

ORIGINAL ARTICLE

Exploring the Impact of Work-Life Balance on Job Satisfaction and Organizational Commitment: A Case Study of Nurses at Imam Khomeini Hospital in Urmia

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ABSTRACT

Background: Retaining qualified staff presents a significant challenge for organizations, especially in the healthcare sector. Establishing a work-life balance (WLB) has emerged as an effective strategy for retaining existing employees and attracting new talent within healthcare organizations.

Methods: This study explores the relationship between work-life balance, job satisfaction, and organizational commitment among nurses at Imam Khomeini Hospital in Urmia. A sample size of 127 individuals was determined using Cochran's formula. Data collection utilized three questionnaires: Wong and Ko scale for assessing work-life balance, Smith and Kendall scale for evaluating job satisfaction, and Allen and Meyer scale for measuring organizational commitment. Statistical analysis was performed using Spearman and Pearson correlation coefficients, with the data analyzed through SPSS version 22.

Results: The findings revealed a significant positive relationship between work-life balance and both job satisfaction and organizational commitment. This correlation was evident across various dimensions, including increased leisure time, workplace support for balance, job loyalty, maintenance of work and career, flexibility in work schedules, voluntary reduction of working hours, and life orientation among the nurses.

Conclusion: The study underscores the importance of work-life balance in enhancing job satisfaction and organizational commitment among nurses. By fostering conditions that allow employees to effectively balance their professional and personal responsibilities, organizations can reduce work-related stress and bolster employee motivation and loyalty. This is crucial for healthcare organizations facing challenges in attracting and retaining qualified personnel. Investments in policies and programs that promote work-life balance can enhance performance and reduce turnover rates.

KEYWORDS: Work-Life balance, Job satisfaction, Organizational commitment, Work-Life conflict, Nursing.

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INTRODUCTION

The modern workforce faces continuous exposure to various occupational hazards, including physical, chemical, biological, and ergonomic risks that affect employees' physical health. However, the nature of work has evolved over time, becoming deeply intertwined with personal life. This shift has influenced workers' physical well-being and their mental health, as professional responsibilities increasingly shape their psychological state [1]. Factors such as extended working hours, remote work, and household responsibilities have further blurred the distinction between professional and personal lives.

This inevitable overlap between work and life has made it challenging for many individuals to balance their career obligations and personal lives, often resulting in work-life conflict. Work-life conflict arises when an individual struggles to meet both personal and professional demands, leading to a clash between the two. This can manifest as physical or mental stress and the inability to manage one or both roles effectively [2].

Such imbalances typically present in two forms: either individuals devote excessive time to their work, neglecting their personal life, or they prioritize personal matters at the expense of their job performance. The former scenario is prevalent in today's increasingly materialistic society, where families seek higher incomes, often resulting in individuals working multiple jobs. Conversely, when personal life takes precedence, it can lead to professional shortcomings, such as frequent absenteeism, poor collaboration with colleagues, and diminished job commitment [3].

Employers implement various work-life balance strategies to reduce stress and tension between work and family responsibilities. These initiatives include extended vacations, job sharing, and flexible work arrangements [4]. In essence, work-life balance refers to achieving satisfaction in both professional and personal roles. Numerous studies across different professions have highlighted both the positive and negative outcomes of maintaining or lacking this balance. The most commonly reported positive effects of work-life balance include increased job satisfaction, organizational commitment, and sustained organizational performance. Conversely, the negative consequences of poor work-life balance include heightened employee stress, decreased commitment to the organization, and job dissatisfaction [5-7].

