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The impact of poor work life balance on employees health, organisation and society

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Abstract

Work-life balance has become a significant concern for businesses today. Work life balance refers to striking a healthy balance between an employee's personal life, mental and physical health, personal commitments, and work responsibilities. Over the years, the overwhelming demands of work have had a considerable impact on working persons' family and social lives. Furthermore, failure to create a "balance" between different life domains may have negative impact on their health and psychology. Work-life imbalance has also several negative impacts on organisations. The purpose of this research paper is to investigate the impact of poor work life balance on paramedical staff of the hospitals in Himachal Pradesh. Data was gathered by surveys with a sample size of 360 respondents from government and private hospitals using the quota sampling method. The responses of the respondents were assessed using five-point Likert scales. Independent t-test, ANOVA and post hoc tests were conducted to analyse the data. The analysis results briefly show that poor work life balance has negative impact on health, psychology, society and organisation. Due to poor work life balance, employees have to face many problems such as stress, burnout, headache, depression, poor psychological wellbeing and it also leads to increased absenteeism etc.

Keywords: Work life balance, health and psychology related issues, personal and societal issues, organisational issues

Introduction

Work is an essential aspect of life, and in today's workplace, people often struggle to achieve a balance between work and family life. Employees and employers both have a role to play in achieving goals and maintaining a healthy lifestyle. The main goal of supporting work-life balance is to achieve a state of equilibrium for both employees and employers. When there is a balance between personal and professional life, pressure is reduced, and employee happiness enhances their quality of life and job productivity. The flaws in work-life balance can damage both the employee and the employer. Individuals, families, and communities are all stressed as a result of multi assignments are to be performed by the workers which include employment, children, home, volunteering, spouse and aged parent care. Work-life balance is a critical issue that affects employees, employers, and communities. Due to the great prevalence of this condition, it appears to be getting worse over time.

Long work hours and high-stress professions not only make it difficult for employees to balance work and family life, but they also increase the risk for health problems like increased smoking and alcohol intake, weight gain, and depression. Work-life conflict has been associated to a variety of physical and mental health issues. A wide variety of strategies are now being employed to assist employees in achieving work-life balance. It's vital to clarify that certain work-life balance initiatives assist employees deal with stress and manage better in general, while others help to reduce absolute stress levels by balancing work life. Employers are increasingly adopting wellness initiatives.

Literature review

Dusseau & Thomas (2011) ^[1] in their research paper entitled "Work-Family Balance, Well Being, and Organizational Outcomes: Investigation Actual Versus Desired Work Family Time Discrepancies" analyzed and described the new relation of work and family balance that was based on discrepancies between desired and actual hours spent in the work domain as well as family domain. It was observed from the study that works hour discrepancy and family hour discrepancy had a negative relationship with perception of work-family balance,

