

WORK-LIFE BALANCE AMONG NURSES IN LUNGLEI TOWN

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CERTIFICATE

This is to certify that the research, 'Work-Life Balance Among Nurses in Lunglei Town' is submitted by Ms. Ramropuii, for the partial fulfilment of the Bachelor of Social Work is carried out under my guidance and incorporates the student's bonafide research and this has not been submitted for any award, degree or for any other institution of learning.



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List of Abbreviations

SNS	: Social Networking Sites
Pvt.	: Private
Govt.	: Government
BHSS	: Baptist Higher Secondary School
FGD	: Focus Group Discussion
RSES	: Rosenberg Self-Esteem Scale
BBS	: Bulletin Board System
INCOM	: Iowa-Netherlands Comparison Orientation Measure
IIUM	: International Islamic University Malaysia
IIS	: Instagram Intensity Scale Questionnaire
PACS-R	: Physical Appearance Comparison Scale-Revised
BSQ	: Body Shape Questionnaire
SEM	: Structural Equation Modeling
FoMO	: Fear of Missing Out
SPSS	: Statistic Package for Social Science
PLSSEM	: Partial Least Square Structural Equation Modeling
IPMA	: Importance-Performance Matrix Analysis
GMA	: Government Medical College
PUBG	: Player Unknown Battle Ground
COC	: Clash of Clans

CHAPTER – I

INTRODUCTION

The study aims to assess how work-life balance impacts nurses job satisfaction and retention, as imbalance often leads to dissatisfaction and burnout. It also aims to identify the key stressors related to workload, shift patterns and personal life, helping to mitigate negative impacts on mental health.

1.1 Concept, nature, and scope of healthcare

The structured delivery of services intended to preserve and improve the health of people and communities is at the heart of the healthcare concept. In order to guarantee general well-being, it includes a broad variety of actions, from treatment and rehabilitation to preventive measures. Healthcare takes a holistic approach, taking into account social, emotional, and physical variables that affect health, rather than only treating illness.

Healthcare is dynamic and diverse by nature, combining knowledge and skills from a variety of disciplines, including social work, public health, nursing, and medicine. Given that health problems frequently affect many facets of life, this cooperative effort is crucial to meeting patients' complex requirements. In addition, the healthcare industry is always changing due to new research, shifting public health demands, and technological breakthroughs.

Healthcare has a wide range of applications in many important fields. With its emphasis on actions that prevent illness and encourage healthy lifestyles through education, screenings, and immunizations, preventive care is essential. In order to address current health difficulties, curative care uses pharmaceutical treatments, surgeries, and medical interventions. While palliative care focuses on comfort and quality of life for patients with life-threatening diseases, rehabilitation services are essential for helping people recover and regain their functional abilities following illness or injury.

By administering health policies, addressing socioeconomic determinants of health, and reacting to public health emergencies, public health efforts also seek to improve community health outcomes. All things considered, healthcare is a comprehensive system devoted to fostering health, preventing illness, and offering treatment, reflecting its complexity and important social significance.

1.2 Healthcare system in India

India's healthcare system is a complicated, multidimensional network that involves both the public and private sectors and functions at several levels. It seeks to offer a large and varied population economical and easily accessible healthcare.

Underfunding, a lack of medical experts, and unequal access to services across urban and rural areas are just a few of the major issues that India's healthcare system has historically faced. The government provides the majority of the funding for the public healthcare system, which operates through a network of clinics and hospitals. Although the goal is to provide free or inexpensive care, the availability and quality of services might differ significantly, especially in rural areas where infrastructure is frequently insufficient.

The private health care sector, on the other hand, has expanded quickly and provides a variety of services, frequently with better facilities and shorter wait times. But because it costs more, people with lesser incomes cannot afford it as easily. Although the private sector contributes significantly to the provision of modern therapies and specialized care, many people are concerned about how affordable healthcare is.

Ayushman Bharat and the National Health Mission are two recent programs and policies that aim to increase the quality and accessibility of healthcare. For example, Ayushman Bharat seeks to improve low-income families' access to essential medical services by offering health insurance coverage. With contemporary medical procedures coexisting with traditional traditions like yoga and Ayurveda, the Indian healthcare system also represents the nation's vast diversity. For many people, the combination of contemporary and traditional medicine provides a more comprehensive approach to health.

The Indian healthcare system is changing in spite of persistent obstacles, such as a high disease load, particularly in the area of non-communicable diseases. With the ultimate objective of attaining universal health coverage for all individuals, efforts to improve public health outcomes, expand the pool of qualified professionals, and improve healthcare infrastructure continue to influence the landscape.

1.3 Role of nurses in healthcare system

Nurses play a vital role in the healthcare system, serving as essential providers of care and support across various settings. Their contributions go well beyond basic patient care, encompassing a wide range of responsibilities that are crucial for promoting health and well-being.

One of the primary roles of nurses is to deliver direct patient care. They assess health conditions, monitor vital signs, administer medications, and perform procedures. This hands-on care is especially critical in hospitals, clinics, and community health environments, where nurses often act as the first point of contact for patients. Their keen ability to recognize changes in a patient's condition enables timely interventions, which can significantly improve health outcomes.

In addition to their clinical responsibilities, nurses have an important educational role. They provide information to patients and families about health conditions, treatment plans, and preventive measures. This educational aspect empowers patients to actively participate in their healthcare, fostering adherence to treatment and promoting healthy lifestyle choices.

Nurses are also integral to care coordination, collaborating with other healthcare professionals—such as physicians, therapists, and social workers—to create and implement comprehensive care plans. Their effective communication ensures that all team members are aligned, delivering cohesive and continuous care.

Moreover, nurses contribute to public health initiatives by engaging in community health programs, conducting health screenings, and advocating for health education. They play a significant role in health promotion activities, addressing social determinants of health and working to improve access to care, particularly for underserved populations.

As the healthcare landscape evolves, so too does the role of nurses. With advancements in technology and practices, nurses are increasingly involved in research and evidence-based practice, driving improvements in care quality and patient safety. Many also take on leadership roles, influencing policy decisions and contributing to healthcare management.

Nurses are essential to the healthcare system, providing compassionate care, promoting health education, coordinating care, and advocating for patients. Their diverse skills and expertise make them indispensable in ensuring the well-being of individuals and communities.

1.4 Challenges faced by nurses in hospital setting

Hospital nurses face a number of difficulties that may affect their capacity to deliver the best possible care for their patients. One significant problem is a lack of employees, which can result in more work and stress. Insufficient nursing personnel may find it difficult to attend to every patient's demand, which could jeopardize the standard and safety of treatment.

The psychological and physical strain of the work is another major obstacle. Nurses frequently put in long hours, which can cause exhaustion and burnout. The emotional strain of caring for ill or dying patients, together with the demanding nature of their employment, can exacerbate mental health problems.

Barriers to communication can also be problematic, particularly when dealing with patients from different cultural backgrounds in diverse settings. Language barriers or disparities in health literacy can lead to misunderstandings, which makes it difficult for nurses to effectively communicate critical information and deliver care.

Furthermore, nurses usually deal with technology difficulties. They must constantly adjust to new technology due to the growing dependence on electronic health records and other digital tools, which might take time and necessitate continual training. It can be intimidating to navigate complicated healthcare policies and systems. In addition to advocating for their patients, nurses frequently face institutional barriers that can impair their capacity to provide the best care possible, such as financial restraints and bureaucratic procedures. There is increased worry about workplace violence and challenging patient relationships. Patients or their families may act aggressively toward nurses, which can harm their wellbeing and create a hostile work environment.

Nurses face several obstacles that can affect their efficacy and job satisfaction in hospital settings, despite the fact that they are crucial to patient care.

1.5 Work-life balance of working women

The ability to successfully integrate professional tasks alongside personal and family obligations is referred to as working women's work-life balance. For mental health, work satisfaction, and general well-being, striking this balance is essential.

Global Perspective

Globally, working women face numerous challenges in achieving a healthy work-life balance. Issues such as unequal pay, limited access to childcare, and workplace discrimination

persist. Many women juggle multiple roles—professional responsibilities, household duties, and caregiving—which can lead to stress and burnout. The lack of flexible work arrangements is another barrier, as many women struggle to find jobs that allow for both career advancement and personal commitments. Cultural expectations around gender roles often exacerbate these challenges, making it difficult for women to prioritize their own needs.

India

In India, the situation is similarly complex. Working women often face societal pressures to fulfil traditional roles as homemakers and caregivers, which can conflict with their professional aspirations. Despite progress in education and workforce participation, issues such as inadequate maternity leave, limited access to affordable childcare, and workplace harassment remain significant barriers. Women in India also frequently experience a lack of support from employers in terms of flexible working hours, which is crucial for balancing professional and personal responsibilities. Moreover, the expectations of family and community can add to the stress, making it challenging for women to assert their career goals.

Mizoram

In Mizoram, the challenges faced by working women have unique cultural and social dimensions. While Mizo women are often seen as more empowered and active in the workforce compared to their counterparts in other regions of India, they still encounter obstacles. Traditional gender roles can influence perceptions of women's work, with societal expectations often placing significant pressure on them to manage both professional duties and household responsibilities. Additionally, the limited availability of childcare facilities and support services can hinder their ability to balance work and family life effectively. Despite these challenges, the state's emphasis on education and community support can provide a somewhat more favourable environment for women pursuing careers.

1.6 Overview of literature

Although it has lately gained importance, human resources for health have always been a significant determinant for the system. The lack of qualified human resources for health at all levels of the healthcare delivery system is now the largest obstacle. (Sinha, et.al,2016)

India is severely lacking in health-related human resources. The workforce is concentrated in metropolitan regions, and there is a shortage of competent health personnel. It is extremely difficult to transport trained healthcare professionals to isolated, rural, and underprivileged locations. (Rao, et.al,2011)

Job stress is a serious threat to the quality of working life (QWL) of health-care employees and can cause hostility, aggression, absenteeism and turnover, as well as reduced productivity. In addition, job stress among employees affects the quality of health-care services. (Mosadeghrad, et.al,2011).