Healthcare workers, due to the demanding nature of their jobs-such as lack of organizational support, heavy work shifts, rigid schedules, and long working hours-are more prone to experiencing work-life conflict [8]. Nursing, as a crucial component of the healthcare system, plays a vital role in the medical care framework of every country. Reports indicate that healthcare systems worldwide, including in Iran, are facing a shortage of nurses [9]. This shortage has led to an increased workload, leaving nurses with less time to attend to their family responsibilities. The imbalance between work and personal life is one of the primary reasons for job dissatisfaction among nurses. Those experiencing work-life conflict often attribute this misalignment to poor working conditions, which diminishes their job satisfaction. Ultimately, this may affect the quality of their work, and given the critical nature of their role, it could jeopardize patient safety [6, 10]. Furthermore, many nurses, overwhelmed by the excessive workload, seek to change careers. Thus, one of the major challenges for healthcare organizations is retaining their nursing workforce.

Given this context, the present study aims to investigate the relationship between work-life balance, job satisfaction, and organizational commitment among nurses at Imam Khomeini Hospital in Urmia.

MATERIALS AND METHODS

The present descriptive-analytical study was conducted among nurses at Imam Khomeini Hospital in Urmia. From a population of 200 nurses, 120 were randomly selected to participate. Questionnaires, the most common tool for data collection in survey research, were used to investigate the study's research questions. All three questionnaires utilized a Likert scale for scoring ("completely agree", "agree", "have no opinion", "disagree," and "completely disagree").

Work-life balance

Work-life balance was assessed using the Wong & Ko (2009) questionnaire, which has been translated, localized, and validated in Iran [11]. This questionnaire consists of seven sections and 26 items:

- Having enough free time: items 1 to 4
- Loyalty to work: items 5 to 6
- Workplace support for work-life balance: items 7 to 10
- Flexibility in work schedule: items 11 to 12
- Life orientation: items 13 to 17
- Maintenance of work and profession: items 18 to 21
- Voluntary reduction of working hours to meet personal needs: items 22 to 26

Gender Man 79 (65.8%) Woman 41 (34.2%) Marital status 91 (81.67%) Married 22 (18.33%) Single Age 35.05±1.09 Mean ± standard deviation **Education level (%)** 12 (10%) Associate degree 46 (38.3%) Bachelor Master's degree 57 (47.5%) Ph. D 5 (4.2%)

Table 1. Demographic characteristics of the participants

Table 2. The average scores obtained in organizational commitment, job satisfaction and work-life balance questionnaires

Factor	Mean	Standard deviation	Score range	Items number
Organizational commitment	94.22	7.1	78-109	24
Job satisfaction	74.74	6.67	59-93	22
Work-life balance	103.86	7.54	84-120	26

In this questionnaire, a score of 5 is given to each positive item for the "completely agree" option, while the "agree," "have no opinion," "disagree," and "completely disagree" options are scored 4, 3, 2, and 1, respectively. The reverse items of this questionnaire are 6, 20, and 21 (i.e., "completely agree" is given a score of 1 and "completely disagree" is given a score of 5).

Job satisfaction

Job satisfaction was measured using the Smith et al. (1969) questionnaire, which has five sections and 22 items [12], and the Persian version has demonstrated acceptable validity and reliability [13]. The sections and items of this questionnaire are as follows:

- Salary (items 1-6)
- Colleagues (items 7-10)
- The nature of work (items 11-13)
- Superintendent (items 14-18)
- Promotion opportunities (items 19-22)

For scoring, a score of 5 is given to each positive item for the "completely agree" option, while the "agree," "have no opinion," "disagree," and "completely disagree" options are scored 4, 3, 2, and 1, respectively.

Organizational commitment

Organizational commitment was assessed with the Allen & Meyer (1990) questionnaire, which includes three sections and 24 items. The Persian version has demonstrated appropriate validity and reliability [14]. The sections and items of this questionnaire are as follows:

- Emotional commitment: items 1, 4, 7, 10, 13, 16, 19, 22
- Continuous commitment: items 2, 5, 8, 11, 14, 17, 20, 23

• Normative commitment: items 3, 6, 9, 12, 15, 18, 21, 24

Regarding the rating, a score of 5 is given to each positive item for the "completely agree" option, while the "agree," "have no opinion," "disagree," and "completely disagree" options are scored 4, 3, 2, and 1, respectively. In this questionnaire, items 2, 3, 6, 10, 11, 17, and 20 are scored in reverse.

