
Balancing Care and Career: A Study of Work–Life Balance among Female Nurses.

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Abstract

The equilibrium between work and personal life has become a significant concern in the healthcare sector, especially for female nurses who encounter escalating professional obligations in conjunction with familial and social duties. This study investigates the work–life balance of female nurses in selected multi-specialty hospitals in Kerala, aiming to identify critical factors influencing balance, challenges encountered, and the effects of work–life balance on job satisfaction, organizational commitment, and overall well-being. The research employs a descriptive approach and utilizes convenience sampling to gather data from 100 female nurses via a standardized questionnaire and personal interviews. Statistical methods like percentage analysis, mean and standard deviation, weighted average ranking, correlation, regression, and ANOVA were utilized for data analysis. The results indicate that female nurses encounter a moderate to low degree of work–life balance, largely attributable to extended working hours, rotating and night shifts, elevated occupational stress, and insufficient organizational support. The research demonstrates a substantial positive correlation between work–life balance and both job satisfaction and organizational commitment. Regression research indicates that work–life balance significantly influences the quality of working life, social recognition, and self-esteem of nurses. The study suggests that good work–life balance regulations and supportive HR practices are crucial for improving nurse well-being, job satisfaction, and retention in Kerala's healthcare sector.

Keywords: Work–Life Balance, Female Nurses, Job Satisfaction, Occupational Stress, Healthcare Sector.

Introduction

Work-life balance (WLB) denotes the capacity of individuals to efficiently coordinate and reconcile their professional obligations with personal and familial responsibilities. In healthcare, especially nursing, the difficulty of sustaining this equilibrium is exacerbated by extended working hours, shift responsibilities, emotional pressures, and substantial workloads. Female nurses, who represent the predominant segment of the nursing workforce, face intensified pressures due to conventional cultural expectations around family and caregiving roles, rendering the matter of work-life balance particularly critical in Kerala's healthcare system. Nursing continues to be predominantly a female profession in Kerala, mirroring wider national patterns. Research conducted among nurses in the Kannur region revealed that around 91% of the nursing workforce is female, emphasizing the gendered characteristics of the profession and underscoring the significance of work-life balance concerns for women in this area. (RJPN Research Journal) The gender concentration indicates that any imbalance between work and personal life is likely to disproportionately impact women, both in their professional and personal spheres.

Research conducted throughout India indicates that nursing professionals often encounter work–family conflict, wherein professional obligations encroach upon home life and vice versa. Research conducted among nurses at a medical institution indicated that factors such as extended hours, diverse workstations, and the frequency of workdays substantially affect work-life balance (innovational journals). Furthermore, domestic and familial obligations, including time allocated to household tasks and the care of children or elderly dependents, significantly influence work-life balance outcomes for nurses (Innovational journals). In Kerala, these dynamics are seen among female nurses employed in private hospitals. A recent study on female nurses in Manjeri Municipality, Malappuram District, revealed

that organizational rules, job demands, work environment, and personal characteristics substantially influence work-life balance. (IJSMS) Journal This study primarily examined qualitative dimensions of balance, reflecting a wider trend of stress and imbalance encountered by female nursing practitioners in Kerala's healthcare environments.

Job-related stress associated with professional and familial responsibilities has been correlated with work-life imbalance among nurses. A poll of 300 female nurses at private hospitals in Kottayam revealed that over half (53%) said that their employment disrupted family life, with numerous respondents experiencing moderate to high levels of job-related stress. (JMRA) These findings underscore the convergence of occupational stress and personal life disruption, which are essential issues in work-life balance study. Investigations beyond Kerala reflect these concerns in analogous contexts. A survey conducted among nurses in South India revealed that merely 27.7% of nurses achieved a commendable work-life balance, while the remainder reported ordinary to poor balance, with women disproportionately impacted due to supplementary household and caregiving obligations. (IOSR Journals) These data emphasize the urgent necessity for actions that tackle both job conditions and external societal demands. Work-life balance pertains not just to human well-being but also carries organizational ramifications. Research indicates that an enhanced work-life balance for nurses correlates with increased job efficacy, less conflict between professional and personal spheres, and heightened organizational commitment. (RSIS International Conversely), work-life imbalance may result in heightened burnout, absenteeism, diminished job satisfaction, and turnover—concerns that are particularly alarming in light of the current healthcare staffing shortages in Kerala. National figures indicate that India need millions more nurses to comply with global norms, and the emigration of nurses intensifies this deficiency. Although precise statistics for Kerala differ, the state's healthcare sector faces challenges in sustaining workforce levels due to both internal and external migration pressures. (India Today) Considering these challenges, investigating work-life balance among female nurses in Kerala is imperative. It enhances the scholarly discourse on occupational health and human resource management while offering empirical data for legislators and healthcare administrators to create conducive work environments. Comprehending the interplay between professional and personal life for female nurses in Kerala might facilitate the formulation of tailored policies—such as flexible scheduling, wellness initiatives, and family support systems—to improve their quality of life and organizational efficacy.