Worldwide, the coronavirus disease 2019 (COVID-19) pandemic has made things more difficult for medical workers. During their service, healthcare workers faced increased workload, psychological discomfort, a lack of high-quality personal protective equipment (PPE), social exclusion and stigmatization, a lack of incentives, a lack of coordination, and

inadequate management. Situational and organizational issues made it challenging for these healthcare providers to deal with these difficulties. (Razu, et.al,2021).

The lack of human resources in the healthcare industry is a persistent issue. Although it is likely that the majority of health care workers plan to stay in their current positions, its drawbacks may influence their future decisions to pursue new career paths, particularly if there is a growing scarcity of medical experts. (Pruszynski, et.al,2022)

1.7 Statement of the problem

Nurses are essential to the healthcare system, but they frequently encounter considerable difficulties in maintaining a healthy work-life equilibrium. Extended working hours, significant stress levels, and emotional burdens contribute to both physical and mental fatigue, which can affect their overall health and job satisfaction.

This imbalance not only impacts nurses' personal lives but also their effectiveness at work, potentially resulting in burnout, elevated turnover rates, and diminished quality of patient care.

This study aims to investigate the factors that affect work-life balance among nurses, examining both the systemic and individual obstacles they encounter.

1.8 Objectives of the study

The following are the objectives of the study: -

- 1) To identify the causes and contributing factors
- 2) To examine the impact of the challenges
- 3) To understand the coping strategies of the challenges

1.9 Chapter scheme

The present study will be organised in the following chapters:

- 1) Introduction
- 2) Review of literature
- 3) Methodology
- 4) Results and discussion
- 5) Conclusions and suggestions

CHAPTER - II

REVIEW OF LITERATURE

This chapter focus on the review of literature which is a foundation to understand the subject matter and phenomena.

Gupta, DS & Sultana, M (2022) conducted a study on the Work – life Balance of Women Professionals: Impact and Implications, which aims looks into the factors that affect work-life balance of women professionals and how that in turn affects the productivity and economic growth of the country. Data were collected through primary survey. The study identified important determinants of work-life balance; another survey was conducted among HR of different companies to understand about the gender inclusive policies of their organisations. The study has important implications for the future research and policy measures.

The study conducted by Rawat, PS & Athaide, N (2022) on the topic of Women, Patriarchy & Work-life Balance examines how urban working women's attempts to maintain a work-life balance are impacted by patriarchal beliefs. It aims to determine whether metropolitan working women's efforts to strike a work-life balance resulted in wellbeing. The study is qualitative and is conducted in triads with the respondent (woman), her spouse or a close relative, and a co-worker. DICTION and NVIVO were employed for analysis. According to the study, Indian women adhered to patriarchal ideals. Women expressed a preference for a joint family over a nuclear family in order to manage their careers. Women managed to reconcile work and life, but the effort caused stress. They were respected as earning family members because of their work. They developed various coping mechanisms as a result of their will to keep working.

Naidu, NG, Chakravarthy, PK & Touhind, P, (2022) conducted a study on Work life Balance and Job Satisfaction among the Working Women in Banking Sector: An Empirical Study with Reference to Bangalore City, aims to investigate the work-life balance and job stress experienced by female employees of Bangalore City's public sector banks. With a sample size of 212, the study was conducted using primary data from Punjab National Bank, Indian Overseas Bank, and State Bank of India. SPSS 28 is used to analyse the data using a variety of statistical tools and techniques. The current study shows that among working women at particular banks, there is a correlation between work-life balance and workplace stress. It has been determined that working hours and transfer policies are the two things that most satisfy employees in the banking industry. It is determined that certain public sector banks in Bangalore City have an effect on the work-life balance and job satisfaction of working women workers. To improve employee performance in public sector banks, management should also concentrate on all aspects of job satisfaction rather than just one.

In addition to suggesting strategies for achieving a healthy work-life balance, the study of Mone, FH, Ashraf, DM, & Sarker, AR, (2019) on the Work life Balance of Female Doctors in Bangladesh, attempts to investigate the elements that contribute to this imbalance. After receiving ethical approval from the Bangladesh Medical Research Council (BMRC), a survey

of female physicians from six distinct divisions working at several world-class institutions in Bangladesh was conducted. By increasing awareness of the current state of work-life balance among female doctors in Bangladesh, the study seeks to make a contribution. The main conclusions are that most respondents felt that work stress is extremely high in the private sector and that they were unhappy with their working conditions because of low pay, long hours, and hospital policies for employees. The respondents have been dealing with issues related to work stress, including hospital work schedules and timings, job sharing arrangements, management pressure, leave and holiday issues (parental, sick, etc.), a lack of free time, less time spent with families, financial difficulties, a lack of motivation, and a lack of enjoyment.

Manoharan, G, Astikar, SP & Smitha, V, et.al, (2023) conducted a study on the Work life Balance Perceptions of Women in the IT and ItES Sectors in Kerala in order to investigate how women employees view work-life balance and how it impacts job satisfaction, a sample of 140 female employees from the IT and ITES industries was used. A quantitative method was applied in the study. To gather information, a standardized questionnaire was distributed to 200 respondents, who filled it out. The appropriate statistical software was then used to analyse this data. Inferential, experimental, and simulation data are the three categories into which the quantitative technique finds the data. The traits or connections of the targeted population could be deduced using a database that has been inferentially built. The experimental form has a feature that provides a great deal of flexibility in the study setting since some of the variables are altered to examine how they affect the other variables. The creation of a synthetic environment that may yield valuable data and information is one of the most crucial components of the simulation process. The study's findings demonstrate that a good work-life balance will boost employee job satisfaction, which will boost organizational performance and provide IT companies with a competitive edge.

Mahendran, AV, Panatik, SA, Rajab, A, et.al, (2019) study the Influence of Work life Balance on Burnout among Nurses to determine how work-life balance affects nurse burnout. This study employed a quantitative research approach, gathering data through survey questionnaires. 150 nurses from KPJ Johor Specialist Hospital made up the population. Ninety percent of the 135 nurses who took part in the study responded. Convenience sampling was used to select the responders. The data from this study was analysed using structural equation modelling (SEM) and descriptive statistics. SPSS and Smart PLS version 3 software were used for descriptive analysis and SEM analysis, respectively. The study's conclusions showed a strong correlation between work-family conflict and emotional weariness, depersonalization, and lower personal achievement, as well as between work-family enrichment and lower personal performance. The results of this study add to the empirical research on burnout and work-life balance, particularly among Malaysian nurses.

Tan, SHE, & Chin, GF, (2023) conducted research on Generational Effect on Nurses' Work Values, Engagement and Satisfaction in an Acute Hospital. The results of this study demonstrate that nurses from different generations have diverse views and ideals about their jobs. It is less common for members of Generation X to question supervisors and the status quo.

The most tech-savvy generations are Y and Z, who can pick up new technologies fast. As the population becomes younger, work-life balance is likewise becoming more and more important. Nurses from Generation Y and Z said that their peers did not treat them with the respect and appreciation they deserved.

Ora, DC, Ejebu, OZ, Ball, J et.al, (2023) conducted research on the Shift Characteristics and Burnout Among Nurses conducted a Cross-sectional survey among nursing staff. The survey received 976 responses, 873 of which came from social media, membership lists of unions and nursing journals, and 83 from the two Trusts. 873 nursing personnel made up the final sample after incorrect replies (such as not being nursing staff or not working in the UK or Ireland) were eliminated. Of these, 188 (22%) were healthcare assistants, 27 (3%), and 658 (75%) were registered nurses. It was found that working shifts between 8 and 12 h, inadequate staffing levels and having no choice over shift length were associated with an increased risk of burnout. Inadequate staffing levels, no choice over shift length and rarely or never taking breaks were associated with exhaustion. Neither burnout nor exhaustion was significantly associated with long shifts, type of work schedule or weekly working hours in multivariable models.

Galanis, P, Katsiroumpa, A, Vraka, MD, et.al, conducted a study on Nurses Quietly Quit Their Job More Often Than Other Healthcare Workers: An Alarming Healthcare Issue for Healthcare Services. The study aims to assess the level of quiet quitting among healthcare workers (HCWs) and identify possible differences between nurses, physicians, and other HCWs. It was investigated the impact of sociodemographic variables, job burnout, and job satisfaction on quiet quitting levels. A cross-sectional study with a convenience sample was conducted. Sociodemographic variables, job burnout, job satisfaction, and quiet quitting. Among the sample, 67.4% of nurses were quiet quitters, while the prevalence of quiet quitting for physicians and other HCWs was 53.8% and 40.3%, respectively. Multivariable linear regression analysis identified that the levels of quiet quitting were higher among nurses than physicians and other HCWs. Moreover, greater job burnout contributed more to quiet quitting, while less satisfaction implied more quiet quitting. HCWs who work in shifts and those working in the private sector experienced higher levels of quiet quitting. More than half of Healthcare Workers were described as quit quitters. Levels of quiet quitting were higher among nurses. Job burnout and job dissatisfaction were associated with higher levels of quiet quitting.

According to Ankaji, B, Modi, C, & Ajonbadi, HA, (2020) on their study 'The experiences of work-life balance, stress, and coping lifestyles of female professionals', the qualitative findings stem from in-depth, one-on-one interviews with 52 female medical practitioners from Nigeria. The thematic analysis reveals that the pressure of time, a recognized challenge in the medical field, intensifies adverse work-home disruptions. Moreover, additional themes like patriarchal tendencies and wage disparities, which affect female physicians yet are infrequently addressed in work-life balance studies, surfaced as significant stressors and sources of work-family conflict. Consequently, these doctors resort to personal coping strategies as a means of managing the challenges they face.

