Eksplorium *p*-ISSN 0854-1418 e-ISSN 2503-426X

The Dual Burden: Exploring Work-Life Balance among Female Healthcare Professionals in a Tertiary Care Hospital - A Cross Sectional Study

¹Dr. B. G. Shakthi Chakravarthy, ²Ms. Madalin Shipyrah K, ³Dr. V. V. Anantharaman, ⁴Dr. Roshni Mary Peter, *5Dr. Kalaivanan R

> ¹Community Medicine, SRM Medical College Hospital and Research Centre, SRMIST,

> > Kattankulathur, Chengalpattu, Tamilnadu

²Community Medicine, SRM Medical College Hospital and Research Centre, SRMIST,

Kattankulathur, Chengalpattu, Tamilnadu

³Community Medicine, SRM Medical College Hospital and Research Centre, SRMIST,

Kattankulathur, Chengalpattu, Tamilnadu

⁴Community Medicine, SRM Medical College Hospital and Research Centre, SRMIST,

Kattankulathur, Chengalpattu, Tamilnadu

⁵Community Medicine, SRM Medical College Hospital and Research Centre, SRMIST,

Kattankulathur, Chengalpattu, Tamilnadu

*Corresponding Author:

Revised: 15 April 2025, Article Received: 20 Feb 2025, Accepted:02 May 2025

ABSTRACT: This study explores into the complicated dynamics of work-life balance among female healthcare professionals, aiming to provide a good understanding of the challenges and factors influencing their professional and personal lives. The Objectives of the study is to estimate the prevalence of factors influencing work-life balance, assessing the challenges in work-life balance faced by female healthcare professionals and to find out the association between factors influencing work-life balance and socio-demographic factors. A total of 246 female healthcare personnel were selected using simple random sampling from diverse departments in a tertiary care hospital. A modified semi-structured questionnaire was used and detailed interview was conducted among the study participants. Chi-square test was used to find the association. While most receive family support, many feel broken and guilty about not spending enough time with loved ones. However, satisfaction with job and managerial support is relatively high. Flexible work arrangements and childcare options positively impact work-life balance. Notably, factors such as education level and employment status also influence work-life balance. Better managerial support, flexible work arrangements, and effective communication of policies can help enhance the work-life balance for women in healthcare, ultimately leading to better job satisfaction and overall well-being.

KEY-WORDS: Work-life balance, healthcare professionals, job satisfaction, work performance, organizational support.

INTRODUCTION:

Work-life balance (WLB) indicates "the extent to which an employee experiences feeling fulfilled and having his or her needs met in both work and non-work facets of life". It is attained when everyone's right to a happy life—both inside and outside of paid employment—is acknowledged and upheld as the standard, for the good of the individual, the company, and society as a whole (1,2). The majority of work-life balance definitions have emphasized that there is no perfect ideal balance because it depends on how much weight an employee places on various aspects of their lives (3). As a sociological concept, WLB has historically focused mostly on the responsibilities and challenges that come with juggling work and non-work-

e-ISSN 2503-426X

related activities, and its arguments frequently give working moms' experiences priority(4). The need for a clear policy and well-designed policies to promote work-life balance has grown as a result of a number of variables, including higher job expectations, a greater proportion of time spent at work, increased competition, lifestyle and demographic considerations, and the increased employment rate of women (2). The nature and makeup of the workforce are changing and will continue to change in the years to come, making work and family issues more and more crucial for organizations to take into account. In a nation like India, where patriarchy is still deeply ingrained, women are primarily tasked with taking care of their families, and the idea that they should be considered the breadwinners is still relatively new (5). Women are increasingly joining the workforce due to better economic conditions, but their responsibilities at home haven't decreased. As a result, this stress can hurt their health and result in absenteeism. Finding this balance between personal and professional commitments is one of the most challenging issues that employees and employers need to address (6). Employees will be more devoted to their company and less likely to leave when they are actively immersed in their work. (7)