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quality of life and organizational commitments. On the other hand stress, depression and intention to leave the organization were positively related to a family hour and work hours discrepancy. It was concluded that if family and work hours discrepancy was high, then the level of stress, depression and chance of leaving the organization was high. Nayeem & Tripathy (2012) ^[2] carried out a study on "Work-Life Balance among Teachers of Technical Institutions" stated that teaching is reported to have positive and negative experiences about work and life. It was observed that imbalance of work life relationships could lead to severe health problems and hamper job performance. It was found that job satisfaction has negative relation with turnover intention while WLB and burnout have a positive relationship with satisfaction. From the study, it was concluded that when employees were allowed to have some control in managing their potential conflicts between work and non work demands, it not only helped to gain job satisfaction but also reduced employee's turnover intentions and symptoms of stress. Khatri & Behl (2013) ^[3] in their research paper entitled "Impact of Work Life Balance on the performance of employees in Organization" highlighted the importance of work life balance for employees and employers. It was found that employees felt stressed when they perceived some degree of imbalance between work and life and reasons for stress were excess demand of work relationship with management, colleagues and peer, level of control, etc. this stress had a negative impact on outcome and performance. It was indicated that negative effects of work life imbalance result increase in absenteeism, low productivity, low morale, depression, mental illness, etc. It was concluded that work life balance approaches are not just to recruit & retain employees but also to help employees work better. Brough *et al.* (2014) ^[4] conducted a study on "Work Life Balance: A Longitudinal Evaluation of a New Measure Across Australia and New Zealand Workers" established a hypothesis that work life balance would have a negative relationship with psychological strain, the demand of work and turnover intention and the significant positive relationship with job satisfaction and family satisfaction. The study revealed that work demand, turnover intention and psychological strain were negatively associated with work life balance, on the other hand, there was a positive relationship between work life balance and family and job satisfaction. Kumar & Thomas (2015) ^[5] in their research paper, "An Empirical Study on Perceived Quality of Work Life and Turnover Intention among the Employees of Private Hospitals" examined the quality of work life balance of private hospitals employees and also analyzed its impact on turnover intention. The study indicates that promotion policies, supervisor behaviour, pay level and reward, job security were negatively related to turnover intentions. The study also found that employees who worked in private hospitals had lower quality of work life balance. They were not satisfied with pay benefits, workload and job security. Job stress and increased workload caused dissatisfaction, frustration and made employees upset and those results in employees' turnover. Niranjana & Jothimani (2017) ^[6] studied "Factors Influencing Work Life Balance of Women Employees in Information technology Companies". The study mainly focused on anxiety and commitment of stress factors that influence the work life balance of women

employees. Factor analysis, ANOVA, cluster analysis and multiple regressions were used to analyze the data. It was found that mental pressure and removing strategy caused anxiety and stress increased the mental pressure and created an undesirable situation. Women faced difficulties in coping with these situations and that become a source of psychological stress to them. Further, it was found that these factors can prompt medical issues like sleeping disorders, hypertension, headache, coronary illness and stroke.

Need and scope of the study

Hospitals are classified as complicated organisations that give services to patients 24 hours a day, 365 days a year. In an emergency, many doctors, nurses, and paramedics are obliged to work overnight on a regular basis, putting them under a lot of stress. This is a main source of conflict between their personal and professional lives, and it has a detrimental impact on their performance. A healthy work-life balance is becoming essential for the successful execution of organisational strategies, and it is linked to a variety of good outcomes, such as job satisfaction, career satisfaction, reduced stress, emotional weariness, and reduced anxiety. If a proper level of balance is found and sustained between work and life domains, it benefits the employees and organisations in terms of increased productivity, decreased absentism, fulfilling personal life responsibilities, Job and life satisfaction, etc. Thus the present study attempts to analyse the impact of poor work life balance on paramedical staff of the hospitals in Himachal Pradesh. Further the field survey has been conducted during the year 2019-20.

Objective of the study

- To analyse the impact of poor work life balance on paramedical staff of the hospitals.

Research methodology

The present study is based on survey method. The study has been carried out among the paramedical staff of the government and private hospitals in Himachal Pradesh. Primary data was collected using questionnaire given to 360 respondents. Quota sampling technique was adopted to select individual respondents from the target population. To achieve the objective of the study, a scale has been developed comprising nine statements, these statements are measured on the five-point scale as strongly disagree-1, disagree-2, neutral -3, agree-4, strongly agree 5. Data was analysed with the help of statistical tools like mean, standard deviation, skewness t-test, post hoc and ANOVA using SPSS software.