The principal dependent variable of the study is Work-Life Balance (WLB), defined as the degree to which female nurses can reconcile their professional obligations with personal and familial life. Work-life balance (WLB) is assessed by standardized measures and Likert-type statements concerning temporal equilibrium, stress management, and role fulfillment. Prior research in South India indicates that merely 27–30% of nurses achieve a satisfactory or exemplary work-life balance, highlighting that imbalance is a prevalent issue within the nursing profession. An inadequate work-life balance is associated with stress, burnout, diminished job satisfaction, and increased turnover intention. Occupational considerations significantly impact the work-life balance of female nurses. Working hours and shift patterns are critical factors, as nurses frequently engage in extended hours, rotating shifts, and nocturnal tasks. Research conducted in hospitals in Kerala indicates that numerous nurses exceed 48 hours of work each week, beyond established working standards. Job stress and workload are significant determinants, typically assessed using perceived stress scales and patient-to-nurse ratios. Empirical evidence reveals that more than 50% of female nurses assert that workplace expectations disrupt their home life, underscoring the detrimental effect of work pressure on personal well-being. Personal and familial obligations profoundly impact the work-life equilibrium of female nurses. The study considers variables including marital status, number of children, dependent family members, and time allocated to home responsibilities. In Kerala, where women traditionally bear a significant portion of household duties, married nurses and those with children frequently encounter heightened work–family conflict. Studies indicate that female nurses with greater household duties exhibit lower work-life balance ratings than their unmarried counterparts or those with fewer familial obligations. Organizational support systems are essential factors influencing work-life balance. The study encompasses variables including supervisor support, the availability of flexible work arrangements, leave rules, and staffing adequacy. Hospitals that offer flexible scheduling, supportive management, and sufficient staffing mitigate stress and enhance work-life balance. Research demonstrates that nurses who recognize substantial organizational support experience markedly enhanced work-life balance and job satisfaction. Nonetheless, such techniques are more prevalent in certain large or corporate hospitals than in smaller healthcare facilities. Specific demographic characteristics are utilized as control variables to discern their impact on work-life balance. Factors encompass age,

educational qualifications, years of experience, and the type of hospital (government or private). Research indicates that novice nurses and those with limited experience frequently encounter elevated stress levels, but seasoned nurses are more likely to cultivate effective coping strategies. Likewise, disparities in employment circumstances between public and private hospitals can affect work-life balance results.

The equilibrium between professional and personal life is a significant concern for nurses in Kerala, attributed to rigorous work schedules, mental stress, and individual obligations. A study involving 150 nurses in the Trivandrum area revealed that 68% reported a moderate to high work-life imbalance, with 42% attributing it to prolonged working hours and 37% naming irregular shifts as significant factors. Moreover, almost 55% of participants indicated a demand for enhanced organizational assistance and flexible scheduling to facilitate a better equilibrium between work and personal life. ir.vistas.ac.in An analytical study involving 300 nurses from government and private hospitals in Kerala revealed that work-life balance is a predominant concern, especially for female nurses balancing professional obligations and familial responsibilities, with high workload and emotional demands identified as significant stressors. Zenodo A quantitative analysis of healthcare professionals in Kochi revealed that 57% of nurses exhibited a borderline work-life balance, while merely 20% achieved a satisfactory balance, highlighting ongoing difficulties in reconciling professional and personal responsibilities. IJFMR Studies focused on female nurses in Manjeri Municipality highlight the influence of organizational policies, job demands, and personal characteristics on work-life balance, revealing a complex issue that impacts job satisfaction, well-being, and performance.

The research examines work-life balance as the dependent variable affected by a confluence of work-related, personal, organizational, and demographic factors. Statistical data from prior studies unequivocally demonstrates that extended working hours, elevated job stress, familial obligations, and insufficient organizational support substantially impact the work-life balance of female nurses in Kerala. Comprehending these elements establishes a robust basis for examining the work-life difficulties encountered by female nurses and for proposing effective legislative and administrative solutions.

Review of Literature

- Women and Work-Life Balance

The study conducted by Raman, R. Rangarajan (2018) indicated that working women experience pressure in their professional lives. Working women face a significant challenge in balancing professional and familial responsibilities. Working women encounter numerous challenges both in the workplace and at home, despite their ability to handle family life. Despite these challenges, women are significantly contributing to managing their dual responsibilities. The women have numerous mental and physical health issues due to this dual lifestyle. Working women must adeptly manage the diverse aspects of their lives to attain a harmonious work-life balance.

Kaur and Rai (2017) conducted a study on the work-life balance of Indian women amid the evolving Indian economy. The survey revealed that Indian women are experiencing heightened pressures from familial, professional, and societal demands, leading to an imbalance in their life. The research indicated that the establishment of supportive policies and practices, including flexible working hours, childcare services, and enhanced healthcare, can enhance the work-life balance of Indian women.

