Relationship Between Nurses’ Work Life Interference and Job Performance

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Abstract
Introduction: Many healthcare employees are dissatisfied with their job and working conditions. Frequently, their job dissatisfaction involves stressful situations that result in work-related illness, long-term absenteeism and lack of performance. Aim: Assess the relationship between nurses’ work life interference and job performance. Study design: A descriptive correlational research design was used. Setting: The study conducted in General ICU at Assiut University Hospital. Subject and Method: The study subject consisted of (44) nurse working in General ICU at Assiut University Hospital. The data collected through self-administered questionnaire which includes personal characteristics data, Work Interference with Personal Life Scale, and Observational Performance Checklist tool. Results: More than half of the studied nurses reported they are all the time put personal life on hold for work, job performance level of the studied nurses was satisfactory and there was no statistical significance difference between nurses' personal data and studied variables Conclusion: There was a significant negative correlation between nurses' work life interference and job performance. Recommendations: Formulate a team-based management and training for all departments, and nurse manager should use democratic leadership style in supervision to increase nurses' commitment.

Keywords: Nurses, Work Life Interference & Job Performance.

Introduction
International changes and developments that occur in the world, such as globalization and changes in technology, place a lot of pressure on organizations to perform continuous to the international standard. A new time in history of computer time (as a result of the use of laptops, cell phones and tablets) has developed a reality in organizations, leading to more work-life conflict due to unnatural time pressures on the workers to perform. These worldwide challenges influence organizations by raising their prospects thinking about their workers' time, performance and energy (Soní, 2013). Human resource professionals have noted the need to be inclusive in approaching the issue of work interferes life outside of work, yet we actually know little about how work interferes with other roles than family and how that affects employee well-being (Schieman et al., 2009). Work life balance has three dimensions, namely, work/ personal life improvement, personal life interference with work and work interference with personal life (Keeney et al., 2013).

Work-life interference defined as a form of inter-role conflict that happens when the role demands coming from one domain (work or family) interfere or are incompatible with role demands stemming from the other domain (family or work). Both directions of conflict have been connected with a variety of negative results in both the work and the family domain, such as decreased family and job satisfaction, stress, absenteeism, depression, high rates of injuries, higher employee turnover and reduced work performance (Craig & Mullan, 2010). The performance of a health organization depends on the knowledge, skills and motivation of individuals. It is therefore important for employers to provide appropriate working conditions to ensure that the performances of employees meet the desired standards (Awases et al., 2013).

Job performance is defined as "a coordinated effort to do tasks include converting inputs to outputs with quality matching up with the skills, abilities and experience of working, with the help of the supporting factors and the environment, the appropriate action to make this effort exactly, the shortest time and less expensive" (Al-Hawary & Alajmi, 2017).

Significance of the study
While the researcher conducted clinical training with students in the Assiut University Hospital, observed a problem that nurses who have more family responsibilities especially married, became more exhausted, have more workload that reflected by absenteeism which affect on their job performance and by reviewing literatures found that there were
three internationally studies published in professional journals, the first one titled by "Flexibility and work-life interference in Australia." done by Skinner & Pocock, (2011) the second one titled by "managing personal and professional life: An Empirical Study" done by Ameta, (2014) the third one titled by 'Employee Performance at Workplace: Conceptual Model and Empirical Validation' done by Kumar & Kesari, (2017) Furthermore, no national& international studies dealing with the relationship between work life interference and job performance of nurses. This was the motive for the researcher to assess the relationship between nurses' work life interference and job performance in General ICU at Assiut University Hospital.

**Aims of the study**
1. Assess the relationship between nurses’ work life interference and job performance in General ICU at Assiut University Hospital.
2. Assess the relationship between nurses’ personal data, work life interference and job performance.

**Research questions**
Q1. Is there nurses' work life interference?
Q2. Is the nurses' job performance satisfactory?
Q3. Are there relationship between nurses' personal data, work life interference and job performance?
Q4. Is there a relationship between nurses' work life interference and job performance?

**Subject & Method**

The study was portrayed according to the four following designs:

I. Technical design.
II. Administrative design.
III. Operational design.
IV. Statistical design.

**Technical design**
This design was involved the study design, setting, subject, and data collection tools.

**Study design**
A descriptive correlational research design was used in the present study.

**Setting**
The study was conducted in General ICU at Assiut University Hospital with capacity (18) beds from the total hospital number (1700) beds.