Analysis of questionnaires

The questionnaires were distributed to the nurses, who were asked to complete them on a self-report basis. Once collected, the data were entered into SPSS 22. To assess data normality, the Shapiro-Wilk test was employed. After confirming normality, Pearson's correlation was used to examine the research questions.

RESULTS

Questionnaire Results

total of 120 participants took part in the study, of which 79 (65.8%) were male and 41 (34.2%) were female. The average age of the participants was 35.05 years, with a standard deviation of 9.1. The youngest and oldest participants were 18 and 70 years old, respectively. Among the participants, 22 (18.3%) were single, while 98 (81.7%) were married. Regarding educational qualifications, 10% of participants held an associate's degree, 38.3% held a bachelor's degree, 47.5% had a master's degree, and 4.2% held a doctoral degree (Table 1).

Table 2 presents the average scores obtained from the

Table 3. Mean and standard deviation of the obtained scores for the subscales of the work-life balance questionnaire

Subscales	Average	standard deviation	Score range	Items number
Having sufficient time off from work	15.27	1.87	12-119	4
Loyalty to work	8.07	1.02	6-10	2
Workplace support for work-life balance	16.2	1.97	11-20	4
Flexibility in work schedule	8.32	1.12	6-10	2
Life orientation	19.26	1.63	16-23	5
Maintaining career and profession	16.45	1.63	13-20	4
Voluntarily reducing work hours to meet personal needs	20.27	1.83	14-25	5

Table 4. Checking the data normality for the total scores of the all questionnaires

Questionnaire	Test Statistic	Degrees of Freedom	Significance Level (P-value)
Commitment	.986	120	.242
Satisfaction	.983	120	.126
Balance	.980	120	.076

Table 5. Checking the normality of the data for the seven dimensions of the work-life balance questionnaire

	Test Statistic	Degrees of Freedom	Significance Level (P-value)
Having sufficient time off from work	.948	120	.000
Loyalty to work	.849	120	.000
Workplace support for work-life balance	.956	120	.001
Flexibility in work schedule	.902	120	.000
Life orientation	.957	120	.001
Maintaining career and profession	.948	120	.000
Voluntarily reducing work hours to meet personal needs	.962	120	.002

organizational commitment, job satisfaction, and work-life balance questionnaires. The highest score achieved on the organizational commitment questionnaire was 109, while the lowest was 78. For the job satisfaction questionnaire, the maximum and minimum scores were 93 and 59, respectively. Similarly, the highest and lowest scores for the work-life balance questionnaire were 120 and 84, respectively.

The work-life balance questionnaire consists of seven subscales. Table 3 presents the mean, standard deviation, and the highest and lowest scores obtained for each of these subscales.

Results of Normality Test and Statistical Analysis
To assess the normality of the data, the Shapiro-Wilk
test was employed. The test results are presented in
Table 4. As shown, the P-value for the total scores
of the organizational commitment, job satisfaction,
and work-life balance questionnaires is greater than
0.05, indicating that the total scores for all three
questionnaires followed a normal distribution.

Table 5 presents the results of the Shapiro-Wilk test for the seven dimensions of the Work-Life Balance

Questionnaire. As shown, none of the P-values exceeded 0.05, indicating that the assumption of normality was rejected for all seven dimensions.

Given the normal distribution of the overall questionnaire scores, Pearson's correlation coefficient was used to examine the relationship between work-life balance and job satisfaction, as well as between work-life balance and organizational commitment. To analyze the correlation between individual dimensions and both job satisfaction and organizational commitment, Spearman's correlation coefficient was employed.

Correlation Results Between Scales

The results of Pearson's correlation test showed a positive linear relationship between work-life balance and job satisfaction (r=0.703, p-value = 0.001). Therefore, as work-life balance improves, job satisfaction increases as well. Similarly, there was a positive correlation between work-life balance and organizational commitment (r=0.701, p-value = 0.001), indicating that work-life balance positively impacts organizational commitment.