Working women face a tremendous pressing factor as a result of their efforts to organize, integrate, and feel balanced among the various issues and their actions in their few sections at the same time (8). An individual's social life and performance at work are negatively impacted by a poor work-life balance. Employee needs and satisfaction are influenced by industry rules and practices, which determine how well work and personal life are balanced (9). However, compared to women who play fewer roles, women who play several roles reported better physical and mental wellbeing. Another source of role conflict is a reversal relationship, when job performance is impacted by personal stress (10-13). One must work around the clock, be alert, and be on their toes in the healthcare industry(14). Women in the medical field confront numerous obstacles in their careers, including prejudice, a lack of support, discrimination, bullying, harassment, conflicts among coworkers, workplace politics, etc. Therefore, in order to improve their work contentment and provide high-quality medical services, it is crucial to provide them with a comfortable working environment, a flexible work schedule, and strong family support (15). Additionally, the body of existing research demonstrates the many advantages of effective work-family (WLB) interventions, which result in favorable organizational outcomes like decreased WFC, high organizational citizenship behaviors, high organizational commitment, and enhanced job satisfaction (16).

Objectives:

- To estimate the prevalence of factors influencing work-life balance
- To assess the challenges in work-life balance faced by female healthcare professionals
- To determine the association between factors influencing work-life balance and sociodemographic factors.

METHODOLOGY:

A cross-sectional study was conducted at SRM Medical College Hospital and Research Centre, Chengalpattu and the study population included all Female healthcare professionals. The data collection was done for 3 months – from April 2024 to June 2024. The desired sample size was achieved by considering the percentage of performance satisfaction p=19 from a study by Agrawal N, Amin (8) and was found to be 246 (n). Those who were working for more than 6

months were taken department wise by simple random sampling until the desired sample size was reached. Those who were not willing to participate or absent at the time of data collection were excluded from the study.

A Modified semi-structured questionnaire comprising of the following 4 sections was used

Section A– Socio-demographic characteristics

Section B - Work-life balance challenges.

Section C – Factors influencing work-life balance

Section D – Organizational Policies and Practices

After getting approval from Institutional Ethical Review Board (SRMIEC-ST0224-897), data collection started. Data was coded and verified for accuracy and consistency. The data collected was entered into Microsoft Excel spreadsheet and analyzed using IBM SPSS version 26.0. Frequency and percentage was used to represent categorical variables. Inferential statistics like Chi-square test was used to find the association between the study variables.

RESULTS:

Table 1 shows that among 246 participants 39% (96) were aged between 26 to 30 years, and only 8% (19) were aged above 41 years. Among designations 22% (54) were doctors, 34% (85) were nurses, 25% (61) were technicians, 11% (27) were pharmacists, and 8% (19) were therapists. Among the study participants, 74.4% were married and 46.7% of the study population had children. The study population's education level showed that 11.4% (28) held a diploma, 66.7% (164) held a bachelor's degree, and 22.0% (54) held a post-graduation degree. The majority of the study population 42.7% had an annual income below 2 lakhs. 35.8% of the population had an income between 2 to 4 lakhs, while 13.0% had an income between 4 to 6 lakhs. Additionally, only 8.5% of the total study population had an income above 6 lakhs.

According to Table 2, 52.8% of the respondents answered that they sometimes feel broken by their work-life balance. 6.5% of the population surveyed did not feel guilty about not spending enough time with their family and friends. On the other hand, more than half of the respondents felt guilty about not spending enough time with their loved ones. Only 9.8% of respondents were able to fully relax and enjoy their leisure time. 5.3% do not receive family support for household work, while 94.7% receive some sort of family support.

From table 3, the results for "overall job satisfaction" indicate that 82.5% (203) of participants were content. Regarding "the level of support from their manager," 69.1% of respondents were pleased. In terms of "flexibility of their work schedule," 69.9% were happy. When it comes to the "availability of childcare options in the workplace or community," 75.2% were gratified and finally, "support received from family and friends" showed that 79.3% received support. Thus a positive result was seen among the factors influencing work-life balance in the study participants.

The study shows a strong association between work-life balance and various sociodemographic factors. There is significant association seen in table 4 between having children and overall job satisfaction, work flexibility, and family support. These factors are crucial for women with children, as they navigate the demands of both work and family life. There was association concerning women with the highest education and childcare options seen in the workplace. Higher educational attainment is linked with better childcare options at the workplace, highlighting the importance of education in accessing supportive resources. The

 Eksplorium
 p-ISSN 0854-1418

 Volume 46 No. 1, May 2025: 429–437
 e-ISSN 2503-426X

table 4 also suggests a strong association between women's employment status and overall job satisfaction, level of support, childcare options in the workplace, indicating a significant impact on work-life balance.