CHAPTER - III METHODOLOGY

This chapter presents the field settings of the study, methodology, tools of data collection and data processing and analysis.

3.1 Field Setting

The study was conducted in two hospitals, John William Hospital and Christian Hospital Serkawn respectively.

John William Hospital established in 2015 is a church- based hospital located in Chanmari, Lunglei District in Mizoram, owned by Presbyterian Church of India, Mizoram Synod. They provide excellent healthcare services to individuals of every age. Patients can anticipate receiving exceptional care, operations, and medical interventions at the facility. Moreover, John William Hospital delivers extensive services to promote patient health and overall wellness. The hospital presents a range of options customized to suit patient's requirements and financial constraints.

Christian Hospital Serkawn is a hospital-cum nursing school at Serkawn, Lunglei, Mizoram, operated by the Baptist Church of Mizoram. Started in the 1919, and formally established in 1923, it was the first hospital and nursing school in Mizoram. The medical facility provides a variety of healthcare services, such as general medicines, surgical procedures, and maternal and child health services. It also has a vital function in delivering healthcare to the rural and isolated communities in Mizoram. Throughout the years, the hospital has built a commendable reputation for its commitment to delivering high-quality care and community health initiatives.

3.2 Universe of the study

The universe of study is among health practitioners who are basically nurses.

3.3 Research design

In this study work-life balance is divided into various categories which are, Profile of the respondent, work related matters, work-life balance, psychological well-being, and coping mechanisms and are analysed in this study.

3.4 Sampling

In this study Purposive Sampling is employed in selection of respondents.

3.5 Tools of data collection

For tools of data collection Semi-Structured Questionnaire was used which consist of five categories' first category talks about profile of the respondents, marriage concerns, and family details, and second category talks about work related matters, third category about work-life balance, fourth category is about psychological well-being, and lastly the fifth category talks

about the coping mechanisms. For measuring Work-Life Balance this scale Psychometric Analysis of the Work-Life Balance Self-Assessment Scale which is developed by Hayman.

3.6 Sources of data collection

Primary sources of data were Questionnaire and Online Journals represents the secondary data.

3.7 Data processing and analysis

The quantitative data was processed by using Microsoft Excel and Statistical Package for Social Sciences (SPSS).

CHAPTER - IV

RESULTS AND DISCUSSION

In this chapter, the results and discussions of the analysis of the collected data through questionnaire and case study will be presented.

4.1 Demographic profile of the respondent

Table 1 represent the demographic profile of the respondents which is classified into age group, religion, and denomination.

Age group is categorized into 20-30, 31-40, 41-50, and 51-60. A little less than three fifth (37.1%) both falls in the age group between 20-30 and 31-40 in which unmarried are more (34.3%) in the age group between 20-30 and married are (25.7%) are more between 31-40. A little less than one fifth (17.1%) falls in the age group between 41-50 in which unmarried are more (14.3%) whereas the remaining 8.6 percent falls in the age group between 51-60 where married are more than unmarried. The overall mean age is 65.6 in which unmarried is 63 and for married the mean age is 63.57%

Religion is divided into, Christian, Hindu, Muslim, and others. All of the respondents (100%) practice Christianity as their religion in which unmarried are more (51.4%) than married (48.6%). Denomination is classified into Baptist, Presbyterian, Salvation Army, UPC (NE), UPC (MZ), Seventh Day Adventist, and others. More than half of the respondent (71.4%) are Baptist, in which unmarried are more (51.4%) than married (48.6%). Less than half of the respondent (28.6%) are Presbyterian, in which unmarried are more (20.0%) than married (8.6%).

Table 4.1 Demographic profile of the respondents

Sl.No.	Variables	Marital Status		Total N=35
		Unmarried n=12	Married n=23	
II	Age group			
	23-30	12	1	13
		34.3%	2.9%	37.1%
	31-40	4	9	13
		11.4%	25.7%	37.1%
	41-50	1	5	6
		2.9%	14.3%	17.1%
	51-60	1	2	3
		2.9%	5.7%	8.6%
III	Religion			
	Christian	18	17	35
		51.4%	48.6%	100.0%

IV	Denomination			
	Baptist	11	14	25
		31.4%	40.0%	71.4%
	presbyterian	7	3	10
		20.0%	8.6%	28.6%

Source: Computed

4.2 Work profile of the respondents

Table 2 represents the work profile of the respondents which is classified into educational qualification, job status, years of service, and reasons for work.

Educational qualification is classified into HSLC, HSSLC, Graduate, and Post Graduate. A little less than half (47.5%) attained education up to HSLC in which both married and unmarried have equal ratio. A little more than two fifth (42.95%) are graduates in which unmarried are more (22.9%) than married. A few (8.6%) completed post-graduation in which married are more (5.7%) whereas, the remaining 2.9 percent completed HSLC which is composed of unmarried (2.9%).

A little more than one third (34.3%) of the respondent's job status are permanent in which married are more (22.9%) than unmarried (11.4%). A little less than one third (31.4%) are contract workers where unmarried (17.1%) are more than married (14.3%). One fourth of the respondent (25.7%) are casual in which unmarried are more (20.0%) than married (5.7%) and the remaining 8.6 percent are substitute which is composed of unmarried (2.9%) and married (5.7%).

A little less than one third (28.6%) composed of 28.6 percent unmarried and (28.6%) in which married are (20.0%) are more than unmarried (8.6%) both have serviced for 5-10 years and 11-15 years. One fourth (20.0%) serviced for 5-10 years in which married (11.4%) are more than unmarried (8.6%). A little more than one tenth (14.3%) have serviced for more than 10 years where married (8.6%) are more than unmarried (5.7%). A few (8.6%) serviced for 16-20 years which composed of 8.6 percent married.

A little less than half (40.0%) reason for work is passion for profession in which married (22.9%) are more than unmarried (17.1%). A little less than one third (31.4%) reason for work is to support family where unmarried (20.0%) are more than married (11.4%). A little less than one fifth (17.1%) opted career opportunity as reason for work in which married (11.4%) are more than unmarried (5.7%). The remaining (11.4%) preferred economic independence as reason for work in which unmarried (8.6%) are more than married (2.9%).

Table 4.2 Work Profile of the Respondent

Sl.No	Variables	Marital Status		Total N=35
		unmarried n=12	Married n=23	
I	Educational qualification			
	hslc	1	0	1
		2.9%	0.0%	2.9%
	hsslc	8	8	16
		22.9%	22.9%	45.7%
	graduate	8	7	15
		22.9%	20.0%	42.9%
	post graduate	1	2	3
		2.9%	5.7%	8.6%
II	Job status			
	permanent	4	8	12
		11.4%	22.9%	34.3%
	contract	6	5	11
		17.1%	14.3%	31.4%
	casual	7	2	9
		20.0%	5.7%	25.7%
	substitute	1	2	3
		2.9%	5.7%	8.6%
III	Year of service			
	less than 5 years	10	0	10
		28.6%	0.0%	28.6%
	5-10 years	3	4	7
		8.6%	11.4%	20.0%
	11-15 years	3	7	10
		8.6%	20.0%	28.6%
	16-20 years	0	3	3
		0.0%	8.6%	8.6%
	more than 20 years	2	3	5
		5.7%	8.6%	14.3%
IV	Reason for work			
	support family	7	4	11
		20.0%	11.4%	31.4%
		3	1	4

	economic independence	8.6%	2.9%	11.4%
	career opportunity	2	4	6
		5.7%	11.4%	17.1%
	passion for profession	6	8	14
		17.1%	22.9%	40.0%

Source: Computed

4.3 Marriage Concerns

Half of the respondents (51.4%) are unmarried. A little less than one fifth (17.1%) duration of marriage is less than 5 years and a little more than one tenth (11.4%) duration of marriage is 5-10 years. A few (8.6%) have been married for more than 20 years and the remaining (5.7%) is equally distributed between 16-20 years.

A little less than one third (31.4%) husband are older and the remaining (17.1%) respondents are older than their husband. A little more than one tenth (14.3%) educational qualification of husband is graduate and a few (11.4%) husbands' attained education up to HSSLC. A little more than one tenth (8.6%) husbands are below HSLC and remaining 8.6 percent are post graduate. A little less than half (40.0%) respondents' husbands are employed and a few (8.6%) are unemployed. Two fourth (25.7%) husbands work government job and a little less than half. A few 5.7 percent both works at private setting and self-employed and the remaining (8.6%) composed of semi government job.

Table 4.3 Marriage Concerns of the Respondents

Sl.no	Variables	Marital status		Total N=35
		Unmarried n=12	Married n=23	
I	Duration for marriage			
	N/A	18	0	18
		51.4%	0.0%	51.4%
	less than 5 years	0	6	6
		0.0%	17.1%	17.1%
	5-10 years	0	4	4
		0.0%	11.4%	11.4%
	11-15 years	0	2	2
		0.0%	5.7%	5.7%
	16-20 years	0	2	2
		0.0%	5.7%	5.7%
	more than 20 years	0	3	3
		0.0%	8.6%	8.6%
II	Who is older			

	N/A	18	0	18
		51.4%	0.0%	51.4%
	Husband	0	11	11
		0.0%	31.4%	31.4%
	Self	0	6	6
		0.0%	17.1%	17.1%
III	Educational qualification of husband			
	N/A	18	0	18
		51.4%	0.0%	51.4%
	below hslc	0	3	3
		0.0%	8.6%	8.6%
	Hslc	0	2	2
		0.0%	5.7%	5.7%
	Hsslc	0	4	4
		0.0%	11.4%	11.4%
	Graduate	0	5	5
		0.0%	14.3%	14.3%
	post graduate	0	3	3
		0.0%	8.6%	8.6%
IV	Employment status of husband			
	N/A	18	0	18
		51.4%	0.0%	51.4%
	employed	0	14	14
		0.0%	40.0%	40.0%
	unemployed	0	3	3
		0.0%	8.6%	8.6%
V	Job settings of husband			
	N/A	18	0	18
		51.4%	0.0%	51.4%
	government	0	9	9
		0.0%	25.7%	25.7%
	semi government	0	1	1
		0.0%	2.9%	2.9%
	private	0	2	2
		0.0%	5.7%	5.7%
	church	0	3	3
		0.0%	8.6%	8.6%
	self employed	0	2	2
		0.0%	5.7%	5.7%

4.4 Family Details

A little more than three fourth (77.1%) are nuclear family in which unmarried (40.0%) are more than married (37.1%) and the remaining (22.9%) are joint family where both married and unmarried (11.4%) respondents are equal. A little less than three fourth (74.3%) owned a house in which unmarried (42.9%) are more than married and the remaining (25.7%) rent house in which married (17.1%) are more than unmarried (8.6%).

