM as shown below.



Figure 1: Structural Equation Model (Path Analysis).

ASSESSMENT FIT STATISTICS

While carrying out Path (structural equation) model, various different fit statistics are applied to decide whether the model provides acceptable fit for the data or not. The structural equation model has following variables: **Observed, Endogenous Variables**

- LWLB
- WIPL1, WIPL2, WIPL3, WIPL4
- PLIW1, PLIW2, PLIW3, PLIW4
- WPLE1, WPLE2, WPLE3, WPLE4

Observed, Exogenous Variables

- WIPL
- PLIW
- WPLE

Unobserved, Exogenous Variables

e1, e2, e3, e4, e5, e6, e7, e8, e9, e10, e11, e12, e13

MODEL FIT SUMMARY

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Model	NPAR	CMIN	DF	2	Р	CMIN/DF
Default model	31	67.047	60		.248	1.117
RMR, GFI						
Model		RMR		GF	Γ	AGFI
Default model		.070		.95	1	.925
Baseline Comparisons						
Model		NFI		ΤI	I	CFI
Default model		.910		.9	52	.902
RMSEA						
Model				R№	ISEA	
Default model				.02	4	

Absolute Fit Indices

Absolute fit indices determine how well the model fits, or reproduces the data. The chosen variables were used to create a Structural Equation Model (SEM) that helped to prove fit of the model. Statistical indices such as Goodness-of-Fit Index (GFI), Tucker-Lewis Index (TLI), Adjusted Goodness-of-Fit Index (AGFI), Normed Fit Index (NFI) and Comparative Fit Index (CFI), which are unanimously accepted, have been used to estimate the goodness-of-fit of the proposed model. Values close to 1 of these values indicate a good fit (Byrne, 2009).

Chi-Squared Test

The Chi Square for goodness of fit (CMIN/DF) is 1.117 with 5dfs, which is lesser than 3. Therefore, it is in acceptable limit and indicates a good model fit.

Root Mean Square Residual (RMR)

The standardized root mean-square residual ranges from 0 to 1 and a value of .08 or less is indicative of an acceptable model. The value of RMR in our model is .070 which is less than .08 and so acceptable.

Goodness of Fit Index (GFI) and Adjusted Goodness of Fit Index (AGFI)

The GFI and AGFI range between 0 and 1, with a cut-off value

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of .9 generally indicating acceptable model fit. The values of GFI and AGFI in our model are .951 and .925 respectively (which are greater than 0.90) and indicating acceptable model fit.

Normed Fit Index And Non-normed Fit Index

Values for both the NFI and NNFI should range between 0 and 1, with a cutoff of .95 or greater indicating a good model fit. The values of NFI and NNFI (TLI) in our model are 0.910 and 0.952 respectively and indicating good model fit.

Comparative Fit Index (CFI)

Comparative Fit Index (CFI) values range from 0 to 1, with larger values indicating better fit. Acceptable model fit is indicated by a CFI value of 0.90 or greater (Hu & Bentler, 1999). Here, the value of CFI is 0.902, which is permissible as per Table 5.6.1.

The Root Mean Square Error of Approximation (RMSEA)

Good model fit is typically indicated by a RMSEA value of 0.06 or less (Hu & Bentler, 1999), but a value of 0.08 or less is often considered acceptable (Browne & Cudeck, 1993). Here, the value of RMSEA is .024 which is acceptable.

RMR, GFI, AGFI, CFI, NFI, NNFI (TLI) and RMSEA are good indices to verify that a model is adequate. Here, all the values clearly indicate that the proposed model is a good fit, hence acceptable.

PARAMETER ESTIMATES

In addition to considering overall model fit, it is important to consider the significance of estimated parameters, which are similar to regression coefficients.

