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Finding Harmony Amidst the Hustle: Balancing Work and Life and Employee Commitment in Private Healthcare

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Abstract: ***This research looks at how job satisfaction and work-life balance are perceived by hospital workers and how it affects their commitment to the hospital. Researchers employed questionnaires and took into account any gender disparities in order to get a thorough understanding. The study postulated that job satisfaction and work-life balance would together have an impact on staff commitment, drawing on earlier studies. Fascinatingly, the survey's findings indicated that dedication, job satisfaction, and work-life balance were all at moderate levels. One important discovery was the obvious connection between job happiness and work-life balance. Interestingly, commitment was positively correlated with the effects of work on personal life as well as the reverse (personal life on work). Lastly, the research determined how work-life balance manifested itself for men and women, as well as gender disparities in commitment levels.***
Keywords: Hospital staff, Work-life balance, Job satisfaction, Employee Commitment, Healthcare

I. INTRODUCTION

Every employed individual must navigate two significant aspects of their life: work and family. These domains encompass various roles that require fulfilment to maintain a balanced life. Failing to meet the demands of either domain can result in an overall imbalance. In today's diverse workforce, men and women share nearly equal responsibilities compared to the past. However, women, in particular, often shoulder additional responsibilities in managing household tasks. Working women are expected to fulfil these responsibilities while working a standard 40-hour week (O'Kelly, 2002). These additional responsibilities often put women in more challenging positions than their male colleagues. Studies also suggest that men and women hold distinct perspectives on their job and home-related obligations (Lilly et al., 2006). Healthcare professionals, in particular, are vulnerable to such conflicting situations in which the demands of their roles are high both at work and in their family lives.

Studies have demonstrated that conflict can arise in two domains: work-family and family-work. Employees who effectively manage both work and family tend to experience higher levels of satisfaction. Previous research indicates that satisfied employees have lower turnover rates and reduced absenteeism (Glass & Estes, 1997; Allen, 2001; Drago et al., 2001; Halpern, 2005; Thompson & Prottas, 2005; Redmond et al., 2006; Whittard & Burgess, 2007; Noonan & Maume, 2007; Swody & Powell, 2007; Bambra et al., 2008; Nabe-Nielsen et al., 2010).

Azeem and Nadeem (2014) identified work-life conflict as a significant contributor to work-related stress among healthcare employees. Factors such as shift work, emergency situations, staff shortages, and increased work demands contribute to work-life conflict among healthcare workers (Bryson et al., 2007; Fereday & Oster, 2010; Grzywacz et al., 2006).

Work-Life Balance refers to the equilibrium between an individual's work and personal life (Higgins & Duxbury, 2002). The notion of work-life balance arose as a means to tackle concerns such as stress, sadness, and recurrent diseases experienced by employees. Organizations have adopted many employee assistance programs to aid employees dealing with work-life conflicts, resulting in favorable outcomes in reducing the adverse effects of work-family imbalance (Harrington, 2007; Leiter & Durup, 1996). Aycan and Eskin (2005) found that organizational and spousal support are crucial factors in reducing work-family conflict for both men and women. Work-life balance encompasses not only balancing work and family commitments but also includes socializing with friends and relatives, engaging in entertainment, and participating in creative activities (Hughes & Bozionelos, 2007).

Mowday et al. (1979) posited that organizational commitment is a manifestation of the connection between an individual's attitude and action. It involves a strong belief in and acceptance of the organization's goals and values, along with a willingness to invest considerable effort and a strong desire to maintain membership in the organization (Mowday et al., 1982). Blau and Boal (1987) defined organizational commitment as an individual's identification with and loyalty to the organization and its goals.

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Research findings have demonstrated that committed employees are less likely to leave the organization and display higher levels of job satisfaction, motivation, and performance (Meyer et al., 2002; Mathieu & Zajac, 1990).

Findings from previous research have consistently shown that committed employees demonstrate lower intentions to leave their jobs or organizations (Allen & Meyer, 1996; Mathieu & Zajac, 1990; Porter et al., 1976; Porter et al., 1974; Tett & Meyer, 1993) and have lower absenteeism rates (Angle & Perry, 1981; Bateman & Strasser, 1984; Koch & Steers, 1978; Larson & Fukami, 1984; Porter et al., 1974; Steers, 1977; Wasti, 2003; Reichheld, 2001; Riketta, 2002; Stephens et al., 2004).

