

## Relationship Between Nurses' Work Life Interference and Job Performance

Heba Mostafa Ali<sup>1</sup>, Fatma Rushdy Mohamed<sup>2</sup> & Soad Ahmed Ghallab<sup>3</sup>.

<sup>1</sup>: Assistant Lecturer of Nursing Administration Department, Faculty of Nursing, Assiut University, Egypt.

<sup>2</sup>: Professor of Nursing Administration, Faculty of Nursing, Assiut University, Egypt.

<sup>3</sup>: Assist. Professor of Nursing Administration, Faculty of Nursing, Assiut University, Egypt.

### 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 (Soni, 2013).

Human resource professionals have noted the need to be inclusive in approaching the issue of work interferes with 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)<sup>3</sup>. 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.

#### 1- 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 I:** 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 (7 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 ppunctuality (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), nnursing 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  $\geq 70\%$  it means participants had satisfactory level of job performance, if the participants obtained  $< 70\%$  it means the job performance level was unsatisfactory (**Oladokun, & Adebajo, 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 of 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 – Assiut 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 Assiut 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  $\leq 0.05$ .

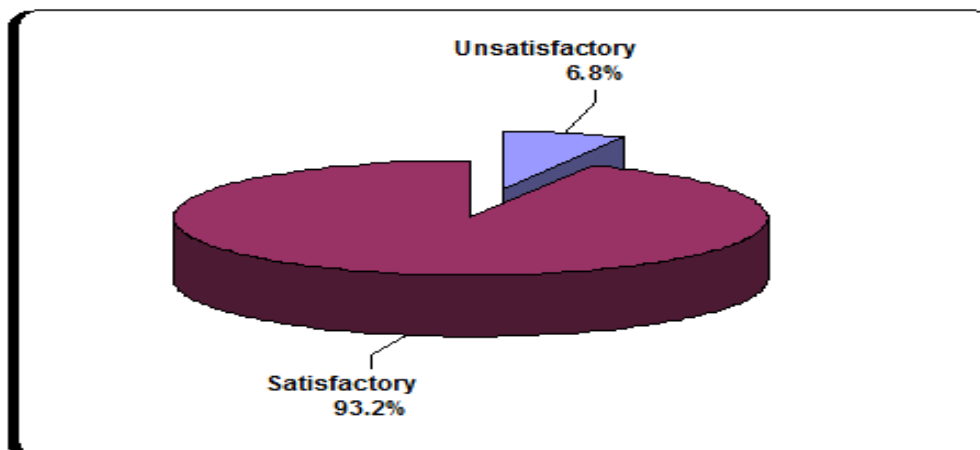
**Results**

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

Items	No. (44)	%
<b>Age: (years)</b>		
< 25	23	52.3
$\geq 25$	21	47.7
Mean $\pm$ SD (Range)	24.25 $\pm$ 2.01 (21.0 – 28.0)	
<b>Educational qualification:</b>		
Secondary School of Nursing	3	6.8
Technical Institute of Nursing	41	93.2
<b>Marital status:</b>		
Married	19	43.2
Single	25	56.8
<b>Years of experience in General ICU:</b>		
$\leq 3$	21	47.7
$> 3$	23	52.3
Mean $\pm$ SD (Range)	3.10 $\pm$ 1.80 (1.0 – 7.0)	

