

WORK LIFE BALANCE AND JOB SATISFACTION OF NURSING STAFF IN INDIAN CONTEXT

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ABSTRACT

Healthy and disease free society along with happy and contented citizens are the pre requisites for the economic growth of any country. For an efficient health care environment along with resilient infrastructure, is needed, a well motivated, proficient and satisfied work force. Physicians and nurses are two prominent pillars of health care services and regrettably, India is facing a shortage of both these service providers. These health care professionals work under most stressed circumstances, witnessing death and pain on a routine basis. Long duty hours, overtime, shift work is embedded in their job profile making it difficult for them to maintain their work life balance. This difficulty in maintaining the equilibrium in work and life domain often results in stress and job dissatisfaction. Under such circumstances, physicians still have a solace of enjoying high esteem in the society; however the other pivotal group, that is, the nurses is deprived of the similar status. They are merely visualized as assistants rather than partners in health care. Besides low pay packages and other infrastructural constraints, lack of avenues in the country for maintaining a healthy work life balance and growth prospects often lead to migration of qualified nurses, further aggravating the problem of shortage of these health care professionals. Thus, there is an emergent need to address the concerns of this segment of society as the growing medical needs of the country can't be met unless and until the nursing staff is happy and satisfied. This paper is an attempt to explore the nursing scenario prevalent in the country and the issues related to their work life balance and job satisfaction.

KEYWORDS: *Economic Growth, Health Care Environment, Satisfied Work Force, Nursing Scenario.*

Introduction

Governments world over are recognizing the importance of health care sector for maintaining healthy work force to achieve their economic targets. The success of the sector rests on strong infrastructure and motivated and contented healthcare staff who works round the clock to impart health services to the people. However, in India, which is one of the fastest growing economies of the world, the situation is far from being satisfactory. Apart from a small fraction of funds allocated for the health care expenditure (a mere 4.02% of GDP in the financial year 2013-14), the country is also facing severe crunch of health care personnel. As per WHO recommendation there should be 25 health workers (doctors, nurses, midwives) per 10,000 people, while India has only 19 health workers per 10,000 people (Report of Steering Committee on Health for the 12th five year plan 2012). The staff, in itself is confronted with various issues like growth opportunities, working conditions, on the job training and most prominently, striking a balance between work and life. Physicians and nurses are the backbone of the medical profession. Though both are prominent pillars and are complimentary to one another, the status enjoyed by them is quiet

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contrasting. While physicians are held with high esteem by the Indian society, the same is not the case with the nurses. Nurses are merely visualized as care givers rather than health partners and their role in the health related services is grossly neglected. Studies across the globe have also suggested severe shortage of nurses and midwives. India has 1.44 nurses and midwives per 1000 population and a ratio of 2.24 nurses and midwives per doctor (based on data from the Ministry of Statistics and Programme Implementation, Government of India) which is far less than the international norms. The diminutive allocation of funds to the health sector and shortage of health professional; particularly nurses and midwives has an adverse effect on the uptake of healthcare especially in the rural areas.

The largest proportion of the health work force is said to comprise of nurses (up to 80%) and they are considered to be the front line staff across the health continuum in most health services and countries (Hughes, 2006). In India, the proportion of nursing and midwifery personnel in the entire health work force is large; as per the Rural Health Statistics, 2015 there are currently an estimated 2, 90,596 nursing professionals in the Indian public health system. But this number is far from fascinating, compared to the nursing needs of the country. In the above scenario, for improving the healthcare services it is essential to utilize the health resources and personnel available to their fullest capacity. Among the health resources, world wide it has been felt that nurses are most underutilized in health sector across various countries. Though a health care system can't be thought about without their contributory role still they are seldom considered as equal partners in health care teams.