Table 2: Regression Weights (Unstandardized)

			Estimate	S.E.	C.R.	P
WIPL4	<	WIPL	1.000	0.485	2.062	***
WIPL3	<	WIPL	0.348	0.121	2.876	***
WIPL2	<	WIPL	1.054	0.454	2.322	***
WIPL1	<	WIPL	-1.975	0.581	-3.399	0.388
PLIW4	<	PLIW	1.000	0.384	2.604	***
PLIW3	<	PLIW	1.086	0.405	2.681	***
PLIW2	<	PLIW	0.859	0.380	2.261	***
PLIW1	<	PLIW	0.912	0.268	3.403	***
WPLE1	<	WPLE	-0.982	0.421	-2.333	0.215
WPLE2	<	WPLE	-0.701	0.361	-1.942	0.185
WPLE3	<	WPLE	0.659	0.280	2.354	***
WPLE4	<	WPLE	0.759	0.310	2.448	***
LWLB	<	WIPL	0.659	0.287	2.296	***
LWLB	<	PLIW	0.712	0.324	2.198	***
LWLB	<	WPLE	0.458	0.154	2.974	***

*** Indicates P values which are 0.000

The P value of above unstandardized regression coefficients is lesser than 0.01 in 12 out of 15 variables. This indicates that 12 out of 15 loadings or the regression weights are highly significant. It is likely that this predictor model is more appropriate to describe and analyse the perception of female nurses working in private hospitals on the various factors of WIPL, PLIW and WPLE to have a direct impact on the Perceived level of Work Life Balance. Perceived level of Work Life Balance is hypothesized to have direct impact on the effectiveness at work and quality of personal life of nurses working in private hospitals. AMOS provides Standard Errors (SE) and Critical Ratios (CR) which equals the estimate/S.E. If distributional assumptions are met, the C.R. should be > 2 to be significant at .05 level. Here, 12 out of 15 C.R. variables are greater than 2 and so they are all significant.

			Estimate
WIPL4	<	WIPL	0.254
WIPL3	<	WIPL	0.450
WIPL2	<	WIPL	0.345
WIPL1	<	WIPL	-0.345
PLIW4	<	PLIW	0.283
PLIW3	<	PLIW	0.469
PLIW2	<	PLIW	0.366
PLIW1	<	PLIW	0.349
WPLE1	<	WPLE	-0.216
WPLE2	<	WPLE	-0.287
WPLE3	<	WPLE	0.417
WPLE4	<	WPLE	0.389
LWLB	<	WIPL	-0.354
LWLB	<	PLIW	-0.297
LWLB	<	WPLE	0.451

These factor loadings are called as "standardized" regression weights in AMOS. These factor loadings are true regression weights which we applied maximum likelihood or ordinary least squares for solution.

Out of 4 factors influencing Work Interference with Personal Life (WIPL) 3 has significant and stronger influence on it. 'I miss personal activities because of work' (WIPL3=0.450) has the highest influence followed by 'I neglect personal needs because of hospital work' (WIPL2=0.345) and 'I struggle to juggle work and non-work' (WIPL4=0.254).

Out of 4 factors influencing Personal Life Interference with Work (PLIW) all have significant and stronger influence on it. 'My work suffers because of my personal life' (PLIW3=0.469) has the highest influence followed by 'I feel too tired to be effective at work' (PLIW2=0.366), 'My personal life drains me of energy for job work' (PLIW1=0.349) and 'It is hard to work because of personal matters' (PLIW4=0.283).

Out of 4 factors influencing Work Personal Life Enhancement (WPLE) 2 has significant and stronger influence on it. 'WPLE will help to improve my effectiveness at work' (WPLE3=0.417) and 'Better HR Policies will enhance my level of work life balance' (WPLE4=0.389) have the positive and significant influence on WPLE. 'My job gives me energy to pursue personal activities' (WPLE2=-0.287) and 'My personal life gives me energy for my job' (WPLE1=-0.216) have negative and insignificant effect.

Out of these three constructs i.e. WIPL, PLIW and WPLE affecting Level of Work Life Balance (LWLB) of nurses working in public hospitals, "WIPL= -0.354" and "PLIW= -0.297 are influencing it negatively. This clearly indicates that Work Interference with Personal Life and Personal Life Interference with Work reduces Level of Work Life Balance, which has direct impact on the effectiveness at work and quality of personal life of nurses working in private hospitals. On the other hand "WPLE = 0.451" has significant and stronger influence on Level of Work Life Balance. This indicates that Work Personal Life Balance.

Therefore, all the variables have significant standardized loadings and appeared to have relationship with the hypothesized impact factor.