A little more than two third (68.6%) family size is small in which married and unmarried (34.3%) are equal. The remaining (31.4%) size of family is medium in which married (14.3%) are less than unmarried (17.1%).

A little more than half (51.4%) have no children which composed of unmarried (42.9%) are more than married (8.6%) and a little less than half (48.6%) have a size of 1-5 children in which married (40.0%) are more than unmarried (8.6%).

Almost all (94.3%) have a number of 1-5 earners where married (48.6%) are more than unmarried (45.7%) and the remaining 2.9 percent composed of both 6-10 and above 10 number of earners in which unmarried are (2.9%).

A vast majority (80.0%) have a number of dependents between 1 to 5 in which married (40.0%) and unmarried (40.0%) are equal and the remaining (20.0%) have a number of 6 to 10 dependents where unmarried (11.4%) are more than married (8.6%).

A little less than half (40.0%) monthly household income is between 37325-62272 where unmarried (25.7%) are more than married (14.3%) and a little more than one fifth (17.1%) monthly household income is between 62273-98380 in which married (11.4%) are more than unmarried (5.7%). A little more than one tenth (14.3%) monthly household income is usually between 93381-124488 and 124489-249043 in which unmarried (8.6%) are more than married (5.7%). A few 8.6 percent monthly family income is between 12445-37324 where married (5.7%) are more than unmarried (2.9%) and the remaining 2.9 percent monthly family income is between below 1244 and above 249044.

Table 4.4 Family Details of the Respondents

Sl.no	Variables	marital status		Total
		unmarried	married	
I	Type of family	n=12	n=23	N=35
	nuclear	14	13	27
		40.0%	37.1%	77.1%
	joint	4	4	8
		11.4%	11.4%	22.9%
II	Ownership of house			
	owned	15	11	26
		42.9%	31.4%	74.3%
	rent	3	6	9

		8.6%	17.1%	25.7%
III	No. of family members			
	2.00	2	1	3
		5.7%	2.9%	8.6%
	3.00	3	2	5
		8.6%	5.7%	14.3%
	4.00	4	3	7
		11.4%	8.6%	20.0%
	5.00	5	4	9
		14.3%	11.4%	25.7%
	6.00	1	2	3
		2.9%	5.7%	8.6%
	7.00	2	4	6
		5.7%	11.4%	17.1%
	8.00	1	1	2
		2.9%	2.9%	5.7%
IV	Size of family			
	1-5 small	12	12	24
		34.3%	34.3%	68.6%
	6-10 medium	6	5	11
		17.1%	14.3%	31.4%
V	Number of children			
	.00	5	4	9
		14.3%	11.4%	25.7%
	1.00	5	5	10
		14.3%	14.3%	28.6%
	2.00	6	4	10
		17.1%	11.4%	28.6%
	3.00	0	3	3
		0.0%	8.6%	8.6%
	4.00	2	1	3
		5.7%	2.9%	8.6%
VII	Size of children			
	N/A	15	3	18
		42.9%	8.6%	51.4%
	1-5	3	14	17
		8.6%	40.0%	48.6%
VIII	No. of earners			
	1-5	16	17	33

		45.7%	48.6%	94.3%
	6-10	1	0	1
		2.9%	0.0%	2.9%
	above 10	1	0	1
		2.9%	0.0%	2.9%
IX	No. of dependents			
	1-5	14	14	28
		40.0%	40.0%	80.0%
	6-10	4	3	7
		11.4%	8.6%	20.0%
X	Monthly household income			
	below 1244	0	1	1
		0.0%	2.9%	2.9%
	12445-37324	1	2	3
		2.9%	5.7%	8.6%
	37325-62272	9	5	14
		25.7%	14.3%	40.0%
	62273-98380	2	4	6
		5.7%	11.4%	17.1%
	93381-124488	3	2	5
		8.6%	5.7%	14.3%
	124489-249043	3	2	5
		8.6%	5.7%	14.3%
	above 249044	0	1	1
		0.0%	2.9%	2.9%

4.5 Work Related Matters-01

A little more than half (57.1%) work 3 to 5 days in a week in which both married and unmarried (28.6%) are equal. The remaining (42.9%) work for 5 to 6 days in a week where unmarried (22.9%) are more than married (20.0%).

Three fifth (60.0%) working hour is 7 to 10 hours and married (34.3%) are more than unmarried (25.7%) and a little more than one third (34.3%) work for 5 to 6 hours where unmarried (20.0%) are more than married (14.3%). The remaining 5.7 percent working hour is 10 to 12 hours in which unmarried (5.7%) are more than married. A little more than half (54.3%) means of going to work is personal vehicle in which married (28.6%) are more than unmarried (25.7%). A little more than one third (37.1%) made their way to work on foot in which unmarried (20.0%) are more than married (17.1%) and the remaining (8.6%) went to work by public transport where unmarried (5.7%) are more than married (2.9%).

Almost all (97.1%) agreed that their workplace is equipped with washroom in which unmarried (51.4%) are more than married (45.7%) and the remaining (2.9%) do not agreed that their workplace is equipped with safe and convenient washroom and married respondents are 2.9 percent. A little more than half (57.1%) agreed that their washroom is moderately convenient for usage and safety and a little more than one third (37.1%) excellent regarding the usage and safety of their washroom in which unmarried (25.7%) are more than married (11.4%). The remaining 2.9 percent choose poor and very poor in which unmarried are (2.9%).

Table 4.5 Work Related Matters-01 Descriptive

Sl.no.	Variables	marital status		Total
		unmarried	married	
I	How many days in a week is your duty/work	n=12	n=23	N=35
	3-5 days	10	10	20
		28.6%	28.6%	57.1%
	5-6 days	8	7	15
		22.9%	20.0%	42.9%
II	What is your working hour			
	5-6 hours	7	5	12
		20.0%	14.3%	34.3%
	7-10 hours	9	12	21
		25.7%	34.3%	60.0%
	10-12 hours	2	0	2
		5.7%	0.0%	5.7%
III	What is your means of going to work			
	personal vehicle	9	10	19
		25.7%	28.6%	54.3%
	public transport	2	1	3
		5.7%	2.9%	8.6%
	by foot	7	6	13
		20.0%	17.1%	37.1%
IV	Is your workplace equipped with washroom			
	yes	18	16	34
		51.4%	45.7%	97.1%
	no	0	1	1
		0.0%	2.9%	2.9%
V	How convenient is it for your safety and usage			
	excellent	9	4	13
		25.7%	11.4%	37.1%

	moderate	7	13	20
		20.0%	37.1%	57.1%
	poor	1	0	1
		2.9%	0.0%	2.9%
	very poor	1	0	1
		2.9%	0.0%	2.9%

4.6 Work Related Matters

S/N	Variables	Married	Unmarried	Total
		n=17	n=18	N=35
I	are your grievances addressed well			
	always	10	10	20
		28.6%	28.6%	57.1%
	sometimes	4	4	8
		11.4%	11.4%	22.9%
	often	3	2	5
		8.6%	5.7%	14.3%
	never	0	2	2
		0.0%	5.7%	5.7%
II	are you punctual to work			
	always	15	13	28
		42.9%	37.1%	80.0%
	sometimes	1	3	4
		2.9%	8.6%	11.4%
	often	1	2	3
		2.9%	5.7%	8.6%
III	are your achievements/inputs acknowledged by your superiors			
	always	4	5	9
		11.4%	14.3%	25.7%
	sometimes	5	13	18
		14.3%	37.1%	51.4%
	often	5	0	5
		14.3%	0.0%	14.3%
	never	3	0	3
		8.6%	0.0%	8.6%
IV	did you put in extra hours of work			
	always	4	3	7