Tables and Figures:

Table 1: Frequency Distribution of Socio-Demographic Variable (n=246)

DEMOGRAPHIC	FREQUENCY	PERCENTAGE					
VARIABLES	TREQUERCE	TERCEITIGE					
AGE(years):							
20 – 25	73	29.7					
26 - 30	96	39.0					
31 - 35	31	12.6					
36 - 40	27	11.0					
above 41	19	7.7					
DESIGNATION:	DESIGNATION:						
Doctor	54	22.0					
Nurse	85	34.6					
Technician	61	24.8					
Pharmacist	27	11.0					
Therapist	19	7.7					
MARITAL STATU	IS:						
Unmarried	63	25.6					
Married	183	74.4					
CHILDREN:							
No	131	53.3					
Yes	115	46.7					
EDUCATION:							
Diploma	28	11.4					
Bachelor's degree	164	66.7					
Post Graduation	54	22.0					
INCOME:							
Below 2 lakhs	105	42.7					
2 to 4 lakhs	88	35.8					
4 to 6 lakhs	32	13.0					
Above 6 lakhs	21	8.5					
Total	246	100.0	_				

Table 2: Frequency distribution of work life balance challenges (n=246)

Volume 46 No. 1, May 2025: 429-437

Questions		Never	Rarely	Sometimes	Often	Always	Total
Often felt broken by Work	Frequency	21	40	130	48	7	246
life balance	Percentage	8.5	16.3	52.8	19.5	2.8	100
Spending enough time with	Frequency	16	46	116	43	25	246
family or friends	Percentage	6.5	18.7	47.2	17.5	10.2	100
Fully relax and enjoy leisure	Frequency	28	33	114	47	24	246
time	Percentage	11.4	13.4	46.3	19.1	9.8	100
Family support in household	Frequency	13	30	59	67	77	246
works	Percentage	5.3	12.2	24.0	27.2	31.3	100
Physically and Emotionally	Frequency	28	38	108	40	32	246
Exhausted from Work	Percentage	11.4	15.4	43.9	16.3	13.0	100

Table 3: Frequency distribution of factors influencing work-life balance (n=246)

Factors influencing work-	Very Satisfied	Satisfied	Neutral	Dissatisfied	
Overall ich setisfaction	Frequency	48	155	39	4
Overall job satisfaction	Percentage	19.5	63.0	15.9	1.6
Level of Support you	Frequency	44	126	74	2
receive from your Manager	Percentage	17.9	51.2	30.1	0.8
Flexibility of your Work Schedule	Frequency	44	128	74	0
	Percentage	17.9	52.0	30.1	0
Availability of Childcare Options in Your	Frequency	59	126	59	2
Workplace or Community	Percentage	24.0	51.2	24.0	0.8
Support you receive from	Frequency	64	131	51	0
your family and friends	Percentage	26.0	53.3	20.7	0

Table 4: Association between factors influencing work-life balance and sociodemographic factors (n=246)

	Children		Highest e	ducation	Employee status	
	χ2	P-value	χ ²	P-value	χ ²	P-value
Over all job satisfaction	16.705	0.001*	8.217	0.223	20.174	0.017*
Level of support	0.531	0.912	10.135	0.119	47.687	< 0.001*
Work flexibility	6.849	0.033*	6.305	0.177	8.904	0.179
Childcare option in work place	2.325	0.508	18.342	0.005*	24.638	0.003*
Family support	8.362	0.015*	6.049	0.196	4.805	0.569

^{*} p<0.05 shows significant association

DISCUSSION:

The study aims to explore the challenges faced by female healthcare professionals in balancing their work and personal lives, highlighting the prevalence of socio-demographic factors affecting work-life balance. The data from the study of 246 female healthcare professionals reveals that marital status significantly impacts work-life balance, with 74% being married and facing greater difficulties compared to their unmarried counterparts. This aligns with previous research conducted by N. Lakshmi et al (17), indicating that married women, particularly those with children, often experience heightened work-life conflict due to increased domestic responsibilities and societal expectations. Married working women experience significant "time-squeeze," making it difficult to engage in hobbies, maintain relationships, or provide desired family input due to tight schedules. In comparison with another study conducted by R.Priyadharshini et al (6) on "Work-life balance of nurses and lady doctors", females prioritize their jobs, and the availability of child care services at work resonates in this study.