Bhatnagar, S., & Sanadhya, P. (2015) This article examines the work-life balance of male and female IT professionals in Pune. It analyzes the disparities between male and female IT professionals on their work-life balance. The research involved a sample of 100 IT professionals, comprising 50 males and 50 females. The data was gathered using a standardized questionnaire. The findings indicated a substantial disparity in the work-life balance of male and female IT professionals. The findings indicated that female IT workers exhibited a superior work-life balance compared to their male counterparts. The results indicate that firms ought to enhance support for their female IT staff to better their work-life balance. This study offers valuable insights into the work-life balance of IT professionals in Pune and can inform policy and practice within the IT sector.

Kakkar, Jyoti; Bhandari, Anuradha (2016) This study aimed to investigate the issues encountered by men and women in the Indian service sector regarding work-life balance. The research was carried out in Delhi, the capital of India, which hosts several service sector enterprises. The study comprised a sample size of 126 respondents. The research revealed

that individuals in the service sector encounter distinct obstacles in attaining work-life equilibrium based on gender. Men in the service sector are more prone to occupational stress due to extended hours, little leisure time, and job demands. Conversely, women in the service sector encounter obstacles linked to conventional gender roles, including the obligation to care for family members and the attendant obligations of maternity and childcare. The research revealed that both genders encounter difficulties due to insufficient supportive policies and inadequate flexible working opportunities.

M. Jeyarathnam (2017) This article investigates the elements influencing the work-life balance of women professionals in the IT industry in Tamil Nadu. The respondents concurred that twenty-eight components have impacted their work-life balance in the initial stage. Factor study indicated that five primary factors—Job Nature, Work Load, Job Environment, Organizational Support, and Family Domain—significantly affect the work-life balance of women professionals. The correlation research has confirmed a positive association among the five closely related factors.

Rupa Rathee (2018) This article analyzes the determinants influencing employees' work-life balance. The study utilizes survey data from a sample of CEOs to identify four principal characteristics that affect work-life balance: job satisfaction, job autonomy, workload, and family and social life. The findings indicate that job satisfaction is the primary determinant of work-life balance, succeeded by job autonomy, workload, and familial and social life. The research indicates that job satisfaction correlates favorably with work-life balance, but job autonomy, workload, and family and social life have unfavorable correlations with work-life balance. This paper's findings offer significant insights on how firms might enhance their workers' work-life balance management.

- Commitments of the Nurses

Azizollah et al. (2016) reported in their study that there was no correlation between age and organizational commitment or emotional and continuance commitment; however, a significant association was found with normative commitment. The findings of their study suggested that the level of organizational commitment among participating nurses was modest. An organization necessitates workers who are dedicated to achieving its objectives, doing their duties with passion and enthusiasm, and demonstrating commitment to the organization. A solid foundation must be developed to create and sustain these attributes among the staff.

Williamson, E. (2016). This article examines the role of nurses in enhancing healthcare quality. The author emphasizes the significance of The article delineates methods by which nurses can proactively enhance healthcare quality and presents ideas for them to effectuate a positive impact. The author emphasizes the significance of nurse-patient relationships, teamwork, collaboration, and communication in providing effective care. The article underscores the significance of nurses' dedication to excellent treatment and its influence on patient outcomes.

Al-Haroon HI (2020) posits that nursing policymakers can augment the organizational commitment of nurses by formulating strategies to recruit, attract, and retain dedicated nursing professionals. Their survey revealed that the majority of nurses exhibited a modest degree of job dedication. Increased organizational commitment was positively associated with socio-demographic characteristics, including age and nationality, with age being the sole positive predictor of overall organizational commitment.

The findings of Wall M. (2020) study will retain their relevance even within the 2020 pandemic. The majority of responders demonstrated a robust commitment to pursuing a lifelong career in nursing. The COVID-19 pandemic has underscored the persistent difficulties that nurses encounter with scheduling and sufficient childcare while striving to remain in the profession. The closure of crèches, childcare facilities, and schools in Ireland, along with the directive exempting grandparents, especially those aged 65 and older, from childcare responsibilities, presents considerable issues for the Irish government to resolve.

Ahlstedt et al. (2019) found three primary components in the workday activities of registered nurses concerning the notion of inner work life and job motivation. Essential to job motivation. Secondly, the significance of observable advancement, obtaining feedback from the work itself, and enhancing their understanding through everyday tasks. Ultimately, the prospect for registered nurses to collaborate autonomously with fellow registered nurses positively influenced job motivation.

- Job Satisfaction\ Occupational Stress

Jiang (2018). This study sought to investigate the stress levels of nurses in a regional medical center in Taiwan. A total of 151 nurses were recruited and assessed using the Stress Perception Scale (SPS) and the Occupational Stress Inventory (OSI). The findings indicated that the nurses encountered moderate levels of stress. The predominant pressures for nurses were interpersonal connections, workload, and organizational dynamics. Additional issues, including role conflict, role ambiguity, and job insecurity, were also recognized as contributors to nurses' stress levels. The results indicated that nurses experienced elevated stress levels during winter compared to summer. This study offers significant insights into the stress levels of nurses at a regional medical center in Taiwan and suggests treatments to mitigate stress and enhance job satisfaction.

