



Research Paper

## Work-family Conflict and Psychological Wellbeing: The Moderating Impact of Job Motivation

OLOWODUNOYE, S.A.

Department of Pure and Applied Psychology,  
Adekunle Ajasin University, Akungba-Akoko

### Abstract

Efficiency and maximum productivity of nurses may be a function of high level of psychological well-being but this may be affected by some psychosocial factors (Work-family conflict and job motivation). Therefore, this study examined the prediction of work-family conflict on psychological well-being and the moderating impact of job motivation. A cross-sectional survey design was adopted for this study. With a convenient sampling technique, a total of two hundred and fifty nurses (125males and 125 females) within the age Of 18-57 (Mean = 41.44, SD = 12.08) were selected for this study. Work-family conflict was measured with Work-family Conflict Scale ( $\alpha = .80$ ), job motivation was measured with Work Extrinsic and Intrinsic Motivation Scale ( $\alpha = .67$ ) and psychological well-being using Psychological Well-being Scale ( $\alpha = .67$ ). Hierarchical Multiple Regression was employed to test the hypotheses formulated. Results showed that work-family conflict significantly predicted psychological well-being ( $\beta = -.37, t = -6.41, p < .01$ ), job motivation too significantly predicted psychological well-being ( $\beta = .24, t = 1.98, p < .05$ ) and as well moderated the effect of work-family conflict on psychological well-being ( $\beta = -.90, t = -3.67, p < .01$ ). It was therefore concluded that work-family conflict was a strong factor that could affect the psychological well-being of nurses, but job motivation could buffer the effect of work-family conflict on psychological well-being. The recommendation is that nurses should be trained on how to balance work and family roles and hospital management board should put in more effort at motivating the nurses.

**Keywords:** Work-family conflict, job motivation, psychological well-being, nurses.

Received 10 August, 2021; Revised: 24 August, 2021; Accepted 26 August, 2021 © The author(s) 2021. Published with open access at [www.questjournals.org](http://www.questjournals.org)

### I. INTRODUCTION

Over the years now, researchers seem to have focused their researches on the human resources in the organization. This has to do with the maximum effectiveness and productivity of employees and this is not unconnected with the psychological well-being of individual employee in the organization. Psychological well-being deals with the stability of individual personality. Employee's psychological well-being may be considered a very paramount factor in achieving the best in any organization. If nurses are not psychologically stable, to coordinate themselves, others and even attend promptly to patient may be a little bit difficult, and this can go a long way to affect the productivity of such nurse and the organization at large. For years, efforts have been made by researchers from different fields to really understand the concept and correlates of psychological well-being (Bada, Balogun & Adejuwon, 2013), and this effort is still ongoing and expanding on a daily basis as several factors affect psychological well-being at the workplace and in the family.

Psychological well-being is a combination of positive and affective state (happiness) and being productive in individual and social life (Deci & Ryan, 2008). Huppert (2009) further reinstates that psychological well-being deals with wellness in life, that is, feeling good and functioning effectively. This definition suggests that nurses with high level of psychological well-being may likely report the feelings of being happy, capable, competent and satisfaction with life in general. In fact, it has been stated that when nurses feel good, experience productivity and high level of well-being, there will be healthy workplace interactions (Avey, Reichard, Luthans and Mhatre (2010). The belief that psychological well-being can be ascertained when mental or emotional disturbances are absent can be false (Ryff, 1989), since there is hardly any individual without some type of emotional interruptions. Psychological well-being may therefore be considered as a positive state of physical, mental, emotional and social well-being of an individual.

Following the trend of events in recent times, it seems psychological well-being problem in the society is on the rise due to challenging situations in the country. These challenging situations may include insecurity, irregular payment of workers salary in which the nurses are not exempted, unconducive working condition just to mention few of these challenges. These challenges may exert negative impact on psychological well-being of nurses leading to low level of performance and efficiency. This workplace effect may as well affect the family life of nurses.