Results and Discussions

Impact of poor work life balance on health and psychology of hospitals employees

Stress, hostility, sadness, hopelessness, and job control are all "psychosocial" elements that appear to be linked to physical health. In terms of psychosocial determinants, negative risk profiles appear to be linked to general social disadvantage. In this segment four statements such as make me irritable at work as well as home, demand from work make me stressful, I usually feel burnout, I suffer from work related stress which manifests as physical ailment such as

headache, insomnia, depression etc. and poor or low level of psychological wellbeing are included. The responses of respondents to all the variables ranges from 1 (strongly disagree) to 5 (strongly agree). The minimum score for this factor is four and maximum score can be twenty. Descriptive statistics for the impact of poor work life balance on health and psychology of hospital employees on

the basis of designation have been presented in table- 1 (a). The value of the mean is maximum in the case of nursing staff that is 15.3125 and minimum in the case of supervisory staff (13.3125) which reports that imbalance between work and life causes more health and psychology-related problems to nursing staff as compare to supervisory staff.

Table 1 (a): Descriptive Statistical Analysis of Impact of poor work life balance on health and psychology: Designation-wise Distribution

Designation	N	Mean	Std. Deviation	Std. Error	Skewness	95% Confidence Interval for Mean	
						Lower Bound	Upper Bound
Nursing staff	224	15.3125	3.01426	.20140	-.366	14.9156	15.7094
Technician staff	104	14.3269	3.46254	.33953	.017	13.6535	15.0003
Supervisory staff	32	13.3125	2.95593	.52255	.073	12.2468	14.3782
Total	360	14.8500	3.20337	.16883		14.5180	15.1820

Source: Data collected through questionnaire

The calculated values of standard deviation reveal variation in the responses of all respondents irrespective of any designation. The computed values of skewness for the responses of nursing staff is -.366 which shows inclination

of majority responses towards the higher side of mean and positive skewness shows that majority responses of technician and supervisory staff fall towards the lower side of their respective means.

Table 1 (b): ANOVA Results for Impact of poor work life balance on health and psychology: Designation wise distribution

	Source	S.S	Df	M.S	F ratio	Sig
Designation	Between groups	152.015	2	76.008	7.683	.001
	Within groups	3531.885	357	9.893		
	Total	3683.900	359			

Source: Data collected through questionnaire.

Table-1 (b) highlights the ANOVA results for the impact of poor work life balance on health and psychology of hospital employees based on designation in which the significance value of F. test is less than 0.01 which rejects that null

hypothesis. Hence, it can be said that there is a significant difference of poor work life balance on health and psychology of various categories of hospitals employees.

Table 1 (c): Post hoc results for Impact of poor work life balance on health and psychology

Designation		Mean Difference	Std. Error	Significance
Nursing staff	Technician staff	.98558*	.37322	.023
	Supervisory staff	2.00000*	.59442	.002
Technician staff	Nursing staff	-.98558*	.37322	.023
	Supervisory staff	1.01442	.63584	.249
Supervisory staff	Nursing staff	-2.00000*	.59442	.002
	Technician staff	-1.01442	.63584	.249

The post hoc results for the impact of poor work life balance on health and psychology shows that the difference is highly significant in the case of nursing staff. Therefore, it can be said that nursing staff faces more work life imbalance which is causing more loss to their mental and physical health. It can be analyzed that nursing staff have to work for longer shifts with few breaks or without breaks and also work for different types of health-affected patients that create heavy pressure and heighten their stress level and it leads to health and psychology related problems like depression, anxiety, headache, etc. The results of this study also similar with Lunau etl. (2014) [7] and Okeya et al. (2020) [8] in which

they found that work life balance significantly affected employees' health & wellbeing.

Table-2 (a) shows descriptive analysis for impact of poor work life balance on the basis of working hours per week. The data show that the mean is maximal, at 15.6607 and 15.2759 for employees working 48-54 hours per week and more than 54 hours per week, respectively. As a result, it can be said that employees who are working for more than 54 hours per week have a greater influence on their health and psychology than those who are working for lesser hours per week.