Spearman's correlation test revealed a positive linear

relationship between increased leisure time and job satisfaction, indicating that more leisure time leads to higher job satisfaction (r = 0.679, p-value = 0.001). The results also showed a positive correlation between workplace support for balance and job satisfaction, indicating that more workplace support leads to higher job satisfaction (r = 0.706, p-value = 0.001). Additionally, there was a positive relationship between job loyalty and job satisfaction (r = 0.376, p-value = 0.001).

The Spearman correlation results further indicated a positive link between job retention and job satisfaction (r=0.707, p-value = 0.001), suggesting that job retention significantly impacts job satisfaction. The test also revealed a significant positive relationship between flexibility in work schedules and job satisfaction (r=0.616, p-value = 0.001). Furthermore, there was a significant positive correlation between voluntary reduction in work hours and job satisfaction (r=0.611, p-value = 0.001). Lastly, the results from the Spearman correlation showed a strong positive relationship between life orientation and job satisfaction (r=0.733, p-value = 0.001).

Based on the results of the Spearman correlation test, an increase in leisure time led to greater organizational commitment, as a significant positive correlation was observed between these two variables (r=0.446, p-value = 0.001). Furthermore, the test results indicated a significant positive relationship between workplace support for balance and organizational commitment (r=0.552, p-value = 0.001). The findings also revealed a positive linear relationship between job loyalty and organizational commitment (r=0.239, p-value = 0.001).

The Spearman correlation results showed a significant positive association between job retention and organizational commitment (r = 0.559, p-value = 0.001). Additionally, the test highlighted a meaningful positive correlation between flexibility and organizational commitment (r = 0.530, p-value = 0.001). The results further demonstrated that voluntary reduction in work hours was positively and significantly related to organizational commitment, indicating that as voluntary reduction in work hours increases, organizational commitment also rises (r = 0.417, p-value = 0.001). Lastly, the Spearman test results indicated a significant positive linear relationship between life orientation and organizational commitment (r = 0.398, p-value = 0.001).

DISCUSSION

The meaningful presence of nurses in the profession, particularly during critical moments when their help saves lives, has led clinical nurses to view their work as valuable. Many express satisfaction with their roles and strive to demonstrate a high level of professional commitment. Rahim-Aghaei et al. (2010) also found in their study that numerous nurses believe no other profession provides the same opportunities to help others as nursing does. This perspective is largely rooted in the nature of Iranian society, which is deeply connected to spirituality and religion. Some nurses in the study even viewed their presence in the nursing profession as divine fate, allowing them to grow closer to spiritual values. Therefore, they considered their commitment to nursing as extending beyond material needs [15].

Our research at Imam Khomeini Hospital in Urmia revealed a direct relationship between work-life balance (WLB), job satisfaction, and organizational commitment among nurses. This finding aligns with extensive literature in organizational psychology and human resource management, which underscores the significant role of WLB in enhancing employee well-being, improving job satisfaction, and fostering organizational loyalty. Work-life balance, defined as the equilibrium between professional responsibilities and personal life, is a critical factor influencing job satisfaction. Numerous studies highlight that when employees experience a balanced work and personal life, they report higher levels of job satisfaction. For instance, a study by Greenhaus and Allen found that employees who could manage both work demands and personal life commitments effectively reported greater satisfaction with their jobs [16].

This is particularly pertinent in healthcare, where long hours, emotional strain, and high patient loads can negatively impact staff morale [17]. In the context of healthcare workers, the findings from Imam Khomeini Hospital show that a better WLB allows nurses to recharge mentally and physically, reducing burnout and emotional exhaustion. According to research by Bakker and Demerouti, balanced work and personal life improve employees' ability to perform their roles effectively and with enthusiasm, which directly contributes to job satisfaction [18]. Our study mirrors these outcomes, with healthcare workers who reported greater WLB also exhibiting higher job satisfaction. Furthermore, healthcare professionals are particularly vulnerable to work-life conflict, given the unpredictable

nature of healthcare demands and the emotional toll of caring for patients. Studies such as those by Taris et al. suggest that healthcare workers who perceive a lack of balance often experience job dissatisfaction, leading to issues like absenteeism and turnover [19].