Challenges affecting psychological well-being of nurses from the workplace may spillover to the family arena, thereby resulting in work-family conflict. This study actually aimed at investigating the impact of work-family conflict on psychological well-being of nurses and look at the moderating effect of job motivation as well. One of the challenges that nurses may likely encounter is how to combine work and family roles successfully without one interrupting the other, in a work environment where nurses experience poor working condition, overload, irregular salary and insufficient staff on ground. Many a times, nurses do extra work they may not be paid for and some may experience unkindly response from patients or the family members. Hill, Hawkins, Ferris & Weitzman (2001) defined work-family conflict as conflict arising from the performance of one's roles in the workplace and the family arena. It is often referred to as inter-role conflict due to the imbalance nature of the work and family arena. The level of commitment of nurses in the workplace may be a function of the level of work-family conflict experienced by each of the nurses.

Previous study revealed that work family conflict is related to mental health and turnover intentions (Greenhaus, Collins, Singh, & Parasuraman, 1997). Some studies have also examined work-family conflict as determinants of employees well-being and attitude (Carlson, Grzywack&Zivnuska, 2009), as job stressors and work condition outcome (Taris, Beckers, Verhoeven, Geurts, Kompier, & Linden, 2006), as aftermath of exhaustion and impaired health (Bakker & Geurts, 2004). The working condition of nurses in the developing countries like Nigeria may not be as easy and conducive as it is in the developed nations of the world. So, the impact of work family conflict on psychological well-being may be higher and more severe than the developed nations of the world. The presence of conflict between work and family domains exerts its impact on both the workplace and the family (Bakker, Demerouti& Dollard, 2008) and this can result in low level of job satisfaction, low performance and psychological well-being problem (Elfer&Dearnley, 2007).

In addition, Panatika, Badria, Rajaba, Rahmana and Shaha (2011) reported that work family conflict exerted negative impact on psychological well-being among teachers and spirituality, gender and work family conflict had also predicted psychological well-being among teachers (Hammed, Agofure&Adebukola, 2009). In another study, it was revealed that work family conflict negatively related with job satisfaction, job performance and psychological well-being of nurses in Pakistan (Hanif& Naqvi, 2014). Considering the trend of these findings, it suggests that work-family conflict is an important factor affecting employees in different field and organizations and the nurses are not left out in this challenge. In order to moderate the impact of work family conflict on the psychological well-being of nurses, job motivation was examined in this study.

Motivation may be considered as the inner drive that pushes employee that to do the job assigned in spite of challenges encountered in the process of doing the work. Without one form of motivation or the other, whether from within or from the work environment, nurses may not be able to perform maximally. According to Sohail, Safdar, Saleem, Ansar and Azeem (2014), Job motivation is a factor that directs and sustains employees' performance and effective motivation involves drive, affective and cognitive guidance (Deci & Ryan, 2012). It is the underlining force that propels people to exhibit a particular behaviour in the workplace (Spector, 2008). The concern of the hospital management board and the government should be what they can do to motivate the nurses so that they can perform their duties with gladness of heart, which will lead to high level of psychological well-being and enhance productivity as well.

Maximum productivity or effective performance of nurses may be a function of how well the management and the government are able to motivate the nurses to use their skills, acquired knowledge and other relevant resources. It was observed that one of the strong reason for low productivity was poor morale of employees (Mullins, 2005) and this may include poor working condition, poor remuneration, lack of reward and poor motivation strategy. When nurses are properly motivated, high level of performance and quality service should be expected in line with Vroom's expectancy theory of motivation (1964). In addition, adequate motivation could result in high level of commitment, involvement and productivity based on reciprocity theory (Bruni, Gilli, & Pelligra, 2008)). The implication of this is that nurses may desire to reciprocate the motivation given to them by the government through the hospital management board through their services. When nurses are happy performing their duties as expected, this may likely translate to high level of psychological well-being among the nurses. Study has revealed that job motivation predicted psychological well-being among nurses (Nwakwo&Okeke, 2018). In another similar study, it was reported that mental well-being and job motivation had significant positive correlation among nurses in Ganjavian hospital (Raeissi, Raeissi&Shokouhandeh, 2014) and among athletes too, the same positive relationship was recorded between mental well-being and motivation. Apart from nursing profession, Colie (2014) reported a significant relationship between classroom motivation and the well-being of Canadian teachers. From the few studies reviewed, it may be a little bit difficult to have an

