Psychological wellbeing and work life balance of the women gynecologists and nurses (Gynec & obst.)

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Project Summary

The term work/life Balance coined in 1986 in USA, has evolved around the idea of balancing work, life (i.e. personal needs and family responsibilities). These words have gained importance in the last few decades as society overall has undergone tremendous change in all these respects. The stereotype of the male breadwinner is no longer relevant as more and more women are venturing out to work and support the family. Thus both men and women' are experiencing Work/life conflicts and trying hard to gain Work/life Balance. Research on work/life conflict has reported its influence on job satisfaction, turnover, organizational commitment and absenteeism as well as on quality of intimate relationships and consequently on a person's mental health thus making it a much investigated and relevant topic for behavioral research. The term has three vital components – 'work', 'life' and 'balance'. In simple terms, "work" is normally conceived of in this context as including paid employment while "life" includes activities outside work like family, friends and community, The term 'balance' too, lends itself to a variety of meanings.

Clark (2000) defines balance as "satisfaction and good functioning at work and at home with a minimum of role conflict". A simplistic definition of balance may be "sufficient time to meet commitments at both home and work".

Psychological well- being is a multifold concept which refers to important aspects of quality of human life. WHO underlines the importance of fulfillment of mental, spiritual and environmental needs as important for one's overall health? It is a product of socialization and acculturation both. The process of attainment of psychological well- being is highly influenced by the 'significant others' or intimate relationships, family being the most fundamental of all. Family has a special place in a woman's emotional life. Her involvement in her family influences her own well- being to a large extent and the family dynamics contributes to it equally. Role of a woman in a family is becoming complex and it is challenging the traditional systems all over the world and especially in the urban areas in India. Working women many times experience this imbalance and report their discomfort about it. Till a few years back (around 20 years) with few exceptions most women used to work in sectors which had comparatively structured work hours and environments. However in the last 20 years, as the technological advancement and opportunity growth has boomed had in hand, more and more women are entering in professional domains which have indefinite work hours and work load. As it is true for the IT sector, a similar scenario is observed in the health services sector. Demands on the health sector are increasing day by day. Private practice is getting converted into super specialty hospitals where all services are offered under one roof thus leaving the professionals to a status of 'consultant employees'. Private and practitioners also are facing tremendous competition. Thus their work hours and complexity is increasing day by day. Doctors are facing stress related disorders with a rising rate. As a result of increased awareness and opportunities, women are entering in this sector in an increasing number. The demands of this work environment are also same for them irrespective of their traditional feminine roles.

This research tries to find out the state of art regarding this issue of work life balance and psychological well-being of women professionals from medical and paramedical streams so as to throw light on it.

The sample for the study consisted of 385 Gynecology professionals (187-consultants, 198 nurses) majority from Pune, and from Aurangabad, Latur and Nasik cities. Their age range was 28-60. The tools used were as follows:

- Work Life Balance Research Instrument: Developed by Dr. Smita Singh, Lucknow, which comprises of four dimensions operationalized as Work Spillover in Personal Life (WSPL), Personal Life Spillover in Work (PLSW), Work/Life Behavioral Enhancers (WLBE) and Work/Life Behavioral Constrainers (WLBC). The construct validity of the scale is provided by means of content, convergent and discriminant validity.
- That is how I feel (Carol Ryffs Scale of Psychological Wellbeing) (Ryff, 1989): The mid-length version was used for the present study which consists of 54 items,9 items each on six dimensions of psychological well-being namely environmental mastery, personal growth, positive relations with others, purpose in life, self-acceptance and autonomy.
- **Internal- External Scale**: Developed by Rotter, 1966, standardized, forced choice scale, 29 pairs of items. Assesses the locus of control. The questionnaire measures general QOL which corresponds to achievements and subjective evaluations and reactions of Dijker Model.
- Work life balance Questionnaire: An open ended Questionnaire developed by Jnana Prabodhini's Institute of Psychology for this specific purpose. Contains 11 questions covering six aspects of work and family life.
- **Interviews of Lady Gynecologists:** funnel type interview schedules were used to get insightful information from 16 respondents.