		11.4%	8.6%	20.0%
	sometimes	12	14	26
		34.3%	40.0%	74.3%
	often	1	1	2
		2.9%	2.9%	5.7%
V	did you experience stress at work			
	always	2	1	3
		5.7%	2.9%	8.6%
	sometimes	9	14	23
		25.7%	40.0%	65.7%
	often	4	1	5
		11.4%	2.9%	14.3%
	never	2	2	4
		5.7%	5.7%	11.4%
VI	did you experience anxiety at work			
	sometimes	7	10	17
		20.0%	28.6%	48.6%
	often	1	2	3
		2.9%	5.7%	8.6%
	never	9	6	15
		25.7%	17.1%	42.9%
VII	did you experience discrimination or abuse at work place			
	always	1	3	4
		2.9%	8.6%	11.4%
	sometimes	2	2	4
		5.7%	5.7%	11.4%
	often	0	2	2
		0.0%	5.7%	5.7%
	never	14	11	25
		40.0%	31.4%	71.4%
VIII	are you paid on time			
	always	14	14	28
		40.0%	40.0%	80.0%
	sometimes	0	2	2
		0.0%	5.7%	5.7%
	often	1	1	2
		2.9%	2.9%	5.7%

	never	2	1	3
		5.7%	2.9%	8.6%
IX	how concerns are you about your safety as women at workplace			
	always	12	11	23
		34.3%	31.4%	65.7%
	sometimes	2	1	3
		5.7%	2.9%	8.6%
	often	0	4	4
		0.0%	11.4%	11.4%
	never	3	2	5
		8.6%	5.7%	14.3%
X	how are home stress/tensions affecting your mood/performance at work place			
	sometimes	11	9	20
		31.4%	25.7%	57.1%
	often	2	4	6
		5.7%	11.4%	17.1%
	never	4	5	9
		11.4%	14.3%	25.7%
XI	how is work stress/tensions affect your mood/roles at home			
	sometimes	4	7	11
		11.4%	20.0%	31.4%
	often	10	4	14
		28.6%	11.4%	40.0%
	never	3	7	10
		8.6%	20.0%	28.6%
XII	when work our/tensions rises did you happen to displace your anger upon your children			
	always	0	1	1
		0.0%	2.9%	2.9%
	sometimes	4	3	7
		11.4%	8.6%	20.0%
	often	2	8	10
		5.7%	22.9%	28.6%
	never	11	6	17
		31.4%	17.1%	48.6%
XIII	when your children are sick how does it affect your performance at work			
	always	3	5	8
		8.6%	14.3%	22.9%
	sometimes	6	3	9

		17.1%	8.6%	25.7%
	often	7	4	11
		20.0%	11.4%	31.4%
	never	1	6	7
		2.9%	17.1%	20.0%
XI	did you pay your own lunch			
	always	15	15	30
		42.9%	42.9%	85.7%
	sometimes	0	1	1
		0.0%	2.9%	2.9%
	often	2	1	3
		5.7%	2.9%	8.6%
	never	0	1	1
		0.0%	2.9%	2.9%
XV	when work demands travelling how concerned are you			
	always	5	3	8
		14.3%	8.6%	22.9%
	sometimes	7	8	15
		20.0%	22.9%	42.9%
	often	4	4	8
		11.4%	11.4%	22.9%
	never	1	3	4
		2.9%	8.6%	11.4%

4.7 Work-related concerns by marital status

Table 7.1 shows respondents' concerns with matter relating to works by gender using t-test distribution. The work-related concerns are composed of fifteen (15) domains including addressal of grievances, punctuality to work, acknowledgement of contributions/achievements, putting extra time to work, experiencing stress at work, experiencing anxiety at work, experiencing discrimination at work place, receiving salary on time, safety concerns at work place, effects of home stress/tensions upon mood/performance at work place, effects of work stress/tensions upon mood/roles at home, displacement of anger/tension at work place upon children at home, effects of work performance upon ill health/sickness of children at home, bringing one's own lunch box to work and concern about travelling in work related matters.

Among the respondents' mean scores, the majority (3.23) is displacement of anger/tension at work place upon others at home in which unmarried are more (3.41) than married (3.06).

In order to find out the relationship between marital status and work-related concerns by applying t-test, hypothesis is derived as below:

H₀: There is no relationship between work-related concerns and marital status.

H₁: There is a relationship between work-related concerns and marital status.

Since the P value is less than 0.05, null hypothesis is rejected at 5% level with regards to acknowledgement of contributions/achievement at work place by authorities or superiors. Hence, there is a significant difference between married and unmarried with regards acknowledgement of contributions/achievement at work place by authorities or superiors. Based on the mean scores, unmarried respondents (2.41) experience more acknowledgement than the married respondents (1.72).

There is no significant difference between married and unmarried respondents with regards to all other work-related concerns other than acknowledgement of contributions/achievements. Hence, the null hypothesis is accepted at 5% level with regards to all other work-related concerns other than acknowledgement of contributions/achievements.

Therefore, the table reveals that acknowledgement of contributions/achievements is the only domain of work-related concerns where there is a significant difference between marital status of the respondents. This could be because unmarried nurses are more productive and develop positive carrier advancement attitude.

Table 4.7 Work-related concerns by marital status

Work related concerns	Gender				Total		t value	P value
	Unmarried		Married					
	n=18		n=17		N=35			
	Mean	SD	Mean	SD	Mean	SD		
Addressal of grievances	1.78	1.06	1.59	0.8	1.69	0.93	.596	.556
Punctuality to work	1.39	0.7	1.18	0.53	1.29	0.62	1.011	.320
Acknowledgement of contributions/achievements	1.72	0.46	2.41	1.06	2.06	0.87	-2.513	.017
Putting extra time to work	1.89	0.47	1.82	0.53	1.86	0.49	.387	.702
Experiencing stress at work	2.22	0.73	2.35	0.86	2.29	0.79	-.485	.631
Experiencing anxiety at work	2.78	0.94	3.12	0.99	2.94	0.97	-1.039	.306
Experiencing discrimination at work place	2.17	1.2	2.59	0.94	2.37	1.09	-1.152	.257
Receiving salary on time	1.39	0.85	1.47	1.07	1.43	0.95	-.251	.803
Safety concerns at work place	1.83	1.15	1.65	1.17	1.74	1.15	.475	.638
Effects of home stress/tensions upon mood/performance at work place	2.78	0.88	2.59	0.87	2.69	0.87	.641	.526
Effects of work stress/tensions upon mood/roles at home	3	0.91	2.94	0.66	2.97	0.79	.218	.829
Displacement of anger/tension at work place upon others at home	3.06	0.87	3.41	0.87	3.23	0.88	-1.209	.235

Effects of work performance upon ill health/sickness of children at home	2.61	1.24	2.35	0.86	2.49	1.07	.710	.483
Bringing one's own lunch box to work	1.33	0.84	1.24	0.66	1.29	0.75	.381	.705
Concern about travelling in work related matters	2.39	0.98	2.06	0.9	2.23	0.94	1.037	.307
Overall mean	2.22	0.35	2.25	0.27	2.24	0.31	-.271	.788

Source: Computed

*p<0.05

**p<0.01

4.8 Work-life Balance – Descriptive

Table 4.8 Work-life balance – descriptive

S/N	Variables	Married	Unmarried	Total
		n=17	n=18	N=35
I	my job gives me energy to pursue personal activities			
	moderately disagree	3	0	3
		8.6%	0.0%	8.6%
	slightly disagree	2	4	6
		5.7%	11.4%	17.1%
	slightly agree	4	3	7
		11.4%	8.6%	20.0%
	moderately agree	5	6	11
		14.3%	17.1%	31.4%
	strongly agree	3	5	8
		8.6%	14.3%	22.9%
II	my job makes personal life difficult			
	strongly disagree	2	0	2
		5.7%	0.0%	5.7%
	moderately disagree	4	4	8
		11.4%	11.4%	22.9%
	slightly disagree	3	1	4
		8.6%	2.9%	11.4%
	slightly agree	2	8	10
		5.7%	22.9%	28.6%
	moderately agree	6	4	10
		17.1%	11.4%	28.6%
	strongly agree	0	1	1
		0.0%	2.9%	2.9%
III	i am in a better mood because of personal life			
IV	moderately disagree	4	3	7

		11.4%	8.6%	20.0%
	slightly disagree	1	4	5
		2.9%	11.4%	14.3%
	slightly agree	4	5	9
		11.4%	14.3%	25.7%
	moderately agree	6	3	9
		17.1%	8.6%	25.7%
	strongly agree	2	3	5
		5.7%	8.6%	14.3%
	my work suffers because of my personal life			
	strongly disagree	5	9	14
		14.3%	25.7%	40.0%
	moderately disagree	3	2	5
		8.6%	5.7%	14.3%
	slightly disagree	3	1	4
		8.6%	2.9%	11.4%
	slightly agree	4	5	9
		11.4%	14.3%	25.7%
	moderately agree	1	0	1
		2.9%	0.0%	2.9%
	strongly agree	1	1	2
		2.9%	2.9%	5.7%
V	i neglect personal needs because of work			
	strongly disagree	2	6	8
		5.7%	17.1%	22.9%
	moderately disagree	0	1	1
		0.0%	2.9%	2.9%
	slightly disagree	2	2	4
		5.7%	5.7%	11.4%
	slightly agree	5	4	9
		14.3%	11.4%	25.7%
	moderately agree	3	3	6
		8.6%	8.6%	17.1%
	strongly agree	5	2	7
		14.3%	5.7%	20.0%
VI	i find it hard to work because of personal matters			
	strongly disagree	4	5	9
		11.4%	14.3%	25.7%
	moderately disagree	6	3	9

		17.1%	8.6%	25.7%
	slightly disagree	0	1	1
		0.0%	2.9%	2.9%
	slightly agree	5	6	11
		14.3%	17.1%	31.4%
	moderately agree	1	2	3
		2.9%	5.7%	8.6%
	strongly agree	1	1	2
		2.9%	2.9%	5.7%
VII	i miss personal activities because of work			
	strongly disagree	0	1	1
		0.0%	2.9%	2.9%
	moderately disagree	4	1	5
		11.4%	2.9%	14.3%
	slightly disagree	1	3	4
		2.9%	8.6%	11.4%
	slightly agree	2	8	10
		5.7%	22.9%	28.6%
	moderately agree	3	1	4
		8.6%	2.9%	11.4%
	strongly agree	7	4	11
		20.0%	11.4%	31.4%
VIII				
	strongly disagree	3	2	5
		8.6%	5.7%	14.3%
	moderately disagree	2	2	4
		5.7%	5.7%	11.4%
	slightly disagree	1	6	7
		2.9%	17.1%	20.0%
	slightly agree	6	2	8
		17.1%	5.7%	22.9%
	moderately agree	1	4	5
		2.9%	11.4%	14.3%
	strongly agree	4	2	6
		11.4%	5.7%	17.1%
IX				
	strongly disagree	5	4	9
		14.3%	11.4%	25.7%
	moderately disagree	1	5	6