Dixit J et al. (2017) identified a notable disparity in job satisfaction ratings between permanent and contractual healthcare employees concerning socio-demographic drivers and factors affecting job satisfaction. The majority of permanent health-care workers (86.9%) expressed high satisfaction, while just 10.5% of contractual health-care workers reported moderate satisfaction (55%). The data indicated that employees over 45 years old and those with more than 10 years of experience exhibited significantly higher satisfaction levels compared to their peers. Organizational amenities exert a statistically significant impact on job satisfaction levels.

Flinkman M, Laine M, and Leino-Kilpi report that 26% of young nurses have frequently contemplated leaving the nursing profession in the past year. This was associated with personal burnout, inadequate development opportunities, insufficient professional involvement, low job satisfaction, work-family conflicts, and increased quantitative work expectations. Nurses indicated that their primary reasons for contemplating departure from the profession included dissatisfaction with compensation, the demands of nursing, the challenges of shift work and irregular hours, and concerns regarding job security.

Adiba (2021) This study investigates the effects of occupational stress on professional responsibilities and work-life equilibrium among nurses in a major private hospital in South India. The researchers performed a cross-sectional survey of hospital-employed nurses to examine the effects of occupational stress on their job and work-life balance. The survey results indicated that occupational stress adversely affected both professional performance and work-life balance. The findings indicate that hospital nurses are experiencing elevated stress levels, resulting in diminished work performance and an imbalance between their professional and personal life. The researchers advocate for the use of programs designed to mitigate occupational stress among nurses to enhance their professional and personal balance.

Behrooz Rezaei (2020) The research sought to determine the origins of occupational stress and their correlation with personal and professional characteristics among nurses. 77.8% of nurses indicated that their stress levels were elevated. The primary sources of stress identified were "uncertainty in treatment," "patient suffering and mortality," and "excessive workload." Nevertheless, the minimal source of stress pertained to "insufficient support resources". There are substantial disparities in the scores of the seven domains of occupational stress. The occupational stress score exhibited no significant correlation with gender, marital status, unit type, shift type, education level, or employment type. Job stress shown no significant association with personal and occupational attributes.

- Challenges of the Nurses/ Working Woman

Geller, J. (2017). This article serves as an introduction for healthcare professionals and delineates the existing literature on compassion fatigue, including its prevalence, risk factors, therapies, and prevention efforts. The essay examines the literature on the diverse elements of CF, encompassing secondary traumatic stress, burnout, and vicarious dramatization. Additionally, the paper examines the ramifications of CF for healthcare practitioners and offers a summary of evidence-based practices.

Chiappetta, M. A. (2018). This article analyzes the obstacles encountered by nurses and employed women. The author employs a systematic evaluation of pertinent literature to examine the issues encountered by this demographic. The essay examines the diverse physical, psychological, and social obstacles encountered by nurses and working women, along with the repercussions of these challenges on their health and well-being. The author additionally investigates the

possible strategies that may be employed to tackle these difficulties. The essay continues by recommending additional research to investigate the effects of these issues on nurses and working women.

Javier Cerrato and Eva Cifre (2018) assert that the participation of couples in domestic responsibilities correlates with an elevated Work-Family Conflict. However, it does not distinctly impact Work Conflict or Family Conflict by gender; rather, it influences the overall WFC: heightened involvement from couples similarly escalates WFC for both men and women. This suggests that the partner's participation in domestic duties influences work-family conflict (WFC), whilst the subject's involvement does not, impacting a segmented family conflict (FC) and work conflict (WC). The perceptions of men and women regarding their spouses' involvement in domestic responsibilities significantly influence their views on work-family conflict; nevertheless, their own engagement in these chores adversely impacts work-family conflict. Consequently, the more their partner's work-family conflict (WFC), the more men and women recognize their partners' WFC.

Bishnoi (2020) This article is an analysis of the impact of working women on their children's development. The authors examine many studies investigating the influence of working mothers on emotional, social, and cognitive development. The article analyzes the varying impacts of working women on their children, highlighting that these effects can be either beneficial or detrimental, contingent upon the context and type of the mother's occupation. The authors examine how contemporary economic and technological improvements have facilitated increased female participation in the workforce and the potential implications for child development. The authors emphasize the necessity for additional study to elucidate the impact of working women on their children.

Aarti Verma (2018) discovered that stress levels in working women rise in direct correlation with age. This may result from the increased obligations assigned to older women, both domestically and professionally. The duration of working hours affects the stress levels of employed women. This may result from the nature of their profession, leading to physical and mental exhaustion. Childcare constitutes a significant source of stress for working women. Working women must undertake prudent arrangements for childcare and daily living, which can be taxing.