Table 2 (a): Descriptive Statistical Analysis of Impact of poor work life balance on health and psychology

Working hour per week	N	Mean	Std. Deviation	Std. Error	Skewness	95% Confidence Interval for Mean	
						Lower Bound	Upper Bound
36-42 hours	69	14.4058	3.34013	.40210	.034	13.6034	15.2082
42-48 hours	148	14.5000	3.21667	.26441	-.193	13.9775	15.0225
48-54 hours	56	15.6607	2.89373	.38669	-.246	14.8858	16.4357
More than 54 hours	87	15.2759	3.16114	.33891	-.393	14.6021	15.9496
Total	360	14.8500	3.20337	.16883		14.5180	15.1820

Source: Data collected through questionnaire and schedule.

The computed values of skewness for those employees who are working for 36-42 hours per week is .034 which indicate that majority of responses falls towards the lower side and for other groups under study i.e. 36-42 hours, 42-48 hours,

48-54 hours and more than 54 hours, majority of frequencies lie towards higher side of mean score. The calculated values of standard deviation confirm variation in the responses of the respondents.

Table 2 (b): ANOVA Results for Impact of poor work life balance on health and psychology: Working hours per week wise distribution

	Source	S.S	Df	M.S	F ratio	Sig
Working hours per week	Between groups	84.329	3	28.110	2.780	.041
	Within groups	3599.571	356	10.111		
	Total	3683.900	359			

Source: Data collected through questionnaire.

ANOVA results for the impact of poor work life balance on health and psychology confirms that the significance value of F test is less than 0.05, hence the null hypothesis is rejected. As a result, based on the number of working hours

per week, it can be stated that there is a considerable difference in the mean score for the impact of poor work-life balance on the health and psychology of hospital employees on the basis of working hours per week.

Table 2 (c): Post hoc results for Impact of poor work life balance on health and psychology: Working hours per week Wise distribution

Working hours per week		Mean Difference	Std. Error	Significance
36-42 hours	42-48 hours	-.09420	.46353	.997
	48-54 hours	-1.25492	.57192	.127
	More than 54 hours	-.87006	.51260	.327
42-48 hours	36-42 hours	.09420	.46353	.997
	48-54 hours	-1.16071	.49887	.094
	More than 54 hours	-.77586	.42958	.272
48-54 hours	36-42 hours	1.25492	.57192	.127
	42-48 hours	1.16071	.49887	.094
	More than 54 hours	.38485	.54477	.895
More than 54 hours	36-42 hours	.87006	.51260	.327
	42-48 hours	.77586	.42958	.272
	48-54 hours	-.38485	.54477	.895

Post hoc results for impact of poor work life balance on the basis of working hour per week on health and psychology, employees of all groups perceive in the similar manner because there is no significant difference between two groups as is depicted by post hoc results.

Impact of poor work life balance on organisation

Work life balance is seen as key driver of employees’ satisfaction and productivity. Employees who are better able to balance the demands on their time are more satisfied and contented in turn they are able to perform in a better way to the organisation. Work life balance and employees productivity are correlated because work life balance policies decreases employees’ turnover and absenteeism.

The organisational factors included three statements such as due to family related issue I have to exceed the amount of leave, I eligible to take in a year that increase absenteeism, due to long working hour’s productivity and work quality had reduced and I intend to ask people about new job opportunities. The responses of respondents to all the variables ranges from 1 (strongly disagree) to 5 (strongly agree). The minimum score for this factor can be three and maximum score can be fifteen.

Descriptive statistical analysis for the impact of poor work life balance on organisation on the basis of designation has been presented in table-3(a). The mean score for impact of poor work life balance on organisation has been worked out maximum (8.1027) for nursing staff.

