

Work Life Balance among Nurses in a Private Hospital of Lalitpur: A Cross-sectional Analytical Study

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Work-life balance is an equilibrium between profession and personal life. A healthy work-life balance is essential for nurses to sustain a fulfilling career, maintain their health and well-being, and provide quality care to the patient. The objective of this study was to assess the work-life balance among nurses in a private hospital in Lalitpur. A cross-sectional analytical research design was adopted among 144 nurses working in B&B Hospital. A proportionate stratified random sampling technique was used to collect data. A semi-structured questionnaire was used to collect data by using a self-administered technique from April to May 2024. Before data collection, ethical approval was obtained from the Institutional Review Committee of B&B Hospital. Data was analyzed by using descriptive and inferential statistics. The findings showed that the majority of the respondents were aged below 30 years (82.6%), 46.5% had PCL level of education, the majority (63.2%) were unmarried, 68.8% belongs to nuclear family, and 35.4% had chronic illness in their family. Of the respondents, highest proportion (39.6%) had 1-5 years of total job experience. Work-life balance was present in more than half of respondents (55.6%). Work-life balance was significantly associated with age (p -value <0.024). More than half of nurses had balanced their work and personal life. A supportive and flexible working environment and self-management training can be provided by the organization to improve their work-life balance.

. Keywords: nurses, private hospital, work-life balance.

Work-life balance refers to the equilibrium that nurses need to attain between their personal and professional lives to be happy in their roles and maintain their health.¹

Work-life balance among nurses has been influenced independently by non-work activities, job requirements, supervisor support, job satisfaction, manageability, and social and environmental factors.²

One can successfully fulfill their commitments to their family, their job, and society at large when they manage to strike a healthy work-life balance. When a person is in a condition of work-life balance, they are satisfied and able to perform well in both their personal and professional lives without running into difficulties in either job.³

Worldwide, the nursing profession has major issues, including an insufficient staff, an excessive workload, lengthy shifts, unpredictable schedules, and pressure from the workplace.⁴ The demographic variables such as age, marital status, family monthly income, and place of residence affected the work-life balance of the respondents.⁵

Materials & Methods

A cross-sectional analytical study design was adopted for the study. The study was conducted in B&B Hospital, Gwarko, Lalitpur.

The study population were nurses working the different ward at least 6-month

experience of B&B Hospital were the study population. Sample size was calculated by using Cochran's formula, with a prevalence of 43.45%⁶, 95% confidence level, and 5% permissible error. Final sample size was 381. Since the total finite population of nurses was 200, the estimated corrected sample size is 131. Adding a 10% non-response rate, the final sample size is 144. A proportionate stratified random sampling technique was used to select the sample.

Before data collection, administrative approval was obtained from the Research Committee of B&B Medical Institute, and ethical approval was obtained from the IRC (Institutional Review Committee) of B&B Hospital (Ref: B&BIRC-24-11). Informed consent was taken from all the respondents. Privacy and confidentiality of the information were maintained throughout the study.

The data were collected from April to May 2024. Semi-structured questionnaire was used to collect data. The questionnaire was developed through a review of various literature related to work-life balance. The questionnaire was divided into 4 parts.

Part I consists of 4 questionnaires related to Socio-demographic variables such as age, ethnicity, level of education, and marital status, and so on. Part II consists of 7 questionnaires related to family-related variables such as types of family, family income, number of family members, occupation of spouse, number of children,

and chronic illness in family members. Part 3 consists of 4 questionnaires related to Professional Related Variables such as Working ward, Job experience, and Shift work. Part 4 consists of a questionnaire related to work-life balance among nurses, which includes 30 statements divided into 3 components, i.e., Personal life interferences with work (PLIW), Work interferences with personal life (WIPL), and Work and personal life enhancement (WPLE). Statements have a 5-point Likert-type scale ranging from 1 to 5. 1 indicates strongly disagree, 2: disagree, 3: neutral, 4: agree, 5: strongly agree. The level of work-life balance was categorized as: presence of work-life balance (>50% score) and work-life balance not present (\leq 50% score).