A nurse is generally defined as a healthcare professional, who along with other health care professionals is responsible for the treatment, safety, and recovery of acutely, or chronically ill or injured people, health maintenance of the healthy, and treatment of life-threatening emergencies in a wide range of health care settings (Muthuswamy, 2009). In India, Christian missionaries were largely responsible for training Indian women as nurses, and also played a dominant role in their evolution and professional organization. Post-independent governments in India focused on developments in the fields of medicine but meager resources were allotted to the nursing sector within the health services (Nair and Healey, 2006). The nursing shortage in India has been largely attributed to the historical stigmatization associated with the work of nurses (Nair, 2012). As the profession involved touching strangers and body fluids, it was traditionally looked down upon. The profession was perceived to be reserved for lower caste people or for those who have financial sustainability issues (Reddy, 2008; from Garner et al, .2015). Till date, Indian nursing is strongly influenced by social and cultural norms. For instance, in the state of Bihar the profession is still not considered dignified, while in Kerala it holds a high profile and is held with high esteem, the state also is a significant contributor to the nursing cadre –both nationally and globally

As per WHO report (2013), poor working conditions, lack of participation in decision-making, limited opportunities for career mobility and excessive workloads, lead to internal and external migration, resulting in shortages of health workers in remote and rural areas, even in high-income countries.. Though in India, the research evidence on nurses' working condition and job satisfaction is limited, but, reports do indicate that nursing lacks clear career pathways and mechanisms for promotion; in-service training is rare (except in the best corporate hospitals); pay is low (especially in small private hospitals); and working conditions are often inadequate, lacking sufficient staff, equipment and infrastructure. Investment in nursing education whether it is pre- service or in- service is grossly neglected, making it a profession surviving on the margins. All these factors direct towards stress and work life balance issues associated with the health care providers.

Work Life Balance Issues of Nurses in India

It is often quoted that satisfied employees are productive and better employees. For satisfaction contentment in both work and life is a necessity. In a society filled with conflicting responsibilities, chaotic roles and commitments, the balance between paid work and other activities of life has become a predominant issue at the work place (Lockwood, 2003). Work life balance is satisfaction and good functioning at work and at home, with a minimum of role conflict (Clark, 2000). Employees with work-life balance feel their lives are fulfilled both inside and outside of work (Byrne, 2005), and they experience minimal conflict between work and non-work roles. Those who achieve this balance tend to have higher levels of satisfaction with their jobs and life in general, as well as lower levels of stress and depression (Life T,2011).Though, there is no perfect work life balance, but the quest to achieve one is an ongoing process. Thus, it is taken to be a moving target (Mugenyi, 2017).

Work life balance is global concern as employees world over are juggling to balance demands from work and personal life, which are mutually complementary. Assisting employees in attaining work

life balance is a challenge for employers as well as human resource professionals. Modern day careers are complicated and striking a balance between life and work is difficult, if not impossible. Nursing is one of those jobs in which due to the peculiar nature of work involved i.e shift work, often long working hours etc; the problem of maintaining balance becomes more acute (Watson, 2015). The rapidly evolving role of nurses with assignment of wide range of health care responsibilities and limited availability of resources in terms of staff and budget with the hospitals((Blaug, Kenyon and Lekhi 2007) make caring for patients more intricate. This leads people to leave their jobs leading to turnover and shortage of nurses.

Work life balance is also taken as an indicator of organizational commitment. Since, nurses are the key players in hospital settings; their work life balance and organizational commitment do influence hospital performance and productivity. In the modern competitive environment, hospitals too are struggling for scarce resources and for achieving their goals efficiently. Thus, the issue of work life balance, job satisfaction and organizational commitment become more crucial for the hospitals to retain their qualified and experienced personnel. Sakthivel and Jayakrishnan (2012), in their study of Indian nurses reported that their work is interfering with their family life at higher level, while family interfering with work life is at lower level. Work life balance and organizational commitment were found to have a positive relationship. Thus, to ensure employee commitment their work life concerns have to be addressed seriously.