Table 3 (a): Descriptive Statistical Analysis of Impact of poor work life balance on organisation: Designation-wise distribution

Designation	N	Mean	Std. Deviation	Std. Error	Skewness	95% Confidence Interval for Mean	
						Lower Bound	Upper Bound
Nursing staff	224	8.1027	2.68248	.17923	-.925	7.7495	8.4559
Technician staff	104	6.5625	2.48069	.24325	-.873	7.0560	8.0209
Supervisory staff	32	7.5385	2.91755	.51575	-.818	5.5106	7.6144
Total	360	7.8028	2.68027	.14126		7.5250	8.0806

Source: Data collected through questionnaire and schedule

The calculated value of standard deviation depicts variation in the responses of all respondents irrespective of any designation. The computed values of skewness shows that

the distribution is negatively skewed and most of the frequencies lie toward higher side of mean.

Table 3 (b): ANOVA Results for Impact of poor work life balance on organisation: Designation wise distribution

	Source	S.S	Df	M.S	F ratio	Sig
Designation	Between groups	76.638	2	38.319	5.467	.005
	Within groups	2502.360	357	7.009		
	Total	2578.997	359			

Source: Data collected through questionnaire.

ANOVA results for the impact of poor work life balance depicts that the mean difference is significant at 5 percent level of significance so the null hypothesis has been rejected. Hence it can be said that there is a significant

difference in the opinion of respondents regarding impact of poor work life balance on the organisation on the basis of designation.

Table 3 (c): Post hoc results for Impact of poor work life balance on organisation on the basis of designation

Designation		Mean Difference	Std. Error	Significance
Nursing staff	Technician staff	.56422	.31415	.172
	Supervisory staff	1.54018*	.50034	.006
Technician staff	Nursing staff	-.56422	.31415	.172
	Supervisory staff	.97596	.53520	.163
Supervisory staff	Nursing staff	-1.54018*	.50034	.006
	Technician staff	-.97596	.53520	.163

The post hoc results reveal that the difference is highly significant in the case of nursing and supervisory staff. Therefore, it can be said that the poor work life balance of nursing staff affected the organization most as compared to other staff taken understudy and due to poor work life balance employees performance gets affected which in turn has a cyclical effect like, increased supervision, low morale and work quality, negative feeling toward organization and they also think about leaving the job. This is consistent with

the findings from Fapohunda (2016)^[9] and Khatri & Behl (2013)^[10] results.

Descriptive statistical analysis for the impact of poor work life balance on organisation on the basis of working hours per week has been presented in table-4 (a). Table exhibits that the mean score is maximum i.e. 8.7241 in the case of employees who are working for more than 54 hours per week.

Table-4 (a): Descriptive Statistical Analysis of Impact of poor work life balance on organisation

Working hour per week	N	Mean	Std. Deviation	Std. Error	Skewness	95% Confidence Interval for Mean	
						Lower Bound	Upper Bound
36-42 hours	69	7.7391	2.86280	.34464	-1.083	7.0514	8.4269
42-48 hours	148	7.1757	2.30865	.18976	-.771	6.8007	7.5507
48-54 hours	56	8.1071	2.42471	.32402	-.802	7.4578	8.75507
More than 54 hours	87	8.7241	3.00654	.32234	-1.090	8.0834	9.3649
Total	360	7.8028	2.68027	.14126		7.5250	8.0806

Source: Data collected through questionnaire and schedule.

Hence, it can be said that longer working hours causes more imbalance in work life which ultimately adversely affects the organisation. The calculated values of standard deviation for different groups of working hours per week show high variation in the responses of the respondents. The computed

values of skewness interpret that the distribution is negatively skewed and most of the frequencies lie towards the higher side of mean score.

Table 4 (b): ANOVA Results for Impact of poor work life balance on organisation: Working hours per week wise distribution

	Source	S.S	Df	M.S	F ratio	Sig
Working hours per week	Between groups	137.524	3	45.841	6.684	.000
	Within groups	2441.473	356	6.858		
	Total	2578.997	359			

ANOVA results depicts that the null hypothesis is rejected because the significance value of F. test is less than 0.05. Hence it can be said that there is a significant difference in

the responses of the respondents for the impact of poor work life balance on the organization on the basis of working hours per week.