insignificant relationship between job motivation and psychological well-being among employees in any sector. Although in this study, the predictive power of job motivation will be examined and the moderating effect, to really know whether it would buffer the effect of work-family conflict on psychological well-being or not.

### **Hypotheses**

1. Work-family conflict will significantly and negatively predicted psychological well-being among nurses.
2. Job motivation will significantly moderate the effect of work-family conflict on psychological well-being among nurses.

## **II. METHOD**

### **Design**

A cross sectional survey design was employed in this study. The predictor was work-family conflict, the dependent variable was psychological well-being and job motivation served as the moderator.

### **Research Setting**

Public or government hospitals served as the study setting. The study made use of nurses working in the government hospitals.

### **Population sample**

Purposive and convenient sampling techniques were used to gather data from 250 nurses from three government hospitals in Ondo state. The participants were made up of 125 males and 125 females, whose ages ranged between 18 and 57 years (Mean = 41.44, SD = 12.08). Fifty-eight were singles, 171 married, 11 widows, 6 divorced and 4 separated. The job status include 84 junior staff, 125 senior and 39 management staff.

### **Instruments**

#### **Section A: Socio-Demographic Variable**

The socio-demographic variables include age, gender, marital status, job position and educational qualification.

#### **Section B: Work-family Conflict Scale**

Work-family conflict was measured using work-family conflict scale developed by Haslam, Filus, Morawska and Sanders (2014). It consists of 10 items. The instrument is rated on a 7 point Likert scale type, ranging from 1= strongly disagree to 7= strongly agree. Sample items include “My work prevents me from spending sufficient quality time with my family” and “My work has a negative impact on my family life”. High score indicates high level of work-family conflict while low score indicates low level of work-family conflict. Haslam et al, (2014) obtained a Cronbach alpha of .80, while .83 was obtained in this study as the Cronbach alpha.

#### **Section C: Work Motivation Scale**

Job motivation was measured using Work motivation scale developed by Tremblay, Blanchard, Taylor, Pelletier and Villeneuve (2009). The scale contains 18 items rated on a 7 point Likert type (1 = Does not correspond at all to 7 = corresponds exactly). Sample items include “Because this is the type of work I chose to do to attain a certain lifestyle” and “Because I chose this type of work to attain my career goals”. High score obtained indicates that the individual is highly motivated at work, while low score indicates low level of work motivation. The Cronbach alpha of .73 was obtained in this study.

#### **Section D: Psychological Well-being Scale**

Psychological well-being of nurses was measured using Psychological Well-being Scale developed by Ryff and Singer (1998). It consists of 18 items rated on a 6 point Likert type scale (1 = Strongly Disagree to 6 = Strongly Agree). Sample item on the scale include: “I tend to be influenced by people with strong opinions” and “I think it is important to have new experiences that challenge how you think about yourself and the world”. High score on the scale indicates high level of psychological well-being, while low score indicates low level of psychological well-being. Ryff and Singer (1998) reported a Cronbach alpha of .96, while this present study obtained .67.

### **Procedure**

After due consultation had been made with the hospitals involved and a letter of introduction from the department was obtained to actually authenticate the researcher’s intention, questionnaire were distributed to nurses on duty and were willing to participate in the study; after they had been given thorough explanation on the purpose of the study. It took the researcher six weeks to gather the data and three hundred questionnaires were administered but two hundred and eighty three were retrieved with two hundred and fifty found usable. It yielded a response rate of 83.3%.