Intention to leave the job is also related to work life conflict. High job dissatisfaction is related to high likelihood of leaving the job and intention to leave due to low job satisfaction is aggravated by work to life conflict. Since there is a continuous rise in dual earner couples and more and more women joining the services, the strategies to improve their job satisfaction and lessen turnover rate won't be effective unless and until policies to prevent work life conflict are implemented (Chen et al., 2015).

Nurses in various health settings are often confronted with stressors and satisfiers. Often poor salary structure, high volume of work and witnessing emotional distress of patients are identified as major stressors. On the other hand cordial relation with the patients, appreciation by their relatives and perception of satisfying the patients by performing the job well are the major contributors to their job satisfaction (Saha et al., 2011). Researchers have also pointed towards shortage of staff, lack of knowledge, work demands (particularly with critically ill patients and shortage of staff) and lack of co-operation among health professionals as main sources of job stress among the nurses (Gautam, 2016). Studies have also highlighted that stressors and satisfactory factors at work are connected with work life balance issues of nurses working in hospital settings. Determination of balance issues has also been linked to stressors and satisfiers such as-relation with team members, appreciation from doctors, career opportunities and training programs, child care responsibility etc (Lakshmi et al, .2012). Indian nurses also linked perception of job control and low working hours flexibility with work family conflict (Pal and Saksvik, 2006).

Role related stress is another factor that impact work life balance and job satisfaction of employees. Kahn et al, in their revolutionary research on role related stress, identified –role conflict, role ambiguity and role overload as three major dimensions of organizational role stress. Nurses are found to experience high quantum of role conflict at all levels of social roles (Malhotra and Sachdeva, 2005). They suffer role conflict associated with their routine duties and this is negatively related to their job satisfaction (Kim et al, .2016). Excess of role related stress (role overload, role conflict, role ambiguity) in nurses' often leads to exhaustion and disengagement (Dasgupta, 2012). As and when working hours increase and there is an ambiguity surrounding the role to be performed, the level of work-family conflict increases. Role conflict is sometimes negatively related to work-family conflict implying that multiple roles are actually good for a better balance between work and life. This finding is in sync with the assumptions of the "enhancement theory" (Barnett & Hyde, 2001; Crosby, 1991). However, it should be noted that there is a limit for the multiple roles that an employee could hold. When the roles are too excessive, psychological stress may occur (Bekker et al., 2000; Ryan et al, .2009). Work overload has been identified as one of the strongest and most consistent predictors of work–life conflict (Guerts and Demerouti, 2003). Research has shown that employees who have high role overload are less committed to their organization, report higher work stress and are less satisfied with their jobs (Duxbury and Higgins, 2003). Role ambiguity has also been found to impact work life conflict/work life balance issues. Carlson et al. (2000) found that work role ambiguity was positively related to both strain and behavior-based work interference with life. Aryee (1992,) in his study showed a positive relation between role stressors (role overload, role conflict and role ambiguity) and work family conflict. It has also been reported that as

conflict, ambiguity and demands in a domain increases, satisfaction with it decreases (Carlson and Perrewe, 1999). Over the years research has suggested a strong relation between work family conflict / work life balance and job satisfaction (Kossek and Ozeik, 1998; Allen et al., 2000). It is pertinent to pay attention to work life balance issues of nurses to ensure their job satisfaction as their discontentment has severe implications for patient care and health sector as a whole.

Work Life Balance; what can be done

There are numerous reasons for employees to leave an organization- more lucrative job, advancement opportunities, retirement benefits and so on. These attritions are difficult to prevent. However in modern times there is one more reason to leave the job that is, to find a job where there is better work life balance. This reason of departure can be controlled by an organization by undertaking various initiatives to help the employees to balance their commitment towards work, family and life. The cost incurred by an organization for the replacement of an experienced employee is much more than the cost incurred on implementation of work life balance policies which can assist in their retention. Hospitals are said to have one of the most stressful work environment. The task of healthcare workers is certainly very taxing emotionally as well as physically. It is imperative that the success of any hospital organization depends upon its health care staff. Thus, it is essential for the hospital organization to help its employees in maintaining equilibrium between their work life and personal life. Relevant policies should be framed and steps should be taken by the employers for implementing work life balance strategies to enhance job satisfaction and commitment among employees and reduction of stress. Management support and commitment are essential toward work life balance initiatives (Tombari & Spinks, 1999). Employees who are able to balance their work, family and life commitments have been shown to be happier in their job and are more likely to stay and work towards a rewarding and productive career.