- Quality of Working life of Nurses

Ferreira (2019) This study sought to evaluate the quality of life of nurses in a public hospital in Portugal. A descriptive, cross-sectional study was performed including a sample of 131 nurses who completed the Quality of Life at Work Scale. The findings indicated that nurses reported a moderate quality of life at work, with notable disparities in quality of life among nurses across various departments and differing years of experience. The nurses emphasized the significance of oversight, professional autonomy, and acknowledgment, as well as the necessity to enhance working conditions, diminish workloads, and eradicate bureaucratic processes. The study's findings endorse the adoption of techniques to enhance nurses' quality of life, as well as to promote improved working conditions and job satisfaction.

Dabiri, (2017) This article provides a thorough overview of the literature about the quality of nurses' working lives. The authors examine current studies to discern the primary elements influencing nurses' quality of working life and provide avenues for more research. The essay emphasizes the necessity of enhancing working circumstances and offering improved assistance for nurses to elevate job satisfaction and mitigate stress levels.

Rajeswari Hemanathan (2017) determined that most nurses experienced a reasonable quality of nursing work life, likely due to their employment in a private tertiary care teaching hospital with well-established infrastructure and staff welfare amenities. Nurses' dissatisfaction with the work environment is evidenced by their challenges in interacting with physicians, restricted opportunities for professional advancement, and lack of awareness regarding these issues. The minimum is observed in the professional realm. Nurses reported that public view of their profession remains unfavorable, leading to employment insecurity and stigma associated with nursing.

Henok Biresaw (2020) This research outlines a cross-sectional study carried out in referral hospitals in the Amhara Region in Northwest Ethiopia, aimed at assessing the quality of nursing work life and its associated characteristics. The research included semi-structured questionnaires and interviews to gather data from a cohort of 269 nurses. The findings revealed that the overall quality of nursing work life in the region was positive. The research identified that the primary determinants of work-life quality were job satisfaction, favorable working circumstances, and a supportive work environment. The study highlighted multiple barriers to job quality, including insufficient workforce, poor

resources, and low compensation. The study determined that the quality of nursing work life at referral hospitals of the Amhara Region may be enhanced by tackling the highlighted difficulties and supplying sufficient resources and training. The authors advocate for additional investigation of the quality of nursing work life and its related factors in the region.

Priyanka Taware (2018).The majority of nurses work throughout the week in various shifts, managing several duties both at work and at home. The work schedule impacts their familial and personal ties at home. The working conditions in hospitals significantly affect their children's education, attentiveness, and overall well-being. The nursing staff encounters safety and security issues within the facilities. This issue stems from a deficiency of security staff. The nursing staff encounters disruptions from patients, their family, and visitors. Consequently, nursing personnel experiences dissatisfaction due to the prevailing lack of respect for their job.

- Social Recognition and Self-Esteem

Battu, N., & Chakravarthy, G.K. (2014) This article analyzes the work-life quality of nurses and paramedical personnel in hospitals. The authors examine the diverse aspects influencing the quality of work life for healthcare professionals, encompassing job satisfaction, work environment, and organizational policies. The research employs a survey targeting nurses and paramedical personnel across several hospitals in India. The survey results indicated that work-life quality was influenced by company regulations, including professional advancement prospects and job security, in addition to the general work environment. The article offers recommendations to enhance the quality of work life in hospitals via improved policies and procedures. The results of this study are beneficial for healthcare organizations in formulating policies and procedures aimed at enhancing the quality of work life for nurses and paramedical personnel.

Gogoi (2016) This study investigated the correlation between social recognition and self-esteem among nurses in Assam, India. The research was performed with a cohort of 100 nurses from nursing institutions in Assam. The data was gathered by a self-administered questionnaire, comprising a demographic section and two assessment scales: the Social Recognition Scale and the Rosenberg Self-Esteem Scale. The findings indicated a substantial association between social recognition and self-esteem among nurses in Assam. This study's findings indicate that social acknowledgment significantly influences the self-esteem of nurses in India. This offers essential insight for nursing managers and policymakers to prioritize the enhancement of social recognition for nurses to elevate their self-esteem.

Research Gap

Despite extensive research on work-life balance (WLB) across all professions and healthcare environments, there is a paucity of empirical studies explicitly addressing female nurses in multi-specialty hospitals in Kerala. Current research frequently employs a generalized perspective on healthcare workers or nurses as a uniform cohort, neglecting to sufficiently consider gender-specific problems such as multiple work-family arrangements, caregiving obligations, and societal expectations that disproportionately impact female nurses.

Moreover, the study frequently neglects regional disparities in healthcare systems, work culture, staffing configurations, and institutional rules. The healthcare sector in Kerala, especially multi-specialty hospitals, functions under distinctive circumstances, characterized by substantial patient influx, shift-oriented work schedules, prolonged working hours, and escalating service expectations. Nevertheless, there is an absence of region-specific research investigating how these factors affect the work-life balance of female nurses in Kerala.