The balance between work-life and commitment among hospital employees significantly influences the performance and productivity of the hospital (Sakthivel & Kammalanabhan, 2011; Sakthivel & Jayakrishnan, 2012). According to Adam et al. (1996), persons who are deeply engaged in their work are more prone to encountering conflicts between their work and home responsibilities.

Satisfaction of Job is a significant job attitude reflecting an individual's level of contentment or dissatisfaction with their job. It involves the assessment of various job elements (Robbins, 2011). Job satisfaction is defined as a positive emotional state resulting from an individual's evaluation of their job or job experiences (Luthans, 1998). It is shaped by an individual's judgment of the extent to which their employment fulfills their significant requirements. Empirical studies have repeatedly shown that work satisfaction plays a significant role in fostering organizational commitment among employees (Vedamanickam, 2001; Samaratunge, 2003; Kanter, 2004; McNulty & Ferlie, 2004; George & Jones, 2008; Mohamadkhani & Nasiri, 2012; Kahtani, 2012).

Job satisfaction acts as an intermediary variable in the relationship between co-workers' relationships and organizational commitment (Lin & Lin, 2011). Higher levels of job satisfaction are associated with increased commitment (Samavi, 2011; Ilhami, 2012; Hashmi & Naqvi, 2012). Work-life balance is seen as crucial for achieving satisfaction in both home and work life (Lambert et al., 2006). Incompatibility between work and family roles can lead to tension and reduced job satisfaction (Grandey et al., 2005). Individuals experiencing higher work-family conflict tend to have lower satisfaction in their careers and overall lives (Kossek & Ozeki, 1998; Martin et al., 2002; Lambert et al., 2006).

The variables selected for this study have received limited investigation within this specific region. As a result, the researchers intend to examine these variables to generate meaningful findings that can be valuable for future researchers and professionals. Furthermore, the study seeks to authenticate prior research discoveries within a specific cultural framework. Based on empirical evidence,

Hypothesis 1: Perceived work-life balance positive significantly impact employee organizational commitment.
Hypothesis 2: Perceived work interfering family positive significantly impact employee organizational commitment.
Hypothesis 3: Perceived family interfering work-life significantly impact employee organizational commitment.
Hypothesis 4: Satisfaction of Job is significantly impact employee organizational commitment.

II. METHODOLOGY

This study investigates the perceptions of employees on balance in work and life, satisfaction of the job and commitment towards the organization among workers employed in private hospitals. The research included Indian nationals employed as physicians, nurses, and other auxiliary staff at the designated Healthcare centers.

A. Sample

To communicate with the respondents, a straight forward sample approach was used. Based on their willingness to participate and personal ties, hospitals were selected for the research. Out of the 450 respondents who got questionnaires from the five hospitals, only 115 of them successfully completed the survey as directed. A total of 115 respondents, 53 women and 61 men, were working.

B. Study Tool

The following scales were used to gather the required data: A thirteen-item rating scale with seven possible points was used to gauge respondents' perceptions of the balance between work and life. Eight items came from Gutal et al. (1991), and five were modified from Chaney (2007).The 20-item Minnesota Satisfaction Questionnaire was used to gauge employee satisfaction (Weiss et al., 1967). An eleven-item scale adapted from Blau et al.'s work commitment index (1993) was used to evaluate the degree of commitment to the task.

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III. RESULTS AND DISCUSSION

A reasonable degree of work-life balance is shown by the study group's collective average score of 3.5. The participants expressed a belief that work was impeding their family life, with an average score of 4.53, whilst the perception of family impeding work life had an average score of 3.5. In addition, the participants exhibited reduced levels of work satisfaction and commitment, as indicated by mean ratings of 2.5 and 3.85, respectively (see Table 1).