Table 4 (c): Post hoc results for Impact of poor work life balance on organisation: Working hours per week Wise distribution

Working hours per week		Mean Difference	Std. Error	Significance
36-42 hours	42-48 hours	.56345	.38175	.453
	48-54 hours	-.36801	.47102	.863
	More than 54 hours	-.98501	.42216	.093
42-48 hours	36-42 hours	-.56345	.38175	.453
	48-54 hours	-.93147	.41086	.108
	More than 54 hours	-1.54846*	.35379	.000
48-54 hours	36-42 hours	.36801	.47102	.863
	42-48 hours	.93147	.41086	.108
	More than 54 hours	-.61700	.44866	.516
More than 54 hours	36-42 hours	.98501	.42216	.093
	42-48 hours	1.54946*	.35379	.000
	48-54 hours	.61700	.44866	.516

The post hoc results for the impact of poor work life balance on the organisation confirms that the difference is highly significant in the case of employees who are working for 42-48 hours and more than 54 hours per week. Therefore, it can be concluded that employees who are continually working for long hours, their poor work life balance affects the organisation more as compared to those who are working for fewer hours or standard hours.

Impact of poor work life balance on person and society

Not having a proper balance between work and personal life makes people feel stressed both at workplace and outside the workplace. Employees who have imbalanced work life

may experience more family conflicts, lack of personal development and more problems in personal relationship. In this segment two statements are included such as I am not enabling to manage self and interpersonal relations and not able to provide quality care to my patients. The responses of respondents to all the variables ranges from 1 (strongly disagree) to 5 (strongly agree). The minimum score for this factor can be two and maximum score can be ten. Descriptive statistics for impact of poor work life balance on person and society on the basis of designation has been presented in table- 5 (a). The table depicts that mean score is maximum i.e., 5.52545 for nursing staff.

Table 5(a): Descriptive Statistical Analysis of Impact of poor work life balance on person and society: Designation-wise distribution

Designation	N	Mean	Std. Deviation	Std. Error	Skewness	95% Confidence Interval for Mean	
						Lower Bound	Upper Bound
Nursing staff	224	5.52545	1.71317	.11447	-.291	5.0289	5.4800
Technician staff	104	5.0096	1.59791	.15669	-.084	4.6989	5.3204
Supervisory staff	32	4.1563	1.74336	.30819	-.277	3.5277	4.7848
Total	360	5.0861	1.70721	.08998		4.9092	5.2631

Source: Data collected through questionnaire and schedule.

On the basis of descriptive statistical analysis, it can be said that as far as impact of poor work life balance on person and society is concerned, nursing staff reveals more effect of poor work life balance on the person and society. The

calculated values of standard deviation reveals high variation in the responses and the computed values of skeweness show inclination of majority responses towards the higher side of mean score.

Table 5 (b): ANOVA Results for Impact of poor work life balance on person and society: Designation wise distribution

	Source	S.S	Df	M.S	F ratio	Sig
Designation	Between groups	34.626	2	17.313	6.109	.002
	Within groups	1011.705	357	2.834		
	Total	1046.331	359			

Source: data collected through questionnaire and schedule.

ANOVA results reveal that the significance value of F test is less than 0.01. Therefore, the null hypothesis has been rejected. Hence, it can be said that there is a significant

difference in the responses of the respondents of different status regarding impact of poor work life balance on person and society.