The validity of the instrument was established by an extensive review of literature and consulting with research guides and faculty related to work-life balance. The instrument was pre-tested among 15 nurses working in the Star Hospital of Lalitpur. Reliability of the instrument was assessed using Cronbach's alpha coefficient test.

Data analyses were performed using SPSS version 20.0 and presented with numbers, percentages, mean, and standard deviation. Inferential statistics was used to measure the association between the level of work-life balance and selected variables at a p-value <0.05 level of significance.

Results

Table 1 shows that among 144 respondents, most were aged <30 years (82.6%), belonged to Janajati (49.3%) or Brahmin/Chhetri (41.7%) groups, and had PCL (46.5%) or BSN (32.6%) education. A majority were unmarried (63.2%), worked in critical wards (55.6%), performed shift work (94.4%), and lived in nuclear families (68.8%). Family income was mostly above 30,000–50,000 (31.3%) or above 51,000 (40.3%). Around one-third (35.4%) had family members with chronic illness.

The mean scores (\pm SD) for work-life balance domains were: WIPLE 3.22 ± 0.78 (64.4%), PLIW 2.51 ± 0.74 (50.2%), and WPLE 3.41 ± 0.53 (6.62%) as shown in **Table 2**.

Figure 1 shows that work-life balance is present among more than half (55.6%) of respondents.

Table 3 revealed that age was significantly associated with work-life balance, with those >30 years more likely to report balance (76.0%) than those <30 years (51.3%) ($\chi^2=5.12$, $p=0.024$). Other sociodemographic variables, including ethnicity, education, marital status, job experience, ward type, shift work, family type, family income, number of family members, spouse occupation, number of children, and presence of chronic illness, were not significantly associated with work-life balance ($p>0.05$).

Table 1: Sociodemographic characteristics of respondents (n = 144)

Variables	n (%)
Age	
<30 years	119 (82.6)
≥30 years	25 (17.4)
Ethnicity	
Janajati	71 (49.3)
Brahmin/Chhetri	60 (41.7)
Others	13 (9.0)
Educational Level	
PCL	67 (46.5)
BN	30 (20.8)
BSN	47 (32.6)
Marital Status	
Married	53 (36.8)
Unmarried	91 (63.2)
Job Experience in Current Organization	
<12 months	58 (40.3)
1–5 years	51 (35.4)
>5 years	35 (24.3)
Total Job Experience	
<12 months	45 (31.3)
1–5 years	57 (39.6)
>5 years	42 (29.2)
Working Ward	
Critical	80 (55.6)
Non-Critical	64 (44.4)
Shift Work	
Yes	136 (94.4)
No	8 (5.6)
Types of Family	
Nuclear	99 (68.8)

Joint	45 (31.3)
Family Income (NPR)	
≤30,000	41 (28.5)
31,000–50,000	45 (31.3)
Above 51,000	58 (40.3)
Number of Family Members	
1–5	106 (73.6)
>6	38 (26.4)
Occupation of Spouse	
Private Service	27 (18.8)
Other Services	26 (18.1)
Number of Children (n=53)	
Not yet	23 (16.0)
1–2	30 (20.8)
Chronic Illness in Family Members	
Yes	51 (35.4)
No	93 (64.6)

Table 2: Domains of work-life balance (n=144)

Domain	Mean±SD	Percent (%)
Work Interference with Personal Life (WIPLE)	3.22±0.78	64.4
Personal Life Interference with Work (PLIW)	2.51±0.74	50.2
Work and Personal Life Enhancement (WPLE)	3.41±0.53	6.62