Steps at the Initiation of Nursing Career

- Nurse training institutes should ensure that the curriculum in itself takes into account the working conditions in the hospitals like round the clock operations, shift work requirements etc. Initial training in these stressors would go a long way in balancing work and life.
- Due to high demand of nurses in the developed world and their constant migration in the hope of getting better work and life quality, there is a mushroom growth of institutions particularly in private sector providing nursing education. This has implications for the quality and governance of nursing education (Rao et al., 2011). Compromise on the quality of professional education has severe long term impact in the form of stagnation and stress impacting overall life satisfaction.
- Recruitment should be centralized and promotional campaigns should be conducted for taking up nursing as a career in the rural areas. Placement of the candidate should be made in their own region. This will help not only in meeting the shortage but also in saving commutation time and reducing work life issues for time constraint.

Organizational Initiatives

- Work and leave schedules for nurse should be made flexible. To assist employees to balance work life responsibilities across all categories part time work options should be made available.
- Novice nurses should be provided with flexibility in working arrangements and some discretion in selection of shifts to make them accustomed to the work routine and giving them time to adjust their family and life role with their work responsibilities. Shift exchange facility can also assist staff in managing both their life roles with ease.
- Exercise facility: Exercise has life transforming benefits. This facility not only reduces stress and anxiety but also keep the employees fit and healthy. A gym can be opened up in hospital premises and time should be given to the employees to avail it while they are at work. This would help the employees to relax and rejuvenate and develop social networks.
- Crèche facility: As women have dominance in nursing arena and in Indian society till date the child care responsibility is primarily a women job, an onsite child care facility with trust worthy care takers would be a blessing in disguise for these working mothers. This facility would not only take away their worries of kids at home and day care centers but also reduce the leaves taken for child care. Such type of family friendly policies would also reduce staff turnover rate. A small step of granting some flexibility to staff for taking care of a sick child or for attending the

parent teacher meeting at school can go a long way in maintaining healthy relations with the employees.