**Subject**
A convenient sample was used with total numbers (44 nurses) who are females working in General ICU at Assiut University Hospital.

**Data collection tools: Two tools were used in the present study.**

**Tool 1:** A structured self -Administered questionnaire sheet which consists of two parts:-

**Part (1):** Personal characteristics data sheet which includes data about: age, gender, marital status, educational qualification and years of work in ICU.

**Part (2):** Work Interference with Personal Life (WIPL) Scale developed by Fisher-McAuley et al., (2003) and validated by Hayman, (2005). The scale consists of (97 items) measuring the balance between an nurses' professional and personal life using five-points Likert scale which ranging from 1 for (not at all) to 5 for (all the time).

**Tool (II): Observational Performance Checklist tool:** which includes (77 items), (55 items) adopted from Youssif et al., (2017) which includes attendance and punctuality (3 sub items), appearance (4 sub items), work habits (8 sub items), staff relations and communication (6 sub items). Communication with patients (7 sub items), nursing care plan activities (8 sub items), material planning (1 sub item), safety measures and patient safety (6 sub items), documentation (6 sub items), coordination (1 sub item), and keeping up to date technically (5 sub items) and (22 items) added to nursing care plan activities adopted from last version of Log book Manual for the Egyptian Ministry of Health and Population, (2012) and modified by the researcher.

**Scoring system**
The responding scoring system was measured by (0) for not done, and (1) for done. If the participants obtained ≥70% it means participants had satisfactory level of job performance, if the participants obtained <70% it means the job performance level was unsatisfactory (Oladokun, & Adebano, 2008).

**Administrative design**
Official approval to carry out this study was obtained from the Dean of Faculty of Nursing - Assiut University, Director of Assiut University Hospital, Head of General ICU, Nursing Director, and Nurses in General ICU to be able to collect the necessary data for the pilot study and then to collect the necessary data for the present study.

**Ethical Considerations**
Research proposal was approved from Ethical Committee at the Faculty of Nursing, Assiut University, there is no risk for study participants during application of the research, the study was followed common ethical principles in clinical research, oral agreement was obtained from the participants in the present study, study participants have the right to refuse, to participate and/or withdraw from the study without any rational at any time, confidentiality and anonymity was assured during collection of data.
Operational design
Preparatory phase
- This phase took about three months from November 2018 to January 2019 to end the proposal of the study.
- After reviewing the available literatures concerning the topic of the study, an Arabic translation of the study tools was done.
- The face validity of the study tools (Work Interference with Personal Life (WIPL) Scale & Observational Performance Checklist tool) was reviewed by five experts from the Nursing Administration Department- Faculty of Nursing – Assuit University.

A pilot study
- A pilot study was conducted in three days from 28-30/1/2019 on five nurses which represent (10%) from total study participants but working in Trauma ICU not in General ICU to ensure the clarity, accessibility and understandability of the study tools and for time estimation before actual data collection because the study sample is small. The data obtained from the pilot study was analyzed and no changes were done for the study tools.
- The study tools were tested for its reliability by using Crombach’s Alpha Co-efficient test, it was \( \alpha = 0.858 \) for Work Interference with Personal Life (WIPL) Scale, and it was \( \alpha = 0.812 \) for Observational Performance Checklist tool. Thus indicates a high degree of reliability for the study tools.

Work field
- The researcher met with each nurse in the study to explain the purpose of the study. After obtaining oral consent, the study tool was handled to the participated nurses to be filled through self-administered questionnaire to assess nurses' work life interference. Each participant took about fifteen minutes to fill the questionnaire.
- Then data was collected to assess nurses' job performance in General ICU at Assuit University Hospital done by the researcher using direct observation checklist three times for each nurse during the six hours of the morning shift and the evening shift. The whole duration for data collection took about three months from February to April 2019.

Statistical design
Data entry and statistical analysis were done using SPSS 22 Statistical Soft Ware Package. Data were presented using descriptive statistics in the form of frequencies, percentages, mean, standard deviation, range, and chi-square. Pearson correlation analysis was used for assessment of the inter-relations among quantitative variables. Statistical significance was considered at P-value ≤ 0.05.