The study reveals that a large number of respondents frequently feel overwhelmed by their work-life balance, with 52.8% experiencing this sentiment often. Additionally, 47.2% of participants feel guilty about not spending enough time with family and friends. These findings are consistent with other studies Agrawal et al (18) that highlight the emotional and psychological strain experienced by female healthcare workers who manage demanding professional responsibilities and family obligations. Despite a small percentage finding their work-life balance acceptable, a significant majority of respondents feel unsatisfied with it. Furthermore, 46.3% of respondents are unable to fully relax during leisure time, indicating the pervasive nature of stress among these professionals. This stress is exacerbated by long working hours and the high emotional demands of healthcare roles, leading to burnout and reduced job satisfaction. According to an international publication by Madesh et al (9) women in the workplace often face unrealistic expectations, including responsibility for household chores and caregiving, which can lead to increased stress levels and health problems.

The support systems in place appear to be crucial in dealing with these challenges. According to the study, a large majority (94.7%) receive family support for household work, which is important for managing work-life balance. This is also supported by an international journal by

Jodie Raffi et al (19) which states that family contributions are crucial for managing excessive responsibilities. Additionally, 82.5% of respondents are satisfied with their jobs, and 69.1% rate the support from their managers positively. These findings align with a journal by Neha Agrawal et al (8) which emphasizes the significance of managerial support and family assistance in reducing work-life conflict and enhancing job satisfaction among female healthcare professionals.

Moreover, flexible work schedules and the availability of childcare options, which are positively rated by 69.9% and 99.2% of respondents respectively, further contribute to a supportive work environment. As mentioned in a journal by Chaitra R et al (20) most workers believe that the company's flexible ending time allows them to successfully manage their work and personal lives. These measures are critical in enabling women to effectively manage their dual roles, as supported by various studies advocating for organizational policies that promote flexibility and family-friendly practices. This is suggested in a study of work-life balance in the healthcare industry by Rashmi Farkiya (21), which recommends organizational practices to improve work-life balance and enhance morale, satisfaction, and performance.

Highlighting the link between socio-demographic factors and work-life balance, it shows that women with children have a strong association with overall job satisfaction, work flexibility, and family support, indicating the importance of these factors in achieving a balanced life this is same as in the study "factors influencing work-life balance of women employee" by Dr. R. Udaya Bhanu (22) revealed that workload (WLB), family support, and organizational support all had a significant impact on work-life balance. Furthermore, there is a substantial correlation between childcare alternatives and the highest degree of education, indicating that women with higher levels of education would have easier access to services that can support them. Work-life balance is also significantly impacted by employment status; people in stable jobs report better levels of support and job satisfaction. These results are consistent with other studies, which highlight the important role that variables like marital status, parenting obligations, and educational attainment have in work-life balance outcomes. In order to improve the work-life balance and general well-being of female healthcare professionals, the study emphasizes the significance of customized policies and support networks.

Limitations:

The study is limited to SRM Medical College Hospital and Research Centre and results cannot be generalized to other hospitals. This study was only done for a limited period and was unable to examine all pertinent elements related to women's work-life balance. The responses are based on the female staff available during the study.

CONCLUSION:

The research emphasizes the various challenges that female healthcare professionals encounter in balancing their professional and personal lives. Addressing these challenges through effective support systems can lead to improved productivity and satisfaction among female healthcare workers. A woman is more devoted to her office management when she can successfully juggle her personal and professional obligations. She is able to succeed professionally as a result. Additionally, it will help her lead a happy and healthy life.