Furthermore, previous studies have predominantly investigated work-life balance in isolation, lacking adequate integration of workload, shift patterns, gender-specific expectations, and institutional support systems, including flexible scheduling, supervisory assistance, and leave policies. The interplay of these variables in multi-specialty hospital environments is yet inadequately examined.

This study systematically investigates the work-life balance of female nurses at multi-specialty hospitals in Kerala, thereby addressing a regional and gender-specific gap in the existing literature. The objective is to investigate the cumulative impact of workload, shift patterns, gender roles, and organizational support on work-life balance, thereby enhancing both academic comprehension and practical policy development.

Statement of the Problem

The healthcare sector in Kerala is progressively encountering significant human resource issues, especially within the nursing profession. From a Human Resource Management (HRM) standpoint, employee attrition and the increasing scarcity of experienced and talented nursing professionals have become critical concerns. Despite the increasing demand for healthcare services, hospitals, particularly multi-specialty facilities, are facing challenges in retaining skilled and proficient female nurses.

A considerable proportion of female nurses in Kerala are departing from their positions due to their inability to achieve a satisfactory work-life balance. Extended working hours, rotating and nocturnal shift patterns, elevated workloads, emotional strain, and insufficient organizational and familial support systems significantly contribute to work-family conflict. A survey by the Kerala Nurses Association (2021) indicates that work-life imbalance is a key factor contributing to job unhappiness and voluntary turnover among nurses in the state.

The issue is exacerbated by the scarcity of qualified nurses in India, stemming from an insufficient number of nursing training schools and the extensive foreign migration of nurses, especially from Kerala. The Kerala State Migration Survey (2022) indicates that income differentials between the private and government healthcare sectors, along with superior working conditions and remuneration abroad, incentivize numerous nurses to emigrate. This migration exacerbates staffing shortages in local hospitals and heightens the workload on the remaining staff, hence deteriorating work-life balance. Notwithstanding the gravity of these concerns, there exists a paucity of empirical research especially addressing the work-life balance of female nurses employed in multi-specialty hospitals in Kerala. Comprehending the impact of work-related issues, gender roles, and organizational support on work-life balance is essential for formulating successful HR strategies to mitigate attrition, retain talent, and ensure sustainable healthcare delivery. This study aims to thoroughly investigate the work-life balance problems encountered by female nurses in Kerala.

Research Questions

1. What are the key personal and professional factors that influence the work-life balance of female employees in multi-specialty hospitals?
2. How do organizational factors, such as support systems, shift patterns, and workload, affect the work-life balance of female employees in multi-specialty hospitals?
3. What are the main challenges faced by female employees in balancing their personal and professional lives in multi-specialty hospitals?
4. How do factors such as long working hours, high job demands, and lack of flexible work policies contribute to the challenges in maintaining work-life balance for female employees?
5. Is there a significant relationship between work-life balance and job satisfaction among female employees in multi-specialty hospitals?
6. How does the perception of work-life balance affect the overall job satisfaction and retention rates of female employees in multi-specialty hospitals?
7. What is the impact of work-life balance policies (e.g., flexible working hours, childcare support) on the job satisfaction of female employees in multi-specialty hospitals?
8. To what extent do work-life balance practices, such as wellness programs and flexible leave policies, improve job satisfaction and reduce burnout among female employees in multi-specialty hospitals?

Objectives of the Study

1. To examine the key factors affecting the work-life balance of female employees in selected multi-specialty hospitals.
2. To identify the challenges faced by female employees in maintaining a work-life balance while working in multi-specialty hospitals.
3. To assess the relationship between work-life balance and job satisfaction among female employees in the healthcare sector.
4. To evaluate the impact of work-life balance policies and practices on the job satisfaction of female employees in selected multi-specialty hospitals.

Methodology

Research Design: The study adopts a descriptive research design to examine the work-life balance of female nurses working in multi-specialty hospitals in Kerala. Descriptive research is appropriate as it helps in systematically describing the existing conditions, experiences, and perceptions related to work-life balance and associated factors such as workload, shift schedules, organizational support, and stress levels.

Research Type: The research is descriptive in nature, focusing on understanding and analyzing the current work-life balance conditions of female nurses without manipulating any variables. The study aims to present factual and accurate information based on respondents' experiences.

Sampling Design:

Sampling Method: The study uses the Convenience Sampling Method, a non-probability sampling technique. Female nurses working in selected multi-specialty hospitals in Kerala who were easily accessible and willing to participate were included in the study. This method was adopted due to time constraints, accessibility of respondents, and the demanding work schedules of nurses.

Sample Size: 100 Female nurses employed in multi-specialty hospitals in Kerala.

Sources of Data:

Primary Data

Primary data were collected directly from female nurses through the following methods:

- **Interviews**
Personal interviews were conducted with female nurses to gain in-depth insights into their work schedules, work-life challenges, stress levels, family responsibilities, and organizational support systems.
- **Survey Method**
A structured questionnaire was used to collect quantitative data. The questionnaire included both closed-ended and Likert-scale questions related to working hours, shift patterns, workload, job stress, family responsibilities, organizational support, and overall work-life balance.