		2.9%	14.3%	17.1%
	slightly disagree	2	3	5
		5.7%	8.6%	14.3%
	slightly agree	5	3	8
		14.3%	8.6%	22.9%
	moderately agree	3	1	4
		8.6%	2.9%	11.4%
	strongly agree	1	2	3
		2.9%	5.7%	8.6%
X	i put personal life on hold for work			
	strongly disagree	1	1	2
		2.9%	2.9%	5.7%
	moderately disagree	3	0	3
		8.6%	0.0%	8.6%
	slightly disagree	0	3	3
		0.0%	8.6%	8.6%
	slightly agree	6	6	12
		17.1%	17.1%	34.3%
	moderately agree	3	4	7
		8.6%	11.4%	20.0%
	strongly agree	4	4	8
		11.4%	11.4%	22.9%
XI	my personal life drains me of energy of work			
	strongly disagree	3	5	8
		8.6%	14.3%	22.9%
	moderately disagree	4	1	5
		11.4%	2.9%	14.3%
	slightly disagree	2	2	4
		5.7%	5.7%	11.4%
	slightly agree	4	5	9
		11.4%	14.3%	25.7%
	moderately agree	4	3	7
		11.4%	8.6%	20.0%
	strongly agree	0	2	2
		0.0%	5.7%	5.7%
XII	i struggle to juggle work and non work			
	strongly disagree	1	5	6
		2.9%	14.3%	17.1%
	moderately disagree	2	0	2

		5.7%	0.0%	5.7%
	slightly disagree	4	7	11
		11.4%	20.0%	31.4%
	slightly agree	5	3	8
		14.3%	8.6%	22.9%
	moderately agree	3	2	5
		8.6%	5.7%	14.3%
	strongly agree	2	1	3
		5.7%	2.9%	8.6%
XIII	personal life gives me energy for my job			
	strongly disagree	0	1	1
		0.0%	2.9%	2.9%
	moderately disagree	2	1	3
		5.7%	2.9%	8.6%
	slightly disagree	2	3	5
		5.7%	8.6%	14.3%
	slightly agree	7	5	12
		20.0%	14.3%	34.3%
	moderately agree	5	6	11
		14.3%	17.1%	31.4%
	strongly agree	1	2	3
		2.9%	5.7%	8.6%
XIV	i am happy with the amount of time for non work activities			
	moderately disagree	4	4	8
		11.4%	11.4%	22.9%
	slightly disagree	2	4	6
		5.7%	11.4%	17.1%
	slightly agree	2	4	6
		5.7%	11.4%	17.1%
	moderately agree	6	4	10
		17.1%	11.4%	28.6%
	strongly agree	3	2	5
		8.6%	5.7%	14.3%
XV	i am in a better mood because of my job			
	strongly disagree	1	0	1
		2.9%	0.0%	2.9%
	moderately disagree	1	3	4
		2.9%	8.6%	11.4%

	slightly disagree	4	4	8
		11.4%	11.4%	22.9%
	slightly agree	6	4	10
		17.1%	11.4%	28.6%
	moderately agree	3	6	9
		8.6%	17.1%	25.7%
	strongly agree	2	1	3
		5.7%	2.9%	8.6%

4.9 Work-life balance by marital status

Table 4.9 shows respondents' adjustment with work-life balance in their day to day living by marital status using t-test distribution. Work-life balance is composed of fifteen (15) domains which includes statements like My job gives me energy to pursue personal activities, My job makes personal life difficult, I am in a better mood at work because of personal life, My work suffers because of my personal life, I neglect personal needs because of work, I find it hard to work because of personal matters, I miss personal activities because of work, My personal life suffers because of work, I am too tired to be effective at work, I put personal life on hold for work, My personal life drains me of energy for work, I struggle to juggle work and non-work, Personal life gives me energy for my job, I am happy with the amount of time for non-work activities and I am in a better mood because of my job.

Among the respondents' mean scores, the majority (4.43) is referring to the statement 'My job gives me energy to pursue personal activities' in which unmarried (4.67) agreed more than married (4.18).

In order to find out the relationship between marital status and work-life balance by applying t-test, hypothesis is derived as below:

H₀: There is no relationship between work-life balance and marital status.

H₁: There is a relationship between work-life balance and marital status.

There is no significant difference between married and unmarried nurses with regards to all the domains of work-life balance. Hence, the null hypothesis is accepted at 5% level with all the domains of work-life balance

Therefore, the table reveals that there is no significant difference between married and unmarried nurses with regards to all the domains of work-life balance. This could be due to the fact that both married and unmarried nurses cope well with their work and personal life which is evident from the relatively high level of mean scores to all the domains of work-life balance parameters.

Table 4.9 Work-life balance by marital status

Work-life balance	Gender						t value	P value
	Married		Unmarried		Total			
	n=17		n=18		N=35			
	Mean	SD	Mean	SD	Mean	SD		
My job gives me energy to pursue personal activities	4.18	1.38	4.67	1.14	4.43	1.27	-1.149	.259
My job makes personal life difficult	3.35	1.50	3.83	1.20	3.60	1.35	-1.050	.301
I am in a better mood because of personal life	4.06	1.39	3.94	1.35	4.00	1.35	.247	.806
My work suffers because of my personal life	2.76	1.56	2.33	1.61	2.54	1.58	.804	.427
I neglect personal needs because of work	4.29	1.61	3.17	1.86	3.71	1.81	1.915	.064
I find it hard to work because of personal matters	2.76	1.56	3.00	1.64	2.89	1.59	-.433	.668
I miss personal activities because of work	4.47	1.66	4.06	1.39	4.26	1.52	.802	.428
My personal life suffers because of work	3.71	1.79	3.56	1.54	3.63	1.65	.266	.792
I am too tired to be effective at work	3.18	1.70	2.89	1.64	3.03	1.65	.509	.614
I put personal life on hold for work	4.12	1.58	4.33	1.33	4.23	1.44	-.439	.664
My personal life drains me of energy of work	3.12	1.50	3.33	1.78	3.23	1.63	-.387	.701
I struggle to juggle work and non-work	3.76	1.39	3.00	1.53	3.37	1.50	1.541	.133
Personal life gives me energy for my job	4.06	1.09	4.11	1.32	4.09	1.20	-.127	.900
I am happy with the amount of time for non-work activities	4.12	1.50	3.78	1.35	3.94	1.41	.706	.485
I am in a better mood because of my job	3.88	1.32	3.89	1.23	3.89	1.25	-.015	.988
Work life balance overall mean	3.72	0.69	3.59	0.79	3.66	0.74	.512	.612

Source: Computed

*p<0.05

**p<0.01

4.10 Psychological well-being- Descriptive

Psychological well-being – Descriptive

S/N	Variables	Married	Unmarried	Total
		n=17	n=18	N=35

I	i tend to be influenced by people with strong opinions			
	strongly disagree	0	1	1
		0.0%	2.9%	2.9%
	slightly disagree	4	2	6
		11.4%	5.7%	17.1%
	slightly agree	6	9	15
		17.1%	25.7%	42.9%
	moderately agree	3	3	6
		8.6%	8.6%	17.1%
	strongly agree	4	3	7
		11.4%	8.6%	20.0%
II	in general i feel i am in charge of the situation in which i live			
	strongly disagree	0	4	4
		0.0%	11.4%	11.4%
	moderately disagree	2	1	3
		5.7%	2.9%	8.6%
	slightly disagree	1	2	3
		2.9%	5.7%	8.6%
	slightly agree	5	8	13
		14.3%	22.9%	37.1%
	moderately agree	9	3	12
		25.7%	8.6%	34.3%
III	i think it is important to have new experiences that challenge how you think about yourself and the world			
	strongly disagree	0	1	1
		0.0%	2.9%	2.9%
	moderately disagree	1	0	1
		2.9%	0.0%	2.9%
	slightly disagree	0	1	1
		0.0%	2.9%	2.9%
	slightly agree	0	4	4
		0.0%	11.4%	11.4%
	moderately agree	4	3	7
		11.4%	8.6%	20.0%
	strongly agree	12	9	21

		34.3%	25.7%	60.0%
IV	maintaining close relationship has been difficult and frustrating for me			
	strongly disagree	6	1	7
		17.1%	2.9%	20.0%
	moderately disagree	1	3	4
		2.9%	8.6%	11.4%
	slightly disagree	2	2	4
		5.7%	5.7%	11.4%
	slightly agree	5	4	9
		14.3%	11.4%	25.7%
	moderately agree	3	7	10
		8.6%	20.0%	28.6%
	strongly agree	0	1	1
		0.0%	2.9%	2.9%
V	i live life one day at a time and do not really think about the future			
	strongly disagree	6	7	13
		17.1%	20.0%	37.1%
	moderately disagree	4	2	6
		11.4%	5.7%	17.1%
	slightly disagree	4	5	9
		11.4%	14.3%	25.7%
	slightly agree	1	2	3
		2.9%	5.7%	8.6%
	moderately agree	2	1	3
		5.7%	2.9%	8.6%
	strongly agree	0	1	1
		0.0%	2.9%	2.9%
VI	when i look at the story of my life i am pleased with how things have turned out			
	strongly disagree	1	2	3
		2.9%	5.7%	8.6%
	moderately disagree	2	0	2
		5.7%	0.0%	5.7%
	slightly disagree	2	4	6

	slightly agree	5.7%	11.4%	17.1%
		2	5	7
	moderately agree	5.7%	14.3%	20.0%
		7	4	11
	strongly agree	20.0%	11.4%	31.4%
		3	3	6
VII	i have confidence in my opinions even if they are contrary to the general consensus	8.6%	8.6%	17.1%
	strongly disagree	1	0	1
		2.9%	0.0%	2.9%
	moderately disagree	1	1	2
		2.9%	2.9%	5.7%
	slightly disagree	3	3	6
		8.6%	8.6%	17.1%
	slightly agree	5	5	10
		14.3%	14.3%	28.6%
	moderately agree	6	8	14
		17.1%	22.9%	40.0%
	strongly agree	1	1	2
		2.9%	2.9%	5.7%
VIII	the demands of everyday life often get me down			
	strongly disagree	1	1	2
		2.9%	2.9%	5.7%
	moderately disagree	2	5	7
		5.7%	14.3%	20.0%
	slightly disagree	2	1	3
		5.7%	2.9%	8.6%
	slightly agree	7	6	13
		20.0%	17.1%	37.1%
	moderately agree	3	4	7
		8.6%	11.4%	20.0%
	strongly agree	2	1	3
		5.7%	2.9%	8.6%