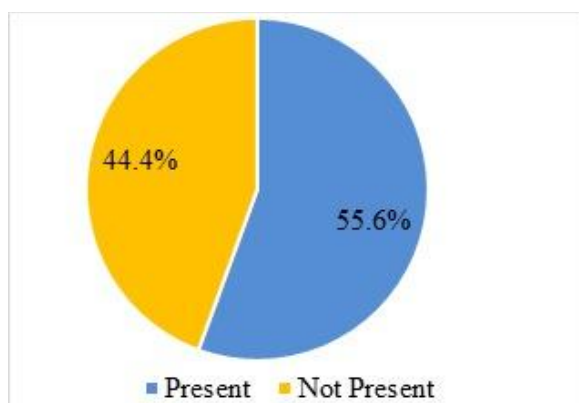


Figure 1: Presence of work-life balance (n=144)

Table 3: Association between levels of work-life balance and respondents' characteristics (n=141)

Variable	Work Life Balance Levels		X ²	p-value
	Not present, n(%)	Present, n(%)		
Age				
20-29 years	58(48.7)	61(51.3)	5.12	0.024*
>30 years	6(24.0)	19(76.0)		
Ethnicity				
Janajati	38(53.5)	33(46.5)		
Brahmin/Chhetri	22(36.7)	38(63.3)	4.82	0.090
Others	4(30.8)	9(69.2)		
Educational Level				
PCL	33(49.3)	34 (50.7)		
BN	10(33.3)	20(66.7)	2.12	0.345
BSN	21(44.7)	26(55.3)		
Marital Status				
Married	22(41.5)	31(58.5)	0.29	0.589
Unmarried	42(46.2)	49(53.8)		
Job experience in current organization				
<12 months	29(50.0)	29(50.0)		
1-5 years	25(49.0)	26(51.0)	4.72	0.091
>5 years	10(28.6)	25(71.4)		
Total Job experience				
<12 months	22(48.9)	23(51.1)		
1-5 years	28(49.1)	29(50.9)	2.96	0.222
>5 years	14(33.3)	28(66.7)		
Working Ward				
Critical	35(43.2)	45(56.8)	0.11	0.735
Non-Critical	29(46.0)	34(54.0)		
Shift Work				

Yes	60(44.1)	76(55.9)		1.000
No	4(50)	4(50)		
Types of family				
Nuclear	44(44.4)	55(55.6)	0.0	1.000
Joint	20(44.4)	25(55.6)		
Family Income				
Below 30000	14(34.1)	27(65.9)		
31000-50000	21(46.7)	24(53.3)	2.56	0.276
Above 51000	29(50.0)	29(50.0)		
Number of Family member				
1 -5	48(45.3)	58(54.7)	0.11	0.735
>6	16(42.1)	22(57.9)		
Occupation of Spouse				
Private Service	11(40.7)	16(59.3)	0.13	0.902
Other Services	11(42.3)	15(57.7)		
Number of Children (n=53)				
Not Yet	9(39.1)	14(60.9)	0.96	0.758
1-2	13(43.3)	17(56.7)		
Chronic illness in family members				
Yes	20(39.2)	31(60.8)	0.87	0.351
No	44(47.3)	49(52.7)		

*p<0.05

Discussion

The present study showed that more than half of the respondents (55.6) had a work-life balance present, and nearly half of the respondents (44.4) did not present. The findings were inconsistent in the study in

Nepal, where 3.2 had managed work-life balance, 86.3 had moderate balance, and 10.5 reported an imbalanced.⁷ Similarly, the findings were in contrast to the study conducted in Bangladesh and Nigeria, which revealed that 43.45 and 46 had

balanced work life, and more than half (56.55) and 54 had imbalanced work life, respectively.^{8,9} This might be due to different settings and a different working environment. With regards to different domains of work-life balance, the result of the current study revealed that work-personal life enhancement (WPLE) had the highest mean score (3.22 ± 0.78) compared to Work interference with personal life (WIPL) and Personal life interference. The findings are similar to the study conducted in Egypt, where work and personal life enhancement¹⁰,

In this study, work-life balance was significantly associated with age (p -value=0.02) and not associated with Ethnicity, Educational level, Marital status, Types of family, Family income, Number of family members, Occupational status of Spouse, Number of children, chronic illness in family member, Job experience in current organization, Total Job experience, working ward, and shift work.