Secondary Data

Secondary data were collected from various published and official sources to support and validate the study findings.

These include:

- Research journals, magazines, and newspaper clippings
- Previous research theses, research papers, articles, and books
- Online academic sources and journals
- Reports and publications from:
 - Department of Public Health and Family Welfare, Government of Kerala
 - World Health Statistics
 - Ministry of Health and Family Welfare, Government of India

- Directorate of Medical and Health Services
- National Family Health Survey (NFHS)
- Indian Council of Medical Research (ICMR)
- National Health Mission (NHM)
- NSI National Health Care Retention & RN Staffing Report

Statistical Tools used for the study

- Objective 1- Percentage, Mean, SD, Factor Analysis
- Objective 2- Frequency, Percentage, Weighted Average
- Objective 3- Correlation Analysis
- Objective 4- Regression, ANOVA, Mean Comparison

Data Analysis and Interpretation

Sample Size = 100 Female Nurses working in Multi-Specialty Hospitals in Kerala.

Table 4.1: Factors Affecting Work-Life Balance of Female Nurses

Factors	Agree (%)	Neutral (%)	Disagree (%)
Long working hours	72	18	10
Rotational/Night shifts	68	20	12
Occupational stress	66	22	12
Quality of working life	61	25	14
Family responsibilities	58	27	15
Organizational support	32	30	38

Interpretation:

The table demonstrates that extended working hours (72%) and shift responsibilities (68%) are the predominant factors influencing work-life balance. A significant proportion of nurses encounter occupational stress (66%) and substandard quality of working life (61%). Most respondents regard organizational support as insufficient, exacerbating work-life balance issues.

Table 4.2: Mean and Standard Deviation of Key Variables

Variables	Mean	Standard Deviation
Work-Life Balance	2.75	0.84
Occupational Stress	3.82	0.71
Job Satisfaction	2.92	0.79
Commitment of Nurses	3.05	0.76
Quality of Working Life	2.88	0.81

(5-point Likert scale)

Interpretation:

A mean score of 2.75 for work-life balance signifies a moderate to poor degree of balance among female nurses. The elevated mean value for occupational stress (3.82) indicates heightened stress levels. Moderate levels of job satisfaction and dedication indicate that imbalance adversely impacts nurses' attitudes and well-being.

Table 4.3: Challenges Faced by Female Nurses – Weighted Ranking

Challenges	Weighted Score	Rank
Long working hours	4.52	I
Night/rotational shifts	4.31	II
Occupational stress	4.18	III
Family responsibilities	3.96	IV
Lack of flexible schedules	3.72	V
Low social recognition	3.45	VI

Interpretation:

Prolonged working hours are seen as the foremost challenge, succeeded by shift work and occupational stress. Familial obligations and insufficient flexibility substantially influence work-life equilibrium, while diminished social recognition further undermines nurses' morale and self-worth.

Table 4.4: Correlation between Work-Life Balance, Job Satisfaction, and Commitment

Variables	Work-Life Balance	Job Satisfaction	Commitment
Work-Life Balance	1.00	0.64	0.59
Job Satisfaction	0.64	1.00	0.61
Commitment	0.59	0.61	1.00

Interpretation:

The correlation study indicates a moderate positive association between work-life balance and job satisfaction ($r = 0.64$), as well as organizational commitment ($r = 0.59$). This suggests that an enhanced work-life balance increases happiness and commitment among female nurses.

Table 4.5: Regression Analysis – Impact of Work-Life Balance

Dependent Variables: Quality of Working Life, Social Recognition, Self-Esteem

Model	R	R ²	F Value	Significance
WLB → QWL, Social Recognition, Self-Esteem	0.71	0.51	26.48	0.000

Interpretation:

The regression analysis indicates that 51% of the variance in quality of working life, social recognition, and self-esteem is accounted for by work-life balance. The model demonstrates statistical significance, suggesting that work-life balance significantly influences nurses' professional and personal well-being.

Table 4.6: ANOVA – Work-Life Balance and Job Satisfaction

Source	Sum of Squares	df	Mean Square	F	Sig
Between Groups	18.42	2	9.21	6.87	0.003
Within Groups	129.98	97	1.34		
Total	148.40	99			

Interpretation:

ANOVA results demonstrate a statistically significant disparity in job satisfaction among nurses with varying degrees of work-life balance ($p < 0.05$). Nurses who maintain a superior work-life balance exhibit more job satisfaction than their counterparts facing imbalance.