Table 1 : Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Experience	115	1	35	18	5.67
Age	115	20	60	40	6
Work Commitment	115	1.26	6.45	3.85	.315
Perceived work-life balance	115	1	6	3.5	.833
Perceived work interfering family life	115	1	6	4.53	.833
Perceived family interfering work life	115	1	5	3.5	.833
Job Satisfaction	115	1	4	2.5	.5

Source: Authors Compilation

Table 2: Correlation Matrix

	Exp	Age	OC	PWLB	PWIFL	PFIWL	JS
Experience	1.00	0.92	-0.12	0.25	-0.16	-0.15	0.22
Age	0.92	1.00	-0.13	0.24	-0.19	-0.20	0.27
OC	-0.12	-0.13	1.00	-0.08	0.23	0.32	0.30
PWLB	.25	0.24	-0.08	1.00	0.32	-0.23	-0.22
PWIFL	-0.16	-0.19	0.23	0.12	-0.23	0.22	-0.05
PFIWL	-0.15	-0.2	0.32	-0.23	1.00	1.00	-0.17
JS	0.22	0.27	0.30	-0.23	-0.17	-0.17	1.00

Source: Authors Compilation

The study examines the relationship between organizational commitment and employee experience using the Pearson correlation coefficient. Results show in Table 2, a strong positive association between the two variables, with a significant positive link observed in employees' age and experience. However, a modest and negative correlation was found between experience and organizational commitment, suggesting potential overlooked factors impacting commitment.

Table 3: Regression Matrix

Variable	Coefficient	Standard error	t value	p-value
Experience	-0.32	0.14	-2.29	0.03
Age	0.07	0.04	1.68	0.09
OC	0.12	0.06	2.02	0.05
PWLB	0.20	0.09	2.22	0.03
PWIFL	-0.09	0.08	-1.12	0.23
PFIWL	0.28	0.10	2.87	0.01
JS	0.16	0.07	2.24	0.03

Source: Authors Compilation

According to Table 3, a small but positive link (r=0.25) between the employee experience and subjective assessments of their personal and professional lives was discovered by the research. The influence of family perspective on work-life balance and job satisfaction was also investigated in this research, however.

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According to the regression analysis, respondents' commitment is influenced by their opinion of how much their families interfere with their work. R2 is 0.39, which suggests that 39% of the variation in job commitment is accounted for by the perception of family interference in the workplace. The results partially support hypothesis number 10.

IV. CONCLUSION

Based on the obtained findings and previous research, it can be concluded that work-life balance and job satisfaction play significant roles in developing and enhancing organizational commitment among healthcare workers (Scholarios & Marks, 2006; Sakthivel & Kamalanabhan, 2011; Sakthivel & Jayakrishnan, 2012; Azeem & Nadeem, 2014). Dedicated and content healthcare professionals are essential for cultivating a favorable reputation and perception of hospitals among clientele.

The study's inclusion of female workers intends to investigate how they view their professional and personal lives. Women are limited to some professions in Visakhapatnam, and healthcare is one of them. Public and private hospitals employ a sizable portion of Saudi male and female workers. Regardless of whether they have family obligations, everyone who works for a living must consider work-life balance (Dex & Scheibl, 2001; Fu & Shaffer, 2001; Rotondo et al., 2003).

The poll yielded intriguing findings indicating that female employees exhibit higher levels of job commitment compared to their male colleagues. According to Grover and Crooker (1995), this indicates that female employees have a genuine and positive attitude towards their assigned jobs. Additionally, female employees reported higher ratings for perceived work-life conflict and family-life conflict. Their family responsibilities, social norms, hospital policies, and workplace culture may all be to blame for this. These results are consistent with other studies (Grover and Crooker, 1995; Reed et al., 1994; Byron, 2005; Carlson, 1999; Dixon and Sagas, 2007; Frone, Russell, and Cooper, 1992; Hughes and Galinsky, 1994; Kirchmeyer, 1998; Kirkwood & Tootell, 2008; Harris, 2004). The maintenance of this equilibrium is crucial for leading a happy life. Work-life imbalances provide myriad obstacles and difficulties for men, eventually affecting their performance and familial connections.

V. LIMITATIONS OF THE STUDY

This study's limited ability to generalize its conclusions resulted from the data being gathered from just five hospitals in one location. It was also difficult to get volunteers since hospitals usually need institutional review board clearance before permitting participation in study.