- Telephone access: A feeling of being contactable with the family during work hours provide a sense of security and reduces anxiousness among employees. Hospitals should ensure that all the employees receive urgent phone calls and messages from family members and should have access to telephone for emergencies. This small step taken by the employer may go a way ahead in maintaining happy employees and resolving their work family concerns to certain extent.
- Picnics/Family get-togethers: Bonding with the co-workers is extremely important for stress reduction and job satisfaction. A low expense affair is to arrange team outings or family get together. Such type of activities not only helps in creating cordial relation with the employees and their families but also make employees more committed to the organization. Some organizations fear that such type of informal bonding and free time can be threat to them in the form of union activities. But such type of short term risk is a necessity for long term relation with the employees.
- Structural clarity: Role related stress like job conflict and job ambiguity can be minimized if structural lines are clear and unambiguous. Structural consistency makes employees less anxious as they are aware of the expectations out of their role. Single line of command reduces the confusion and stress associated with it. Though sometimes the shuffling is inevitable but the role of reliable work structures in cushioning stress, both at work and home can't be undermined.
- Creating a 'ME' space: Nursing is stressful job as it is not easy to visualize pain and suffering on regular basis. Sufferings of other take a heavy toll on nurses' mental and emotional state. Hospitals should take initiative to create a comfortable and quiet space where the staff can seek solace and take mental breaks if need be. A bad day at work can be smoothed with a space filled with nature all around and meditational facility and aromas. An introspective environment with peace and solitude would be a remedial measure for body and soul.
- Deferred salary scheme: It is an arrangement in which a portion of an employee's income is paid out at a later date after which the income was earned (Wikipedia). Deferral of salary implies working at a reduced salary for certain time period and setting it aside for later use as paid leave either for family, study or other personal usage. The scheme can be beneficial for employees in sequencing their priorities.
- Making the staff realize power of 'Self Awareness': All the organizational efforts for employees satisfaction may go in vain if the employees are themselves not sure about their goals, likes and wants. Balance can be achieved only when one has clear thoughts about one self and future. It is important that organizations help their employees to assess and evaluate themselves in adjusting work and home demands. Work life balance starts with self awareness. Employees should be encouraged to understand their needs and responsibilities on one hand and correcting the initiator of stress whether physical or emotional on the other hand.
- Encouraging breaks: Mental and physical fatigue can be overcome by encouraging staff to take frequent breaks throughout the work day. This would not only help them to relax but also make them more productive and less prone to stress. Another option may be to encourage employees to 'holiday' by giving them a 'take it or leave it' vacation policy. A policy which remain effective for a limited time period and if not availed within stipulated time, lapses.
- Shared leadership: the role of nurses and midwives has to be evolved as they are the face of health service delivery. Their role needs expansion not only as practitioners but also as leaders. Professional teams led by nurses having complete authority of decision making are the need of the hour. Not only does this expansion will provide them with a sense of recognition but also help in optimizing scarce health personnel (WHO, 2013). Recognition for employees is a must, as employees who feel unrecognized or dissatisfied at work may feel burnout and the state of burnout can cause employees to become disconnected from both work and home as they don't have enough energy to sustain both lives.
- Focus on policy formation and implementation: Policies on work life balance would be effective if and only if they are formulated in consultation with the stake holders. Regular meetings and

discussions between the management and nursing staff should be conducted to discuss the balance issues and formation of work policies that can ease out staff struggles is a pre condition for effective policy making. Putting ideas into reality is another milestone to be achieved. Management should not shy away from policy changes due to inconvenience associated with it as encouraging employees to find a balance between their work and home lives have long-term benefits that would outweigh short term problems of change and implementation.

- Training and learning on the job: Nurses should be provided with opportunities for participating in training programs on the job in the domain of management, soft skills and health safety. Health care organizations should also provide a working environment conducive to developing entrepreneurship/ intrapreneurship among nurses in which the entrepreneurial skills of nurse specialists can be capitalized. Their capabilities and status should be given due recognition both at the corporate as well as societal level.

Work-life balance policies frequently include benefits such as paid maternity leave, leave/ time off, education assistance, health assistance, housing assistance, counseling facility, free medical and disability insurance. Flexible work hours, telecommuting, and job sharing also may encourage work-life balance. Research has indicated that immediate supervisors have a major role in influencing the work-life balance of their subordinates regardless of the organizational policies. Superiors who emphasize work outcome rather than hours spent at work can better enable their employees to balance work and life demands (Life T, 2011).

Conclusion

It is of no doubt that balance between work and life of the employees is a pressing concern for the employers. However, the onus can't be fixed on the organization/employers alone. The importance of the joint contribution of both employers and employees to the successful management of work-life balance is also being recognized. Quick, Henley and Quick (2004) have suggested that employees need to take an active role in managing their own work responsibilities, family obligations and self-imposed expectations by understanding the source of the demands that lead to conflict, making appropriate choices and using a range of strategies. Organizations should also make efforts to identify prime stressors, so that adequate measures should be taken to alleviate these stressors. This could be achieved through workload management, job redesign, and by offering occupational health education. Numbers of studies have reported that the benefits and outcome of work life balance practices are not only for the employees, but also for their families, organizations and society (Lazar et al., 2010). Thus, collaboration among all stake holders, that is, the nursing staff, employers and government is the need of the hour to help this noble profession to sustain and survive and make life of others healthy and happy.

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