Findings of the study

- The research revealed that the work-life balance of female nurses in multi-specialty hospitals in Kerala is moderate to low, as evidenced by a mean work-life balance score of 2.75. This indicates that most nurses find it challenging to reconcile work and personal obligations.
- Long working hours appeared as the predominant issue influencing work-life balance, with 72% of respondents concurring that prolonged duty hours interfere with their personal and familial life.
- Rotational and night shifts considerably affect work-life balance, as indicated by 68% of nurses, complicating the management of domestic and social obligations.
- A significant degree of occupational stress was noted among female nurses, with 66% indicating stress attributed to workload, patient demands, and insufficient staffing.
- The quality of working life was deemed bad by the majority of respondents, with 61% reporting inadequate rest periods, task imbalance, and insufficient support services.
- Family and caregiving obligations exacerbate work-life imbalance, especially among married nurses, as indicated by 58% of respondents.
- Organizational support mechanisms, including flexible scheduling and leave policies, were deemed insufficient by the majority of nurses, with merely 32% indicating satisfaction.
- The investigation revealed that lengthy working hours, shift duties, and professional stress are the foremost issues, according to weighted average ranking.
- The study demonstrated a moderate positive correlation between work-life balance and job satisfaction ($r = 0.64$), suggesting that nurses with an improved work-life balance report greater job satisfaction.
- A positive correlation exists between work-life balance and organizational commitment ($r = 0.59$), indicating that enhanced balance fosters nurses' loyalty and attachment to their organizations.
- Regression analysis reveals that work-life balance accounts for 51% of the variance in quality of working life, social recognition, and self-esteem, underscoring its significant impact on nurses' overall well-being.
- ANOVA results indicated a statistically significant difference in job satisfaction among nurses with varying levels of work-life balance ($p < 0.05$), demonstrating that work-life balance policies significantly influence satisfaction levels.
- Nurses with an improved work-life balance exhibited elevated self-esteem and social acknowledgment, whereas those with inadequate balance perceived themselves as underappreciated and had heightened stress.
- The findings suggest that inadequate work-life balance leads to stress, discontent, and diminished commitment, thereby heightening turnover rates among female nurses.

Suggestions

- **Implement Flexible Work Schedules:** Hospitals ought to establish adaptable duty rosters, set schedules, and minimize night shifts whenever feasible to assist female nurses in reconciling work and familial obligations.
- **Restrict Extended Working Hours:** Management must guarantee that nurses' working hours adhere to established labor standards. Overtime should be curtailed and appropriately compensated to avert burnout.
- **Enhance Staffing Levels:** Optimal nurse-patient ratios should be upheld to alleviate workload and occupational stress, thereby enhancing work-life balance and overall quality of working life.
- **Establish Work-Life Balance Policies:** Hospitals must formulate formal work-life balance policies that encompass paid leave, maternity benefits, childcare assistance, and emergency leave arrangements.
- **Enhance Supervisor and Management Support:** Training programs must be implemented for supervisors to foster empathic leadership, effective communication, and emotional support for nursing personnel.
- **Hospitals should implement counseling services, stress management courses, yoga, and wellness programs** to mitigate professional stress and enhance mental well-being.
- **Enhance Quality of Working Life:** Ensuring adequate rest rooms, safe working conditions, and essential medical equipment can significantly improve the overall quality of working life for nurses.
- **Management should implement recognition and reward mechanisms** to enhance social acknowledgment, self-esteem, and morale among female nurses.

- Career Development Opportunities: Ongoing training, skill enhancement programs, and well-defined career advancement trajectories can elevate job satisfaction and organizational allegiance.
- Regular Feedback and Monitoring: Periodic surveys and feedback mechanisms must be implemented to evaluate work-life balance concerns and provide prompt enhancements in HR policy.

Conclusion

This study analyzed the work–life balance of female nurses at multi-specialty hospitals in Kerala, emphasizing the identification of significant influencing elements, obstacles, and their effects on job satisfaction, commitment, and general well-being. The study's findings unequivocally demonstrate that the work–life balance of female nurses in Kerala is moderate to low, underscoring a substantial human resource issue within the healthcare system. The data analysis indicated that extended working hours, rotational and night shifts, elevated occupational stress, and insufficient organizational support are the principal factors adversely impacting work–life balance. The convergence of work-related stress and familial caregiving obligations imposes significant strain on female nurses, hindering their ability to properly balance professional and personal responsibilities. The research indicated that the quality of working life continues to be inadequate for numerous nurses, exacerbating stress and discontent.

The research demonstrated a substantial positive correlation between work–life balance and both job satisfaction and organizational commitment, suggesting that nurses who achieve a superior work–life balance exhibit greater job satisfaction and enhanced commitment to their companies. Regression study further validated that work–life balance significantly influences quality of working life, social recognition, and self-esteem, underscoring its importance beyond simply job performance. The study suggests that work–life balance is a crucial factor influencing employee well-being and retention in the nursing field. In the absence of effective solutions, persistent imbalance may result in heightened stress, diminished job satisfaction, and increased turnover among female nurses.

Consequently, healthcare businesses must emphasize supportive human resource policies, adaptable work arrangements, and wellness efforts to enhance work–life balance. Resolving these concerns is crucial for the well-being of female nurses and for guaranteeing sustainable, high-quality healthcare provision in Kerala.

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