IX	for me life has been a continuous process of learning changing and growth			
	moderately disagree	0	1	1
		0.0%	2.9%	2.9%
	slightly agree	5	2	7
		14.3%	5.7%	20.0%
	moderately agree	4	5	9
		11.4%	14.3%	25.7%
	strongly agree	8	10	18
		22.9%	28.6%	51.4%
X	people would describe as a giving person willing to share my time with others			
	moderately disagree	1	0	1
		2.9%	0.0%	2.9%
	slightly disagree	2	4	6
		5.7%	11.4%	17.1%
	slightly agree	6	2	8
		17.1%	5.7%	22.9%
	moderately agree	5	7	12
		14.3%	20.0%	34.3%
	strongly agree	3	5	8
		8.6%	14.3%	22.9%
XI	some people wonder aimlessly through life but i am not one of them			
	strongly disagree	0	1	1
		0.0%	2.9%	2.9%
	moderately disagree	3	0	3
		8.6%	0.0%	8.6%
	slightly disagree	2	3	5
		5.7%	8.6%	14.3%
	slightly agree	4	5	9
		11.4%	14.3%	25.7%
	moderately agree	3	5	8
		8.6%	14.3%	22.9%
	strongly agree	5	4	9
		14.3%	11.4%	25.7%

XII	i like most aspects of my personality			
	moderately disagree	0	1	1
		0.0%	2.9%	2.9%
	slightly disagree	5	3	8
		14.3%	8.6%	22.9%
	slightly agree	5	4	9
		14.3%	11.4%	25.7%
	moderately agree	4	6	10
		11.4%	17.1%	28.6%
	strongly agree	3	4	7
		8.6%	11.4%	20.0%
XIII	i judge myself by what i think is important not by the values of what others think is important			
	strongly disagree	0	1	1
		0.0%	2.9%	2.9%
	moderately disagree	2	3	5
		5.7%	8.6%	14.3%
	slightly disagree	2	2	4
		5.7%	5.7%	11.4%
	slightly agree	8	5	13
		22.9%	14.3%	37.1%
	moderately agree	3	1	4
		8.6%	2.9%	11.4%
	strongly agree	2	6	8
		5.7%	17.1%	22.9%
XIV	i am quite good at managing the many responsibilities of my daily life			
	moderately disagree	0	1	1
		0.0%	2.9%	2.9%
	slightly disagree	3	1	4
		8.6%	2.9%	11.4%
	slightly agree	2	2	4
		5.7%	5.7%	11.4%
	moderately agree	8	10	18
		22.9%	28.6%	51.4%

	strongly agree	4 11.4%	4 11.4%	8 22.9%
XV	i give up toying to make a big improvement or change in my life a long time ago			
	strongly disagree	2 5.7%	3 8.6%	5 14.3%
	moderately disagree	7 20.0%	1 2.9%	8 22.9%
	slightly disagree	2 5.7%	2 5.7%	4 11.4%
	slightly agree	3 8.6%	3 8.6%	6 17.1%
	moderately agree	2 5.7%	4 11.4%	6 17.1%
	strongly agree	1 2.9%	5 14.3%	6 17.1%
XVI	i have not experienced many warm and trusting relationship with others			
	strongly disagree	3 8.6%	3 8.6%	6 17.1%
	moderately disagree	7 20.0%	4 11.4%	11 31.4%
	slightly disagree	4 11.4%	3 8.6%	7 20.0%
	slightly agree	2 5.7%	4 11.4%	6 17.1%
	moderately agree	1 2.9%	3 8.6%	4 11.4%
	strongly agree	0 0.0%	1 2.9%	1 2.9%
XVII	i sometimes feel as if i have done all there is to do in life			
	strongly disagree	0 0.0%	2 5.7%	2 5.7%
	moderately disagree	7 20.0%	4 11.4%	11 31.4%
	slightly disagree	6	7	13

		17.1%	20.0%	37.1%
	slightly agree	4	4	8
		11.4%	11.4%	22.9%
	strongly agree	0	1	1
		0.0%	2.9%	2.9%
XVIII	in many ways i feel disappointed about my achievements in life			
	strongly disagree	5	5	10
		14.3%	14.3%	28.6%
	moderately disagree	4	1	5
		11.4%	2.9%	14.3%
	slightly disagree	5	7	12
		14.3%	20.0%	34.3%
	slightly agree	3	2	5
		8.6%	5.7%	14.3%
	moderately agree	0	1	1
		0.0%	2.9%	2.9%
	strongly agree	0	2	2
		0.0%	5.7%	5.7%

4.11 Psychological well-being by marital status

Table 4.11 shows respondents' status in relation to psychological well-being by marital status using t-test distribution. Psychological well-being is categorized into eighteen (18) domains including statements like When I am out in public, I compare my physical appearance to the appearance of others, When I meet a new person (same sex) , I compare my body size to his/her body size, When I am at work or school, I compare my body shape to the body shape of others, When I am out in public, I compare my body fat to the body fat of others, When I am shopping for clothes, I compare my weight to the weight of others, When I am at a party, I compare my body shape to the body shape of others, When I am eating in a restaurant, I compare my body shape to the body shape of others, When I am with a group of friends, I compare my body size to the body size of others, When I am eating in a restaurant, I compare my body fat to the body fat of others and When I am at the gym, I compare my physical appearance to the appearance of others.

Among the respondents' mean scores, the majority (5.23) is 'I think it is important to have new experiences that challenge how you think about yourself and the world' in which unmarried (4.94) are more than married (5.53).

In order to find out the relationship between marital status and psychological well-being by applying t-test, hypothesis is derived as below:

H₀: There is no relationship between psychological well-being and marital status.

H₁: There is a relationship between psychological well-being and marital status.

Since the P value is less than 0.05, null hypothesis is rejected at 5% level with regards to 'In general, I feel I am in charge of the situation in which I live'. Hence, there is a significant difference between married and unmarried with regards to the statement 'In general, I feel I am in charge of the situation in which I live'. Based on the mean scores, married respondents (5.53) agreed more than unmarried respondents (4.94).

There is no significant difference between married and unmarried respondents with regards to all other psychological well-being other than 'In general, I feel I am in charge of the situation in which I live'. Hence, the null hypothesis is accepted at 5% level with regards to all other psychological well-being other than 'In general, I feel I am in charge of the situation in which I live'.

Therefore, the table reveals that among the domains of psychological well-being, there is a significant difference between marital status of the respondents with the statement 'In general, I feel I am in charge of the situation in which I live'. This could be because married nurses are mature enough to handle situations in life.

Table 4.11 Psychological well-being by marital status

Psychological wellbeing	Gender				Total		t value	P value
	Married		Unmarried					
	n=17		n=18		N=35			
	Mea n	SD	Mean	SD	Mean	SD		
I tend to be influenced by people with strong opinions	4.41	1.12	4.22	1.22	4.31	1.16	.479	.635
In general, I feel I am in charge of the situation in which i live	4.24	1.03	3.28	1.45	3.74	1.34	2.241	.032
I think it is important to have new experiences that challenge how you think about yourself and the world	5.53	1.01	4.94	1.39	5.23	1.24	1.417	.166
Maintaining close relationship has been difficult and frustrating for me	2.88	1.62	3.89	1.41	3.40	1.58	-1.967	.058
I live life one day at a time and do not really think about the future	2.35	1.37	2.50	1.54	2.43	1.44	-.298	.768
When i look at the story of my life I am pleased with how things have turned out	4.24	1.52	4.00	1.50	4.11	1.49	.461	.648

I have confidence in my opinions even if they are contrary to the general consensus	4.00	1.27	4.28	1.02	4.14	1.14	-.714	.480
The demands of everyday life often get me down	3.88	1.36	3.56	1.42	3.71	1.38	.693	.493
For me life has been a continuous process of learning changing and growth	5.18	0.88	5.28	1.07	5.23	0.97	-.304	.763
People would describe as a giving person willing to share my time with others	4.41	1.12	4.72	1.13	4.57	1.12	-.816	.420
Some people wonder aimlessly through life but I am not one of them	4.29	1.49	4.39	1.33	4.34	1.39	-.198	.844
I like most aspects of my personality	4.29	1.10	4.50	1.20	4.40	1.14	-.527	.602
I judge myself by what I think is important not by the values of what others think is important	4.06	1.14	4.11	1.68	4.09	1.42	-.107	.915
I am quite good at managing the many responsibilities of my daily life	4.76	1.03	4.83	1.04	4.80	1.02	-.195	.846
I give up trying to make a big improvement or change in my life a long time ago	2.94	1.48	4.06	1.83	3.51	1.74	-1.975	.057
I have not experienced many warm and trusting relationship with others	2.47	1.12	3.17	1.54	2.83	1.38	-1.517	.139
I sometimes feel as if I have done all there is to do in life	2.82	0.81	2.94	1.21	2.89	1.02	-.345	.732
In many ways I feel disappointed about my achievements in life	2.35	1.11	2.94	1.63	2.66	1.41	-1.248	.221
Psychological well-being overall mean	4.10	0.37	4.17	0.43	4.14	0.40	-.533	.598