Table 5 (c): Post hoc results for Impact of poor work life balance on person and society

Designation		Mean Difference	Std. Error	Significance
Nursing staff	Technician staff	.24485	.19975	.439
	Supervisory staff	1.09821*	.31814	.003
Technician staff	Nursing staff	-.24485	.19975	.439
	Supervisory staff	.85337*	.34031	.034
Supervisory staff	Nursing staff	-1.09821*	.31814	.002
	Technician staff	-.85337*	.34031	.034

The post hoc result submits proof that the mean difference is highly significant in the case of nursing staff with supervisory staff and technician staff with supervisory staff. Therefore, it can be said that the impact of poor work life balance on person and society is revealed high by nursing staff and technical staff. It is also revealed from the responses of the respondents that because of continuous

long working hours and heavy work load, productivity and work quality have been also decreasing. Descriptive statistical analysis for impact of poor work life balance on individual and society on the basis of working hour per week has been presented in table- 6 (a). The table shows that the mean score is maximum (5.6429) in the case of employees who are working for 48-54 hour per week.

Table 6 (a): Descriptive Statistical Analysis of Impact of poor work life balance on person and society

Working hour per week	N	Mean	Std. Deviation	Std. Error	Skewness	95% Confidence Interval for Mean	
						Lower Bound	Upper Bound
36-42 hours	69	5.0725	1.67436	.20157	-.583	4.6702	5.4747
42-48 hours	148	4.7905	1.65473	.13602	-.130	4.5217	5.0593
48-54 hours	56	5.6429	1.40685	.18800	-.146	5.2661	6.0196
More than 54 hours	87	5.2414	1.90450	.20418	-.176	4.8355	5.6473
Total	360	5.0861	1.70721	.08998		4.9092	5.2631

Source: Data collected through questionnaire and schedule

The values of standard deviation depict variation in the responses and the computed values of skewness reveal that

the distributions are negatively skewed and most of the frequencies lie toward higher side of respective means.

Table 6 (b): ANOVA Results for Impact of poor work life balance on person and society: Working hours per week wise distribution

	Source	S.S	Df	M.S	F ratio	Sig
Working hours per week	Between groups	32.398	3	10.799	3.792	.011
	Within groups	1013.933	356	2.848		
	Total	1046.331	359			

Source: Data collected through questionnaire.

ANOVA results confirm that the null hypothesis has been rejected. Therefore, it can be concluded that there is significant difference in the responses of the respondents

regarding impact of poor work life balance on individual and society on the basis of working hour per week.

Table 6 (c): Post hoc results for Impact of poor work life balance on person and society: Working hours per week Wise distribution

Working hours per week		Mean Difference	Std. Error	Significance
36-42 hours	42-48 hours	.28192	.24601	.661
	48-54 hours	-.57039	.30354	.239
	More than 54 hours	-.16892	.27206	.925
42-48 hours	36-42 hours	-.28192	.24601	.661
	48-54 hours	-.85232*	.26477	.008
	More than 54 hours	-.45084	.22799	.198
48-54 hours	36-42 hours	.57039	.30354	.239
	42-48 hours	.85232*	.26477	.008
	More than 54 hours	.40148	.28913	.507
More than 54 hours	36-42 hours	.16892	.27206	.925
	42-48 hours	.45084	.22799	.198
	48-54 hours	-.40148	.28913	.507

The post hoc result indicates that the mean difference is significant. The difference is highly significant between 48-54 and 42-48 working hours per week. So it can be concluded that employees who are working for more hours per week, their poor work and life balance cause more problems for individual and society as compared to those

who are working for less hours.

Conclusions

The challenge of work-life balance persists because employees face significant stress while balancing their job and personal lives, which affects their performance not only

at work but also at home. The results of this study support the idea that work-life balance has a significant impact on organisation, employees' health & psychology and society. As per the results of the present study, it has been revealed that nursing staff has to work for longer shifts with few breaks or without breaks and also have to work for different types of health-affected patients that create heavy pressure and heighten their stress level which leads to health and psychology-related problems like depression, anxiety, headache, etc. Further the research findings reveals that the poor work life balance of nursing staff has been affecting the organization most by which their performance gets affected which leads to low morale, absenteeism, negative feeling toward organization and they also think about leaving the job. The results of the study confirms that employees who are continually working for long hours, affect the organisation most and cause more problems for individual and society as compared to those who are working for less or standard hours.

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