Results
Table (1): Distribution of personal characteristics of the studied nurses working in General ICU at Assuit University Hospital (n=44).

<table>
<thead>
<tr>
<th>Items</th>
<th>No. (44)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age:</strong>&lt;br&gt; (years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 25</td>
<td>23</td>
<td>52.3</td>
</tr>
<tr>
<td>≥ 25</td>
<td>21</td>
<td>47.7</td>
</tr>
<tr>
<td>Mean ± SD (Range)</td>
<td>24.25 ± 2.01 (21.0 – 28.0)</td>
<td></td>
</tr>
<tr>
<td><strong>Educational qualification:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary School of Nursing</td>
<td>3</td>
<td>6.8</td>
</tr>
<tr>
<td>Technical Institute of Nursing</td>
<td>41</td>
<td>93.2</td>
</tr>
<tr>
<td><strong>Marital status:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>19</td>
<td>43.2</td>
</tr>
<tr>
<td>Single</td>
<td>25</td>
<td>56.8</td>
</tr>
<tr>
<td><strong>Years of experience in General ICU:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>≤ 3</td>
<td>21</td>
<td>47.7</td>
</tr>
<tr>
<td>&gt; 3</td>
<td>23</td>
<td>52.3</td>
</tr>
<tr>
<td>Mean ± SD (Range)</td>
<td>3.10 ± 1.80 (1.0 – 7.0)</td>
<td></td>
</tr>
</tbody>
</table>
Table (2): Mean score of work life interference items as reported by the studied nurses working in General ICU at Assuit University Hospital (n=44).

<table>
<thead>
<tr>
<th>Items</th>
<th>Mean ± SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>My personal life suffers because of work.</td>
<td>4.25 ± 0.72</td>
</tr>
<tr>
<td>I miss personal activities because of work.</td>
<td>4.27 ± 0.79</td>
</tr>
<tr>
<td>I neglect personal needs because of work.</td>
<td>4.02 ± 1.02</td>
</tr>
<tr>
<td>I put personal life on hold for work.</td>
<td>4.25 ± 1.01</td>
</tr>
<tr>
<td>I struggle to juggle work and non-work.</td>
<td>3.73 ± 0.90</td>
</tr>
<tr>
<td>My job makes personal life difficult.</td>
<td>4.11 ± 1.02</td>
</tr>
<tr>
<td>I am happy with the amount of time for non-work activities.</td>
<td>4.05 ± 1.08</td>
</tr>
</tbody>
</table>

Fig. (1): Distribution of job performance level among studied nurses as observed in General ICU at Assuit University Hospital (n=44)

Table (3): Relationship between nurses' personal data, work life interference and job performance in General ICU at Assuit University Hospital (n=44)

<table>
<thead>
<tr>
<th>Personal data</th>
<th>Work interference with personal life Mean ± SD</th>
<th>Performance score Mean ± SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 25</td>
<td>28.74 ± 4.87</td>
<td>61.09 ± 3.38</td>
</tr>
<tr>
<td>≥ 25</td>
<td>28.62 ± 4.97</td>
<td>60.57 ± 6.93</td>
</tr>
<tr>
<td>P-value</td>
<td>0.936</td>
<td>0.752</td>
</tr>
<tr>
<td>Educational qualification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary School of Nursing</td>
<td>28.67 ± 3.51</td>
<td>60.67 ± 0.58</td>
</tr>
<tr>
<td>Technical Institute of nursing</td>
<td>29.61 ± 4.97</td>
<td>61.78 ± 5.50</td>
</tr>
<tr>
<td>P-value</td>
<td>0.721</td>
<td>0.784</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>29.16 ± 5.10</td>
<td>61.32 ± 7.08</td>
</tr>
<tr>
<td>Single</td>
<td>28.32 ± 4.75</td>
<td>60.48 ± 3.56</td>
</tr>
<tr>
<td>P-value</td>
<td>0.578</td>
<td>0.611</td>
</tr>
<tr>
<td>Years of experience in General ICU</td>
<td></td>
<td></td>
</tr>
<tr>
<td>≤ 3</td>
<td>26.71 ± 5.03</td>
<td>60.24 ± 3.69</td>
</tr>
<tr>
<td>&gt; 3</td>
<td>28.65 ± 4.82</td>
<td>61.39 ± 6.49</td>
</tr>
<tr>
<td>P-value</td>
<td>0.967</td>
<td>0.479</td>
</tr>
</tbody>
</table>

P-value at ≤0.05
Fig. (2): Correlation between nurses' work life interference and job performance as reported by nurses in General ICU at Assuit University Hospital (n=44)

Table (1): Illustrates that the majority of nurses have diploma of Technical Institute of Nursing (93.2%), more than half of them are single, aged < 25 years old and have years of experience in General ICU > 3 years (56.8% & 52.3% & 52.3%) respectively.