VI. RECOMMENDATIONS

Jobs in all sectors are continually changing due to worker demographic shifts and technological improvements, and the healthcare industry is no exception. This change is reflected in the increasing complexity and demands placed on hospital functions. Hospitals are vital for making lives better, but it's imperative that their administration places a high priority on staff members' work-life balance. By putting such rules into place, hospitals can cultivate a committed and contented staff. Hospitals have a competitive advantage because contented workers are priceless assets.

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VII. CONFLICTS OF INTEREST

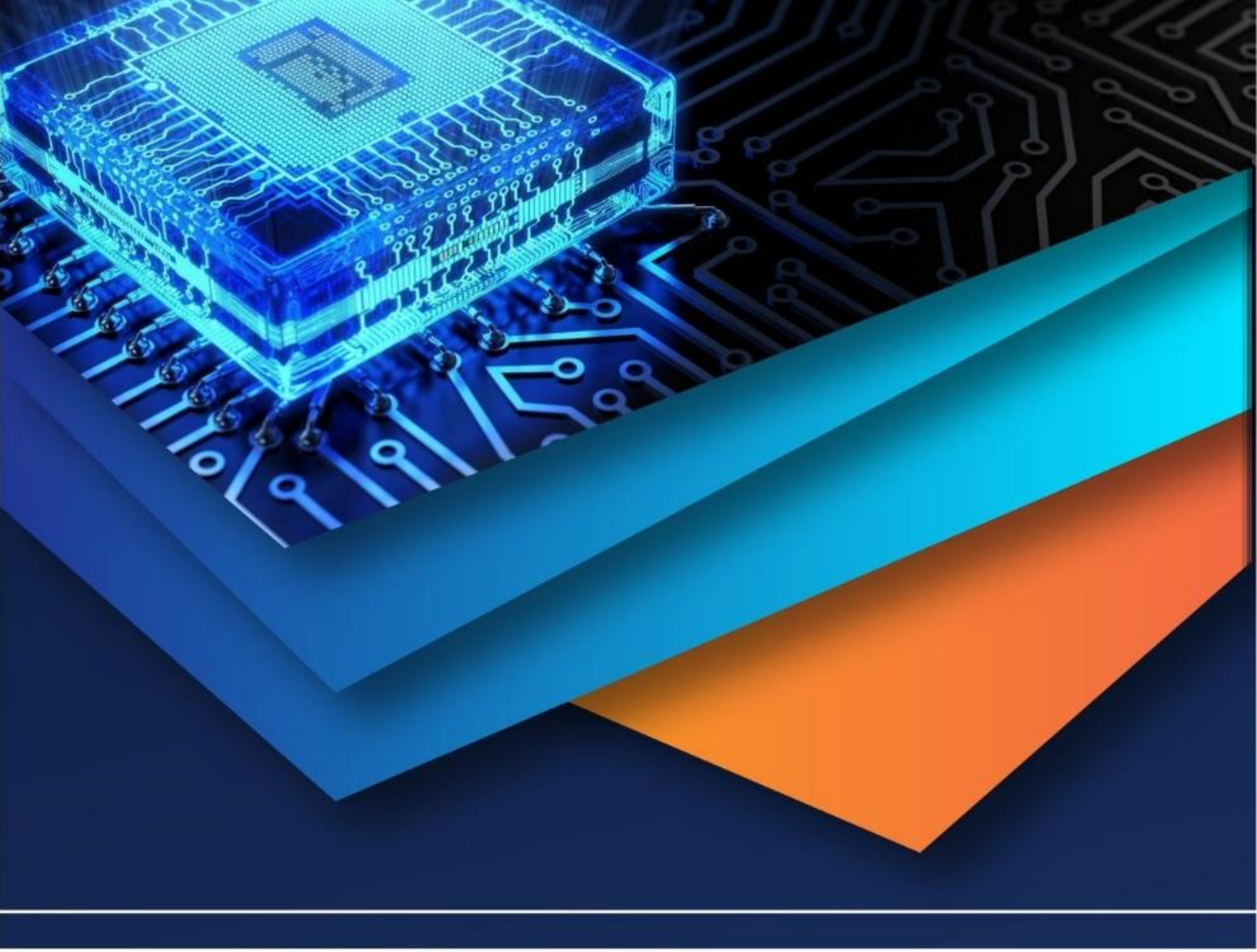
The authors declare that they have no competing interests.

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