**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).**

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

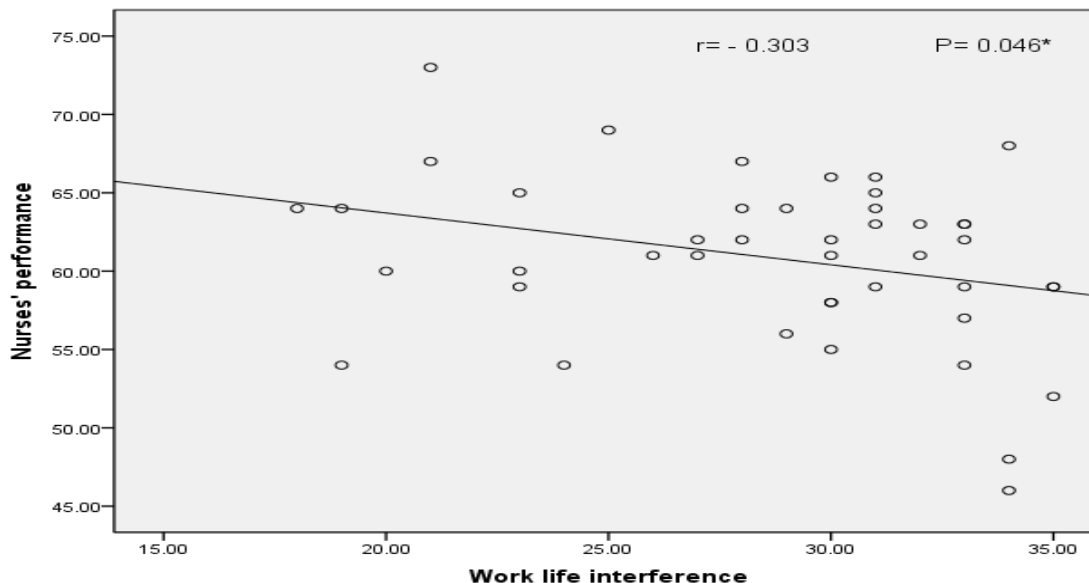


**Fig. (1): Distribution of job performance level among studied nurses as observed in General ICU at Assuit University Hospital (n=44)**

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

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

P-value at ≤0.05



**Fig. (2): Correlation between nurses' work life interference and job performance as reported by nurses in General ICU at Assiut 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" ( $4.27 \pm 0.79$ ,  $4.25 \pm 0.72$  &  $4.25 \pm 1.01$ ) 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

experience) regarding to work life interference and job performance were related to nurses who aged < 25 years old, have diploma of Technical Institute of Nursing, married and have more than 3 years of experience & there were no statistical significance differences between nurses' personal data, work life interference and job performance (**table, 3**). This might be attributed to that when nurses are young, they have less knowledge, practice and experience, they will be less in efficiency to deal with work problem and cannot able to make balance between her work and personal life and lead to decrease performance, also about 80.8% of study subjects are married and the married nurses have more responsibilities and duties toward their families, and more problems. This reason makes their work life more interfere with personal life and increase imbalance in their life than unmarried nurses.

The result of this study is in line with the research conducted by **Sulistiyowati, (2012)** who found that there was no relationship between age and nurse achievement of job performance targets. Also consistent with **Mitra, (2012)** who stated that there did not any significant relationship between age of employee and his feeling (happiness/unhappiness) about the amount of time spent at work.

In addition, these finding was consistent with **Morika et al., (2019)** who mentioned that there was no relationship between educational qualification and the job performance of nurses.

While, these finding was inconsistent with **Ameta, (2014)** who found that there was a relationship between age, educational qualification and work life interference which work life interference score is higher among 20- 25yrs and more educated than non-educated.

Also, these finding was inconsistent with **Fujino, (2015)** who conducted a study titled by the analysis of the influence of years of experience on nursing performance and revealed that there was a relationship between nurses' years of experience and their job performance which nurses with high ability in the situational domain showed improved nursing performance with more years of experience, whereas nurses with low years of experience demonstrated no improvement in their nursing job performance.

Moreover, this findings was inconsistent with **Yulistiana, (2018)** who stated that there was a relationship between nurses' marital status and work life interference and a nurses' marital status influences a nurses' behavior in the life of his organization, nurses who are married have fewer absences, experience a lower turnover and are more happy & satisfied with their work, have more balance life and less interference than their colleagues unmarried.

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.