The data was analyzed by employing: Descriptive Statistics, One Way ANOVA, Multiple correlations, Multivariate Regression to obtain the results.

The main findings of the study are:

- For the total group, the work life balance regarding Work Spillover in Personal Life (WSPL) is highest which means that as compared to other areas the group is better off in managing their personal life without much interference of the work demands. While comparing the doctors and nurses on WLB, the doctors clearly show an upper hand in the total WLB score and in the balance regarding WSPL. This means that in spite of having similar pattern within the groups, they have different starting points for these two parameters.
- Results show that for the total group the Personal Growth(PG) scores are highest followed by, Positive Relation with others(PR),Environmental Mastery (EM),and Purpose in Life (PIL) and Autonomy(AU). Self-Acceptance (SA) is lowest among all. Comparative analysis indicates that except for the domain of personal growth there is no significant difference between the doctors and nurses with respect to their psychological well-being. This is quite interesting as the socio economic strata and proficiency levels for the two groups definitely have a considerable gap. In spite of that we see no observable difference in their perception of their own state of harmony with themselves on all the parameters except personal growth.
- It is observed that the sample has a high internal locus of control. They seem to be relying on their own perceptions and evaluations rather than being dependent on the circumstances/ people around or luck.

- An age wise comparison on WLB indicates that senior groups (i.e. 51-60 years) of Gynecologists and nurses have significantly higher scores on total work life balance, WSPL and WLBE respectively. The younger age group (22-30 years) seems quite vulnerable with lowest scores for all WLB areas. The comparison of Work life Balance separately had done across age groups in doctors and nurses shows a similar pattern.
- In spite of having differences in WLB, no significant difference was seen across age groups on all areas of PWB. This indicates that different age groups try to maintain their PWB levels appropriate to their age needs by employing certain coping mechanisms. Only for doctors however, when it comes to PWB, the elder-most age group shows significantly lower scores on autonomy as compared to the earlier two age groups. But for nurses, no significant difference across age groups is observed. It means that the nurses' perception regarding different areas of PWB is quite similar irrespective of the age they belong to.
- The homogeneity of the sample with respect to LOC seems to replicate in the age group comparisons. No significant differences were observed across age groups with respect to locus of control.
- Both WLB and PWB indicate a significant positive correlation with internal locus of control (ILOC) and a significant negative correlation with external locus of control (ELOC)
- This analysis indicates that for sample population, a rise in the balance with respect to PLSW and increasing use of WLBE is predictive of a rise in overall PWB.

The qualitative analysis of open ended questionnaire points out that both aspects (work and personal life) are considered equally important by majority of respondents. With this drive many of them are striving to be super woman, leading to a serious time crunch leaving a feeling of injustice to either or both. They expect cooperation from family members (often get it too!) as well as feel the need to use better planning and time management skills to overcome daily hassles. Emotional stressors are the worst ones and those specially related to children and family matters take away most of their energies. They do appreciate the societies' respectful view towards their profession (the nobility of it) and wish to make active efforts to make justice to their roles by better prioritization and self-management.

Thus it is evident that the work life balance of both doctors and nurses depends on how firm, openminded, spiritually oriented and ready to change they are.

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Anagha LL, Kanchan DP.(2019) A Study of Psychological Well-being and Work–life Balance of Female Nurses. Indian Journal of Nursing Sciences; 04(1): 9-14.

Research gate:

A study of psychological well-being and work–life balance of female nurses Anagha Lavalekar,Kanchan Pande

- June 2019
- Project: <u>Work -Life balance of women medical professionals in gynecology field</u>
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Conference Paper Presentation:

- 1. Comparing the Lady Doctors and Nurses from Gynecology field on Psychological Well Being and Work Life Balance at National Seminar on Quality of Life, Jnana Prabodhini's Institute of Psychology, Pune, Nov 2017.
- Psychological Well-being and Work Life Balance Of female Nurses- Symposium: Work related health and wellbeing at 26TH National Conference of National Academy of Psychology, IIT Chennai, 2016