### **Data Analysis**

Hierarchical Multiple Regression was employed to test whether work-family conflict would predict psychological well-being and to know whether job motivation would moderate between work-family conflict and psychological well-being.

### III. RESULTS

#### Three Step Hierarchical Multiple Regression Showing Predictions on Psychological Wellbeing

Variables	$\beta$	t	R	R <sup>2</sup>	$\Delta R^2$	df	F	p
<i>Step 1</i>								
Age	-.29	-2.57*	.19	.04	-	6, 243	1.50	> .05
Gender	-.02	-.29						
Marital status	.08	.99						
Educational qualification	.01	.14						
Job Status	.24	1.98*						
Length of Service	-.01	-.07						
<i>Step 2</i>								
Age	-.27	-2.78**	.52	.27	.23	8, 241	10.86	< .01
Gender	-.03	-.49						
Marital status	.03	.39						
Educational qualification	.02	.27						
Job Status	.19	1.80						
Length of Service	.13	1.47						
Work-Family Conflict	-.37	-6.41**						
Job Motivation	.29	5.23**						
<i>Step 3</i>								
Age	-.23	-2.43*	.55	.30	.03	9, 240	11.64	< .01
Gender	-.03	-.50						
Marital status	.01	.13						
Educational qualification	.00	.05						
Job Status	.20	1.87						
Length of Service	.09	1.08						
Work-Family Conflict	.00	.02						
Job Motivation	1.13	4.82**						
WFC*JM	-.90	-3.67**						

\*\* p < 0.01, \* p < 0.05, N= 250

In the step 1 of the analysis, socio-demographic characteristics were entered into the model. The result revealed that the socio-demographic characteristics had no significant prediction on psychological wellbeing [F(6, 243)= 1.50, p > .05]. However, age independently predicted psychological wellbeing such that younger nurses measured higher on psychological wellbeing ( $\beta = -.29$ ,  $t = -2.57$ ,  $p < .05$ ). Also, it was noted that job status independently predicted psychological wellbeing in such a way that psychological wellbeing increases with higher job status among nurses wellbeing ( $\beta = .24$ ,  $t = 1.98$ ,  $p < .05$ ).

Work-family conflict and job motivation were added to the model in step 2. The result indicated that all the variables contributed a significant variance of 27% to the total variance observed in psychological wellbeing [R=.52, R<sup>2</sup>= .27, F(8, 241)= 10.86, p < .01]. Based on the changes in R<sup>2</sup>, this implied that the added variables in step 2 brought about the significant prediction and they accounted for 23% in the total variance observed in the model. Independently, psychological wellbeing increases with significant decrease in work-family conflict ( $\beta = -.37$ ,  $t = -6.41$ ,  $p < .01$ ). However, psychological wellbeing increases with significant increase in job motivation ( $\beta = .29$ ,  $t = 5.23$ ,  $p < .01$ ).

The step 3 of the regression analysis shows the moderation of the relationship between work-family conflict and psychological well-being by job motivation and the result revealed that the interaction of work-family conflict and job motivation significantly predicted psychological well-being ( $\beta = -.90$ ,  $t = -3.67$ ,  $p < .01$ ). This means that job motivation buffer the impact of work-family conflict on psychological well-being among nurses.

### IV. DISCUSSION

Psychological well-being of nurses is non-negotiable if they are to perform effectively in the duties assigned to them in the public hospitals and in line with this study, one of the factors that may affect their psychological well-being is work-family conflict. This study therefore investigated the predicting power of work-family conflict on psychological well-being and examining the moderating effect of job motivation between work-family conflict and psychological well-being.