Table (2): Illustrates that, the highest mean score regarding to work life interference are related to items "I miss personal activities because of work, my personal life suffers because of work and I put personal life on hold for work" (4.27 ± 0.79, 4.25 ± 0.72 & 4.25 ± 1.01) respectively.

Fig. (1): Reveals that, the majority of studied nurses had satisfactory level of job performance (93.2%).

Table (3): Shows that, there are no statistical significance differences between nurses' personal data, work life interference and job performance.

Fig. (2): Reveals that, there is a significant negative correlation between nurses' work life interference and job performance (0.046*).

Discussion
As revealed from the current study, the highest mean score regarding to work life interference were related to items "I miss personal activities because of work, my personal life suffers because of work, and I put personal life on hold for work" (table, 2). This might be attributed to that shortage of staff nurses in ICU let them take evening and night shifts more than nurses in other units which leads to missing personal activities, also socialization that occur between nurses in work give them more involvement and interfere in each other personal problems which lead them suffers from work.

The findings were consistent with Schaufeli et al., (2009) who stated that work interference with family is typically measured by phrases such as “my work takes up time that I would like to spend with my family.” Work interference with a domain affects quantity or quality of involvement within life domain.

Ongoing on the study findings, reveals that, the majority of studied nurses had satisfactory level of job performance (93.2%), (fig, 1). This result might be attributed to that the best method of giving patient care is case method which most commonly used in ICU that allow nurses to be all time in close contact with patients and doing all tasks, by repeats giving direct nursing care during shifts, their experiences and performance is improved.

These finding is consistent with Scholtz et al., (2016) who mentioned that critical care nursing focuses intensively on all aspects of basic nursing care and life support, and thus combine the essence of nursing with observation, insightful and even intuitive interpretation and reactions to the slightest imbalance or deviations in a patient's condition. Critical care nurses in their efforts to provide quality of care to critically ill patients have to face many challenges within their work environment.

Also these finding is consistent with Sharafi et al., (2018) who stated that case method or total patient care is the primeval technique of delivering care to a patient. The principle of the case method is that one nurse is accountable for the complete care for one or more patient throughout work time.

Moreover, the study findings revealed that, the highest mean score of nurses' personal data (age, educational qualification, marital status and years of
The study findings illustrated that, there was a significant negative correlation between nurses’ work life interference and job performance (0.046*) (figure, 2). This might attributed to when nurses separate their personal problems away from work and vice versa, this will lead to less interfere between nurses’ work and personal life and become more happy and satisfied and this will reflected on their job performance.

This finding was consistent with Moon & Jongho, (2010) who examined the relationship between family-friendly policies and job performance, and concluded that a balance between work and family is the strongest predictor of employees’ job performance.

In addition, the current study finding was consistent with Stock et al., (2013) who stated that work life interference symptoms that an employee may experience include feelings of stress and exhaustion, it may contribute to lower job performance.

Conclusions
In the light of the study results, the following conclusions can be drawn

More than half of the studied nurses reported that they were all the time put personal life on hold for work, personal life suffers because of work and put personal life on hold for work, job performance of the studied nurses was satisfactory, there were no statistical significance differences between nurses' personal data, work life interference, and job performance and there was a significant negative correlation between work life interference and job performance.

Recommendations
In the light of the results of this study the following recommendations will be suggested:

1- Nurse Managers must employ strategies to enhance workplace conditions that reduce nurses' work life interference and improve their performance.

2- Formulate a team-based management and training for all departments such as the emergency room, operating room and intensive care units could be done to better allocate and integrate the workforce in a hospital.

3- Appropriate human resource strategies that can promote the development of sustainable workforces in the health care hospital and balancing, managing work, and personal responsibilities should be formulate.

4- Nurse must attend training program about work life interference and job performance.
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