Similar findings were reported in other studies conducted in Malaysia, indicating no association between work-life balance and ethnicity or educational level. In India where there was no significant association with marital status, number of children, or working experience in the study of India.¹¹ This finding is in contrast to other studies where work-life balance was significantly associated with the types of family and job

experience, and no association between work-life balance with age.⁷

This study was limited to only one private setting.

Conclusion

The findings indicate that more than half of nurses reported having a work-life balance, whereas nearly half of nurses did not. The work-life balance domains had the highest mean score in the work and personal life enhancement domain. work interference with personal life was slightly less than work personal life enhancement, and the lowest mean was personal life interference with work. The work-life balance tends to be associated with age. There was no association between work-life balance and ethnicity, educational level, marital status, types of family, family income, number of family members, occupational status of spouse, number of children, or chronic illness in family members.

Conflict of Interest: None.

References

1. Santhosh L, S. K. Pillai J, Mishra S. Work-life Balance among Nurses in a Medical Institute of National Importance: Exploring Relevant Work and Family Factors. *Int J Nurs Res* [Internet]. 2023 Jul 21;7(2 SE-Research Article):53–6. Available

- from:
<https://www.innovationaljournals.com/index.php/ijnr/article/view/204>
2. Nurumal MS, Makabe S, Ilyani F, Jamaludin C, Fahmi H, Yusof M. Work-Life Balance among Teaching Hospital Nurses in Malaysia. 2017;9(8).
3. Ali NHBS, Ahmad SFS, Naw NRC, Sabar S, Husin LIA. The Determinants of Work-Life Balance among Nurses in Public Hospital in Klang Valley. Inf Manag Bus Rev [Internet]. 2023 Sep 17;15(3(SI SE-Research Paper)). Available from: <https://ojs.amhinternational.com/index.php/imbr/article/view/3498>
4. Rahmani A, Radfar M, Azarabadi A. A comprehensive review of the factors affecting the work-life balance of nurses. 2022;CXXV(1):9–13.
5. Thapa M, Dhakal RD, Nepal S, Adhikari P. Factor Affecting Work Life Balance of married Working Women in Nepal Sbi Bank Ltd. 2023;12(1):72–89.
6. Karim M, Rony K, Numan S, Alamgir HM. The association between work-life imbalance, employees' unhappiness, work's impact on family, and family impacts on work among nurses : A Cross-sectional Study. Informatics Med Unlocked [Internet]. 2023;38(March):101226. Available from: <https://doi.org/10.1016/j.imu.2023.101226>
7. Kandel A, Thapa Chhetri B. Work-Life Balance among Nurses working in Tertiary Level Hospital. Nepal Med J [Internet]. 2021 Oct 1;4(1 SE-ORIGINAL ARTICLE):37–43. Available from: <https://nmj.com.np/nmj/index.php/nmj/article/view/33>
8. Rony MKK, Md. Numan S, Alamgir HM. The association between work-life imbalance, employees' unhappiness, work's impact on family, and family impacts on work among nurses: A Cross-sectional Study. Informatics Med Unlocked [Internet]. 2023;38:101226. Available from: <https://www.sciencedirect.com/science/article/pii/S2352914823000680>
9. A V. A, Asuquo EO, Alabere ID, Ogbuehi IH. Work-life Balance of Female Nurses in Private Hospitals in Port-Harcourt Metropolis, South-South Nigeria. Asian J Res Nurs Heal [Internet]. 2019 Jul 31;2(1 SE-Original Research Article):36–48. Available from: <https://journalajrnh.com/index.php/AJRNH/article/view/15>

10. Badran FMM, Khalaaf DA. Work-Life Balance and Its Relation to Person-Job Fit among Staff Nurses. 2022;4(3):86–93.
11. Raja A, Karunagaran K, Lee P, Raju H, Rebekah G, Durai S. Work-life Balance of Nurses during Pandemic. 2020;9(6):45–8.