From the findings, it was revealed that work-family conflict significantly negatively predicted psychological well-being. This is implied that decrease in work-family conflict led to increase in the level of

psychological well-being of nurses. This finding supported the findings of Panatika et al (2011) and Hamed et al (2009), who reported that work-family conflict predicted psychological well-being among teachers. This study also supported the work of Hanif and Naqvi (2014), who reported that work-family conflict predicted psychological well-being among nurses in Pakistan. These reports revealed that work-family conflict is a strong factor affecting the psychological well-being of employees especially nurses, even across nations of the world. The reason that could be deduced from this may be that since work and family are two separate domains, and each with its enormous responsibilities, nurses may be finding it difficult to successfully combine the two together. When there is stress arising from inability to combine the two, the psychological well-being may be affected negatively as reiterated by Elfer and Dearnley (2007). Many factors, such as, overload, insufficient staff, overtime, lack of motivation and inadequate equipment, from the work domain and lack of house help or assistance in doing the house chores, too much responsibilities at home and lack of peaceful home from the family domain may likely be contributing to work-family conflict experienced by nurses in public hospitals.

The findings from the analysis further revealed that job motivation positively predicted psychological well-being and likewise moderated the effect of work-family conflict on psychological well-being. Nurses' psychological well-being increased with increase in job motivation. This finding corroborated the reports that job motivation predicted psychological well-being of nurses (Nwakwo&Okeke, 2018, Raeissi, et al, 2014). In addition, the finding from this study further supported the work of Colie (2014), who reported a significant relationship between classroom motivation and the well-being of Canadian teachers. From these findings, it could be deduced that job motivation is an important factor predicting the positive psychological well-being of nurses. It also served as buffer to moderate the effect of work-family conflict on psychological well-being. From the perspective of Vroom's expectancy theory (1964), it is expected that when nurses are properly motivated in the work domain, this has a way of impacting on their psychological well-being. Happiness in the workplace may likely translate to high level of psychological well-being and when this is in place, high level of commitment and productivity may be the outcome, in line with the reciprocity theory (Bruni, et al, 2008). Motivating nurses may come in different forms, such as, increment in salary, opportunities for staff development, allowance for staff who has occupational health challenge, security of nurses at work. All these put in place may boost the morale of nurses to go extra mile in performing their duties.

## V. CONCLUSION AND IMPLICATION

Psychological well-being of nurses is very paramount to achieving maximum productivity in the public hospitals. From the findings of this study, it could be concluded that work-family conflict and job motivation are very crucial factors affecting the psychological well-being of nurses. The implication of these findings is that when the level of work-family conflict experienced by nurses is high, the psychological well-being of nurses will reduce and when the job motivation is high the psychological well-being will increase and it also reduces the effect of work-family conflict on the psychological well-being of nurses.

## Reference

- [1]. Avey, J.B., Reichard, Luthans, F.,&Mhatre (2010). Impact of positive psychological capital on employee well-being over time. *Journal of Occupational Health Psychology*, 15(1), 17-28.
- [2]. Bakker, A.B., Demerouti, E.,& Dollard, M.F. (2008). How job demands affect partners' experience of exhaustion: Integrating work-family conflict and crossover theory. *Journal of Applied Psychology*, 93(4), 901-911.
- [3]. Bakker, A.B., &Geurts, S.A.E. (2004). Toward a dual-process model of work-home interference. *Work and Occupations*, 31, 345-366.
- [4]. Bada, V., Balogun, S.K.,&Adejuwon, G. (2013). Social support, religious affiliation and educational attainment as predictors of psychological well-being among spouses of male prisoners in Nigeria. *British Journal of Education, Society & Behavioural Science* 4(2), 156-166.
- [5]. Bruni, L., Gilli, M., &Pelligra, V. (2008). Reciprocity, theory and facts: Introduction to the special issue. *International Review of Economics*, 55(1-2).
- [6]. Carlson, D.S., Grzywack, J.G.,&Zivnuska,S. (2009). Is work-family balance more than conflict and enrichment? *Human Relations*, 62, 1459-1487.
- [7]. Colie, R.J. (2014). Understanding teachers' well-being and motivation: Measurement, theory and change over time. *A thesis of human development, learning and culture*. The University of British Columbia
- [8]. Deci, E.I.,& Ryan, R.M. (2008). Facilitating optimal motivation and psychological well-being across life's domains. *Canadian Psychology*, 49, 14-23.
- [9]. Elfer, P., &Dearnley, K. (2007). Nurseries and emotional well-being: Evaluating an emotionally containing model of professional development. *Early Years*, 27(3), 267-279.
- [10]. Greenhaus, J.H., Collins, K.M., Singh, R., &Parasuraman, S. (1997). Work and family influences on departure from public accounting. *Journal of Vocational Behaviour*, 50, 249-270.
- [11]. Hamed, T.A., Agofure, S.H., &Adebukola, T.K.(2009). Psychological variables as predictors of work-family conflict among secondary school teachers in Irele Local Government Area, Ondo State, Nigeria. *Pakistan Journal of Social Sciences*, 6(1), 11-18.
- [12]. Hanif, F., & Naqvi, R.M. (2014). Analysis of work-family conflict in view of nurses, in health sector of Pakistan. *International Journal of Gender and Women's Studies*, 2(4), 103-116.
- [13]. Haslam, D., Filus, A., Morawska, A., &Sanders, M.R. (2014). The work-family conflict (WAFCS): Development and initial validation of a self-report measure of work-family conflict for use with parents. *Child Psychiatry and Human Development*, 46(3), 346-357.