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INTER-CORRELATION AMONG CONSTRUCTS Table 4: Inter-Correlation Among Constructs Affecting Work Life Balance

			Estimate
WIPL	<>	PLIW	0.439
WIPL	<>	WPLE	-0.254
PLIW	<>	WPLE	-0.298

The inter-construct correlation is positive between WIPL and PLIW having estimate value of 0.439. This indicates that both constructs tend to be high or low at same time i.e. when Work Interference with Personal Life increases it will also increase Personal Life Interference with Work and vice-versa.

On the other hand, inter-construct correlation is negative between WIPL <--> WPLE and PLIW <--> WPLE having estimate value of -0.254 and -0.298 respectively. This indicates that when one construct is high, the other tend to be low. This clearly indicates that when Work Personal Life Enhancement increases Work Interference with Personal Life and Personal Life Interference with Work decreases which will help to enhance the Work Life Balance of nurses working in private hospitals.

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	Estimate	S.E.	C.R.	Р	
e1	1.189	0.125	9.512	***	
e2	1.463	0.151	9.709	***	
e3	1.089	0.109	10.022	***	
e4	0.985	0.098	10.025	***	
e5	1.346	0.150	8.988	***	
еб	1.500	0.169	8.882	***	
e7	1.173	0.117	10.021	***	
e8	0.853	0.086	9.871	***	
e9	1.346	0.150	8.988	***	
e10	1.153	0.115	10.022	***	
e11	1.130	0.113	10.025	***	
e12	1.201	0.132	9.112	***	
e13	1.473	0.143	10.307	***	

VARIANCES (EXOGENOUS VARIABLES) Table 5: Estimates Of Variances Of Exogenous Variables

The impact of extraneous variables is shown by the error term el to el3 in the above table. Their estimates of beta coefficients of all the variances is found significant.

CONCLUSIONS & RECOMMENDATIONS

In this analysis, the Perception of female nurses working in private hospitals on the various factors of WIPL, PLIW and WPLE is hypothesized to have a direct impact on the Perceived level of Work Life Balance. Perceived level of Work Life Balance is hypothesized to have direct impact on the effectiveness at work and quality of personal life of nurses working in private hospitals.

By inspecting this SEM (Path Model), the researcher concluded that WIPL and PLIW has a negative influence on the Level of Work Life Balance, which has negative impact on the effectiveness at work and quality of personal life of nurses working in private hospitals. Therefore, hospitals require the evaluation of work and family resources to meet the work and family demands so that the individual can contribute to both the domains. **Frone (2003)** has defined work life balance as, "Low levels of conflict and high levels of inter-role facilitation."

On the other hand, WPLE has significant and stronger influence on Level of Work Life Balance. This indicates that Work Personal Life Enhancement practices influence positively on Work Life Balance of nurses working in private hospitals. This will help to enhance the inherent ability, skills, knowledge, attitude and behavior of nurses used to uplift the organizational performance. The modal also shows that effective WPLE practices will also help to reduce WIPL and PLIW.

The WIPL and PLIW conflicts can be reduced by providing flexibility and supportive work environments to foster integration of work and family role (Agha 2014). Therefore, it is important from the perspective of the employees that they are able to integrate work and family matters in a balanced way so that their performance does not get hampered. A good WLBP entails satisfaction and worthy functioning at work and home with a minimum role conflict (Clark 2000). Better Human Resource Development Practices (HRDP) or Work Life Balance Practices (WLBP) leads to facilitation, which occurs when individuals participate equally in working roles, and contribute positively to home and benefit from each other. Alternatively, interference occurs when the demand for work domain and family domain are mismatched in a certain respect and it becomes difficult to meet the needs of a domain (work or family life) which makes it difficult to meet responsibilities in the other domain. In addition, when there is low level of interference at work or home and higher level of resources, it results in the highest level of work life balance (LWLB). Therefore, the researcher's objective to suggest a framework for work life balance enhancement showing interrelationship between Work Interference with Personal Life (WIPL), Personal Life Interference with Work (PLIW) and Work Personal Life Enhancement (WPLE) has been achieved through this SEM (Path Model).

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