## References

1. **Al-Hawary, S., & Alajmi, H., (2017):** Organizational Commitment of the Employees of the Ports Security Affairs of the State of Kuwait: The Impact of Human Recourses Management Practices. *International Journal of Academic Research in Economics and Management Sciences*, Vol.6, No. 1, P.p 52-78.
2. **Ameta, K., (2014):** Managing Personal and Professional Life: An Empirical Study, *AEIJMR*, Vol. 2, No. 4, P.p (1- 6) .
3. **Awases, M., Bezuidenhout, M., & Roos, J., (2013):** ‘Factors affecting the performance of professional nurses in Namibia’, *Curationis* Vol.36, No. 1, P.p 100- 108. <http://dx.doi.org/10.4102/curationis.v36i1.108>.
4. **Craig, L., & Mullan, K., (2010):** ‘Parenthood, Gender and Work- Family Time in the United States, Australia, Italy, France, and Denmark’, *Journal of Marriage and the Family*, Vol. 72, No. 1, P.p 1344–1361.
5. **Fisher-McAuley, G., Stanton, J., Jolton, J., & Gavin, J., (2003):** Modelling the relationship between work life balance and organizational outcomes. Paper presented at the Annual Conference of the Society for Industrial-Organizational Psychology. Orlando, April 12, 2003, P.p 1–26.
6. **Fujino Y., Tanaka M., Yonemitsu Y., Kawamoto R., (2015):** The relationship between characteristics of nursing performance and years of experience in nurses with high emotional intelligence, *International Journal of Nursing Practice*, Vol. 21 , No.6, P.p 876–881.
7. **Hayman, J. (2005):** Psychometric assessment of an instrument designed to measure work life balance. *Research and Practice in Human Resource Management*, Vol .13, No. 1, P.p 85–91.
8. **Keeney, J., Boyd, E., Sinha,R., Westring, A. & Ryan, A. (2013):** ‘From “work-family” to “work-life”’: Broadening our conceptualization and measurement’ in *Journal of Vocational Behavior*, Vol. 82, No. 1, P.p 221-237.
9. **Kumar, R., & Kesari, L., (2017):** Employee Performance at Workplace: Conceptual Model and Empirical Validation, *Business Perspectives and Research*, Vol.5, No. 1, P.p 1–17. DOI: 10.1177/2278533716671630 <http://bpr.sagepub.com>.
10. **Mitra, D., (2012):** The role of work-life balance as a work-force management tool, *The Indian Journal of Commerce*, Vol. 65, No. 2, P.p 83-94.
11. **Moon, S., & Jongho, R., (2010):** Balancing work and family in South Korea’s public organizations: Focusing on family-friendly policies in elementary school organizations, *Public Personnel Management*, Vol. 39, No.2, P.p 117-131.
12. **Morika, H., Suharizal, K., & Yasmi, L., (2019):** Characteristics and motivation with nurse performance in applying patient safety in hospital, *International Journal of Community Medicine and Public Health* ,Vol.6, No.1, P.p 44-50. <http://www.ijcmph.com>.
13. **Oladokun, V., & Adebajo, O., (2008):** Predicting students' academic performance using artificial neural network: A case study of an engineering course, *The Pacific Journal of Science and Technology* , Vol. 9, No. 1, P.p 72-79. <http://www.akamaiuniversity.us/PJST>
14. **Schaufeli, W., Shimazu, A., & Taris, T., (2009):** Being driven to work excessively hard: The evaluation of a two-factor measure of workaholism in the Netherlands and Japan. *Cross-Cultural Research*, Vol. 43, No. 4, P.p 320–348.
15. <http://dx.doi.org/10.1177/1069397109337239>.
16. **Schieman, S., Milkie, M., & Glavin, P., (2009):** When work interferes with life: Work-non work interference and the influence of work-related demands and resources. *American Sociological Review*, Vol. 74, No. 6, P.p 966-988.
17. **Scholtz, S., Elsabe, W., & Marie, P., (2016):** The culture of Nurses in a Critical Care Unit, *Global Qualitative Nursing Research* , Vol. 3, No. 1, P.p 1-11.
18. **Sharafi, S., Chamanzari, H., Pouresmail, Z., Rajabpour, M., & Bazzi, A., (2018):** The effect of case method and primary nursing methods on the social dimensions in quality of patient care, *J Holist Nurs Midwifery*, Vol. 28, No.4, P.p 252-258.
19. **Skinner, N., & Pocock, B., (2011):** Flexibility and work-life interference in Australia, *Journal of Industrial Relations*, Vol. 53, No. 1, P.p 65-82.
20. **Soni, P., (2013):** The struggle to juggle: Work-life balance at a private company in Durban, South Africa, *Journal of Management & Administration*, Vol.11, No.1, P.p 34-56.
21. **Stock, R., Bauer, E., & Bieling, G., (2013):** How do top executives handle their work and family life? A taxonomy of top executives’ work-family balance. *The International*

- Journal of Human Resource Management, Vol. 25, No.13, P.p 1-26.
22. **Sulistiyowati, D., (2012):** Analysis of the factors that influence the achievement of the target performance of individual nurses implementing based on individual performance index in the building of RSUP Dr. Cipto Mangunkusumo Jakarta, Thesis.
  23. **The Egyptian Ministry of Health & Population, (2012):** Nursing Guide Line. [http://www.mohip.gov.eg/Publication.aspx?cat\\_id=1019](http://www.mohip.gov.eg/Publication.aspx?cat_id=1019)
  24. **Youssif, A., Eid, N., &Safan, S., (2017):** Staff Performance Appraisal System and its Relation to Their Job satisfaction and Empowerment: Developing Performance Appraisal Tool. IOSR Journal of Nursing and Health Science. Vol. 6, No. 2, P.p 25-26. ISSN: 2320–1959. Available at: [www.iosrjournals.org](http://www.iosrjournals.org).
  25. **Yulistiana, R., (2018):** Relationship between Organizational Communication and Performance of Executing Nurses in Inpatient Rooms One of Surabaya Private Hospitals, Master Thesis of Nursing, University of Indonesia Jakarta. Available at: [www.lontar.ui.ac.id/file?file=pdf/abstrak-20282765.pdf](http://www.lontar.ui.ac.id/file?file=pdf/abstrak-20282765.pdf).