The direct correlation observed in our research between WLB and job satisfaction emphasizes the importance of flexible work schedules, sufficient staffing, and supportive management in fostering a positive work environment.

Organizational commitment refers to an employee's psychological attachment to their organization and their willingness to remain with the company. Meyer and Allen's (1991) three-component model of organizational commitment—comprising affective, and normative commitment—has continuance, been widely used to assess employees' loyalty and attachment to their employers [20]. Our research demonstrates that employees who experience better work-life balance show a stronger commitment to the hospital, a finding consistent with previous studies in the field. For example, research by Haar et al. revealed that when employees perceive their organization as supportive of work-life balance, they are more likely to feel committed and loyal to the company [6]. This is because WLB policies are seen as a signal that the organization values employees' well-being, which fosters a positive psychological contract between the employee and employer [21]. Employees who feel their personal and professional lives are balanced are more likely to develop affective commitment, where they emotionally identify with the organization and are motivated to contribute to its success [22]. Our findings suggest that healthcare workers at Imam Khomeini Hospital who reported better WLB also displayed higher levels of affective commitment. This is particularly relevant in the healthcare sector, where employees' emotional investment in their work can be as significant as their professional skills.

A study by Lambert et al. supports this, noting that work-life conflict negatively impacts organizational commitment, especially in professions that require high emotional labor, such as nursing. When healthcare professionals feel supported in balancing work and home life, they are more likely to develop a stronger commitment to their organization, leading to better retention rates [23].

Job satisfaction also plays a mediating role in

the relationship between work-life balance and organizational commitment. Numerous studies have shown that satisfied employees are more likely to remain committed to their organizations and demonstrate lower turnover intentions [24]. In our study, healthcare professionals who experienced a better work-life balance were not only more satisfied with their jobs but also more committed to the hospital's mission and goals. This mediating relationship can be explained through the Job Demands-Resources (JD-R) Model proposed by Bakker and Demerouti. The JD-R model suggests that resources, such as work-life balance, act as buffers against job demands like long hours and emotional stress, leading to higher job satisfaction and, consequently, stronger organizational commitment. The availability of resources reduces the strain experienced by employees, allowing them to invest more in their jobs and fostering a greater sense of loyalty [18].

The direct relationship between work-life balance, job satisfaction, and organizational commitment has significant implications for healthcare organizations. To retain skilled professionals and ensure highquality patient care, hospitals must prioritize creating supportive environments that promote WLB. This could include implementing flexible work hours, offering mental health support, and encouraging a culture where employees feel comfortable addressing work-life challenges without fear of repercussion [25]. As with all studies, the present study also faced limitations. Difficulty in coordinating with management to allow researchers to enter the organization under investigation, reluctance to cooperate with the research in some nurses, and incomplete filling out of some questionnaires were the most important limitations of this study. However, despite these challenges, the continuous follow-up by the researchers resulted in the collection and analysis of 120 complete questionnaires.

CONCLUSION

The study conducted at Imam Khomeini Hospital in Urmia emphasizes the pivotal role of work-life balance (WLB) in improving both job satisfaction and organizational commitment among healthcare professionals. This aligns with a broader body of research indicating that when employees maintain a balance between their work and personal lives, they are more likely to report higher job satisfaction and a stronger commitment to their organization. Healthcare organizations need to prioritize WLB programs to enhance employee well-being, retain skilled staff, and ensure high-quality patient care.

Our findings suggest that healthcare administrators should regard WLB policies not merely as employee benefits but as strategic investments that contribute to both job satisfaction and organizational commitment. By fostering a workplace culture that values personal well-being, healthcare organizations can significantly enhance job satisfaction while building a more dedicated and loyal workforce.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

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