- [14]. Hill, E.J., Hawkins, A.J., Ferris, M., & Weitzman, M. (2001). Finding an extra day a week: The positive influence of perceived job flexibility on work and family life balance, family relations. *Interdisciplinary Journal of Applied Family Studies*, 50, 49-58.
- [15]. Huppert, F.A. (2009). Psychological well-being: Evidence regarding its causes and consequences. *Applied Psychology, Health and Well-being*, 1(2), 137-164.
- [16]. Mullins, I.J. (2005). *Management and Organizational Behaviour*. Prentice Hall, UK.
- [17]. Nwakwo, C., & Okeke, C.P. (2018). Impact of motivation on the psychological well-being of nurses in Enugu metropolis. *International Journal of Academic Research in Psychology*, 5(1), 1-14.
- [18]. Panatika, S.B., Badria, K.Z., Rajaba, A., Rahmana, H.A., & Shaha, I.M. (2011). The impact of work-family conflict on psychological well-being among school teachers in Malaysia. *Social and Behavioural Sciences*, 29, 1500-1507.
- [19]. Raeissi, P., Raeissi, N., & Shokouhandeh, T. (2014). The relationship between nurses' mental health and working motivation. *Advances in Nursing and Midwifery*, 24, 86.
- [20]. Ryff, C.D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57, 1069-1081.
- [21]. Ryff, C.D. & Singer, B. (1998). The contours of positive human health. *Psychological Inquiry*, 9(1), 1-28.
- [22]. Sohail, A., Safdar, R., Saleem, S., Ansar, S., & Azeem, M. (2014). Effects of work motivation and organizational commitment on job satisfaction: A case of education industry in Pakistan. *Global Journal of Management and Business Research: Administration and Management*, 14(6).
- [23]. Spector, P. (2008). *Industrial and Organizational Behaviour*. Fifth Edition. New Jersey: John Wiley & Sons Inc.
- [24]. Taris, T.W., Beckers, D.G.J., Verhoeven, L.C., Geurts, S.A.E., Kompier, M.A., & Linden, D. (2006). Recovery opportunities, work-home interference, and well-being among managers. *European Journal of Work and Organizational Psychology*, 15, 139-157.
- [25]. Tremblay, M.A., Blanchard, C.M., Taylor, S., Pelletier, L.G., & Villeneuve, M. (2009). Work extrinsic and intrinsic motivation scale: Its value for organizational psychology. *Canadian Journal of Behavioural Science*, 41(4), 213-226.
- [26]. Vroom, V.H. (1964). *Work and motivation*. New York: John Wiley.