REFERENCES:

 Eksplorium
 p-ISSN 0854-1418

 Volume 46 No. 1, May 2025: 429–437
 e-ISSN 2503-426X

- [1] Shravanthi AR, Deshmukh S, Deepa N. Work life balance of women in India. International Journal of Research in Management Sciences. 2013;1(1):83-92.
- [2] Shivakumar K, Pujar V. Work-life balance in the health care sector. Amity Journal of Healthcare Management. 2016;1(2):45-54.
- [3] Gragnano A, Simbula S, Miglioretti M. Work-life balance: weighing the importance of work–family and work–health balance. International journal of environmental research and public health. 2020 Feb;17(3):907.
- [4] Akanji B, Mordi C, Ajonbadi HA. The experiences of work-life balance, stress, and coping lifestyles of female professionals: insights from a developing country. Employee Relations: The International Journal. 2020 May 22;42(4):999-1015.
- [5] Shabir S, Gani A. Impact of work-life balance on organizational commitment of women health-care workers: Structural modeling approach. International Journal of Organizational Analysis. 2020 Apr 22;28(4):917-39.
- [6] Priyadharshini R, Divya D. Work-Life Balance of Nurses and Lady Doctors. GIS SCIENCE JOURNAL. 2022;9(12):1345-53.
- [7] Marseno WA, Muafi M. The effects of work-life balance and emotional intelligence on organizational commitment mediated by work engagement. International Journal of Business Ecosystem and Strategy (2687-2293). 2021 Oct 30;3(2):01-15.
- [8] Agrawal N, Amin S. Study about the Work-Life Balance among All Women Professionals and Its Impact on Their Job Satisfaction, Job Performance and Job Turnover Intention In Covid-19 Crisis. Journal of Positive School Psychology. 2022 Aug 6:9082-93.
- [9] Madesh G. A Study on Work-Life Balance Among Women Staffs in Health Care System. International Journal of Research Publication and Reviews. . International Journal of Research Publication and Reviews. 2022;3(11).
- [10] Delina, G., and Raya, R. P. (2013). A study on work-life balance in working women. International Journal of Commerce, Business and Management, 2(5), 274-282.
- [11] Emslie, C., and Hunt, K. (2009). 'Live to work'or 'work to live'? A qualitative study of gender and work–life balance among men and women in mid-life. Gender, Work and Organization,16(1), 151-172.
- [12] Reddy, N. K., Vranda, M. N., Ahmed, A., Nirmala, B. P., and Siddaramu, B. (2010). Work-Life Balance among Married Women Employees. Indian journal of psychological medicine, 32(2), 112–118.
- [13] Jensirani, M., and Muthumani, A. (2017). A study on work life balance of nurses in Kovilpatti Town. International Journal of Science Technology and Management,6(2), 114-21.
- [14] Maiya U. A study on work life balance of female nurses with reference to multispeciality hospitals, mysore city. Asia Pacific Journal research1 (28). 2015 Jun.
- [15] Akhila R, Shaila Shri VT. Work-Life Balance of Women Medical Professionals in the Healthcare Sector-A Systematic Literature Review. Int Journal of Health Sciences and Pharmacy 2021. 2021;5(2):54-79.
- [16] Chaudhuri S, Arora R, Roy P. Work-Life balance policies and organizational outcomes—a review of literature from the Indian context. Industrial and Commercial Training. 2020 Jul 17;52(3):155-70.

EksploriumVolume 46 No. 1, May 2025: 429–437

- [17] Lakshmi N, Prasanth VS. A study on work-life balance in working women. International Journal of Advanced Multidisciplinary Scientific Research. 2018;1(7):76-88.
- [18] Agarwal R, Mishra A, Dixit P. Gender and work-life balance. International Journal of Science Technology and Management, (4). 2015 Sep; 1:67-75.
- [19] Raffi J, Trivedi MK, White L, Murase JE. Work-life balance among female dermatologists. International Journal of Women's Dermatology. 2020 Jan 1;6(1):13-9.
- [20] Chaitra R, Kumar A, Murthy R. A Study on Work Life Balance of The Employees at Boschltd, Bangalore. International Journal of Social Research. 2016;12(3):61-8.
- [21] Farkiya R, Mogre S, Patni P. A study of work-life balance in health care industry with special reference to allopathic doctors in the Indore city. International Journal of Research in Management, Economics and Commerce. 2017;7(11):40-7.
- [22] Udaya Bhanu R. Factors influencing the work-life balance of women employee introduction. Chem Bull [Internet]. [cited 2024 Feb 28]; 2023:1806–17