Source: Computed

*p<0.05

**p<0.01

Table 4.12 Coping Mechanism- Descriptive

S/N	Variables	Married	Unmarried	Total
		n=17	n=18	N=35
I	attend religious/church activities			
	sometimes	10	10	20
		28.6%	28.6%	57.1%
	often	7	8	15
		20.0%	22.9%	42.9%
II	participate in community activities			
	sometimes	14	17	31
		40.0%	48.6%	88.6%
	often	3	1	4
		8.6%	2.9%	11.4%
III	reading bible/praying			
	sometimes	7	7	14
		20.0%	20.0%	40.0%
	often	10	11	21
		28.6%	31.4%	60.0%
IV	reading/writing			
	never	3	4	7
		8.6%	11.4%	20.0%
	rarely	9	10	19
		25.7%	28.6%	54.3%
	sometimes	5	1	6
		14.3%	2.9%	17.1%
	often	0	3	3
		0.0%	8.6%	8.6%
V	engage in hobbies			
	never	1	1	2
		2.9%	2.9%	5.7%
	rarely	10	9	19
		28.6%	25.7%	54.3%
	sometimes	5	4	9
		14.3%	11.4%	25.7%
	often	1	4	5
		2.9%	11.4%	14.3%
VI	take travelling breaks			
	sometimes	11	12	23

		31.4%	34.3%	65.7%
	often	6	6	12
		17.1%	17.1%	34.3%
VI	go out for picnic etc			
	rarely	7	6	13
		20.0%	17.1%	37.1%
	sometimes	7	9	16
		20.0%	25.7%	45.7%
	often	3	3	6
		8.6%	8.6%	17.1%
VII	indulge in alcohol/substance abuse			
	rarely	0	1	1
		0.0%	2.9%	2.9%
	sometimes	3	0	3
		8.6%	0.0%	8.6%
	often	14	17	31
		40.0%	48.6%	88.6%
VIII	opt for sex/dating/romantic affairs			
	sometimes	2	7	9
		5.7%	20.0%	25.7%
	often	15	11	26
		42.9%	31.4%	74.3%
VIII	hit the gym			
	rarely	3	3	6
		8.6%	8.6%	17.1%
	often	14	15	29
		40.0%	42.9%	82.9%
IX	talking out with friends			
	never	3	4	7
		8.6%	11.4%	20.0%
	rarely	7	10	17
		20.0%	28.6%	48.6%
	sometimes	6	4	10
		17.1%	11.4%	28.6%
	often	1	0	1
		2.9%	0.0%	2.9%
X	seek guidance			
	sometimes	13	10	23
		37.1%	28.6%	65.7%

	often	4	8	12
		11.4%	22.9%	34.3%
XI	discuss with spouse			
	never	9	1	10
		25.7%	2.9%	28.6%
	rarely	7	8	15
		20.0%	22.9%	42.9%
	sometimes	1	3	4
		2.9%	8.6%	11.4%
	often	0	6	6
		0.0%	17.1%	17.1%
XII	vent through social media			
	never	2	0	2
		5.7%	0.0%	5.7%
	rarely	5	4	9
		14.3%	11.4%	25.7%
	sometimes	2	6	8
		5.7%	17.1%	22.9%
	often	8	8	16
		22.9%	22.9%	45.7%
XIII	others (specify)			
	never	4	4	8
		11.4%	11.4%	22.9%
	rarely	5	6	11
		14.3%	17.1%	31.4%
	sometimes	5	5	10
		14.3%	14.3%	28.6%
	often	3	3	6

4.13 Coping mechanisms by marital status

Table 4.13 shows respondents' strategies to cope with problems regarding work-life balance by marital status using t-test distribution. Coping strategies are categorized into fifteen (15) domains including activities like attend religious/church activities, participate in community activities, Reading Bible/Praying, Reading /Writing, engage in hobbies, take travelling breaks, go out for picnic etc., indulge in alcohol/substance abuse, opt for sex/dating/romantic affairs, hit the gym, talking out with friends, seek guidance, discuss with spouse and vent through social media

Among the respondents' mean scores, the majority (3.60) is 'reading bible/praying in which unmarried (3.61) are more than married (3.59).

In order to find out the relationship between marital status and coping strategies by applying t-test, hypothesis is derived as below:

H0: There is no relationship between coping strategies and marital status.

H1: There is a relationship between coping strategies and marital status.

Since the P value is less than 0.01, null hypothesis is rejected at 1% level with regards to seek guidance. Hence, there is a significant difference between married and unmarried with regards to seeking guidance as a means of coping strategy. Based on the mean scores, unmarried (3.44) are more than married respondents (3.24).

There is no significant difference between married and unmarried respondents with regards to all other coping strategies other than seeking guidance. Hence, the null hypothesis is accepted at 5% level with regards to coping strategies like attend religious/church activities, participate in community activities, Reading Bible/Praying, Reading /Writing, engage in hobbies, take travelling breaks, go out for picnic etc., indulge in alcohol/substance abuse, opt for sex/dating/romantic affairs, hit the gym, talking out with friends, discuss with spouse and vent through social media.

Therefore, the table reveals that among the domains of coping strategies, there is a significant difference between marital status of the respondents with seeking guidance. This could be because unmarried respondents have wider exposure to seek guidance from various source especially through the internet sources.

Table 4.13 Coping strategies by marital status

Coping strategies	Married		Unmarried		Total		t test	P value
	n=17		n=18		N=35			
	Mean	SD	Mean	SD	Mean	SD		
Attend religious/church activities	3.41	0.51	3.44	0.51	3.43	0.50	.190	.851
Participate in community activities	3.18	0.39	3.06	0.24	3.11	0.32	-1.111	.274
Reading bible/praying	3.59	0.51	3.61	0.50	3.60	0.50	.134	.894
Reading/writing	2.12	0.70	2.17	0.99	2.14	0.85	.169	.867
Engage in hobbies	2.18	0.64	2.11	0.47	2.14	0.55	-.347	.731
Take travelling breaks	1.24	0.44	1.28	0.46	1.26	0.44	.279	.782
Go out for picnic etc	2.41	0.87	2.22	1.00	2.31	0.93	-.596	.556
Indulge in alcohol/substance abuse	1.12	0.33	1.22	0.43	1.17	0.38	.804	.427
Opt for sex/dating/romantic affairs	1.18	0.39	1.39	0.50	1.29	0.46	1.389	.174
Hit the gym	1.00	0.00	1.00	0.00	1.00	0.00	-1.130	.266
Talking out with friends	2.29	0.85	2.00	0.69	2.14	0.77	1.297	.204
Seek guidance	3.24	0.44	3.44	0.51	3.34	0.48	4.388	.000

Discuss with spouse	1.53	0.62	2.78	1.00	2.17	1.04	.843	.405
Vent through social media	2.94	1.14	3.22	0.81	3.09	0.98	-.097	.924
Others (specify)	1.35	0.61	1.33	0.59	1.34	0.59	1.556	.129

Source: Computed

*p<0.05

**p<0.01

4.14 Correlation

Table 4.14 shows Pearson's Inter Correlation Matrix of work-related concerns, work-life balance, psychological well-being and coping strategies. The correlation coefficient between work-related concerns and coping strategies has a moderate positive correlation at 0.05 level with the P value at .402*.

This indicates that work related concerns are associated with coping strategies which shows that the nurses are finding ways and means to cope with their work-related problems and situations.

Table 4.14 Inter correlation matrix of WRC, WLB, PWB and coping strategies

S/N	Variables	1	2	3	4
1	Work related concerns	1			
2	Work-life balance	.099	1		
3	Psychological well-being	.320	.084	1	
4	Coping strategies	.402*	-.079	.129	1

*Correlation is significant at 0.05 level

4.15 Case study

A case study is a detailed study of a specific subject, such as a person, group, place, event, organization, or phenomenon. Case studies are commonly used in social, education, clinical, and business research.

A case study was conducted on a nurse from Christian Hospital Serkawn (CHS).

Case:

Name: Mrs. Mary (fictitious name)

Sex: Female

Age: 32

Marital status: Married

Type of family: Nuclear

Job status: Permanent

Husband's job status: Unemployed

Mrs. Mary, a nursing staff from Christian Hospital Serkawn, originally from Pukpui, Lunglei, she is now married and lives in Bazar Veng, Lunglei.

According to the information provided, Mrs. Mary's physical challenges is that she often works 12-hour shifts which takes a toll on the body, especially with repetitive tasks like lifting or assisting patients which affects her joint issues. Socially, she finds it tough to balance work

and personal life, with irregular and long working shifts, she is not able to spend as much time as she wants with her family and kids. Her husband also used to work as a nurse, but due to certain personal issues he quit and become a stay-at-home husband, taking care of their kids, especially one of their children who has Autism, who needs extra care. And professionally she sometimes finds it hard to keep up with the advancement of medical appliances.

Although she works most of the time, not having enough time with her kids, she never brings her mood from home to work or from work to home.

She said that although she did not develop strategies or routine to help manage work-life balance, she never mixes or let her personal life interfere her work life. She said that the best part of being a nurse is that she had a career which is cantered around helping other people who are in need, and the worst part is that she is not able to spend or take care of her children as much as she wants, and she needs to hire a nanny to take care of her house and her children due to her job. The opportunity to make a difference in people's lives every day, and providing for her family keeps her motivated and moving forward in life.

CHAPTER V

CONCLUSION AND SUGGESTIONS

This chapter discusses the findings and suggestion of the research, which are presented in sections and sub-sections.

5.1 Demographic profile of the respondents

The findings reveal that a little less than one third (37.1%) of the respondents are between 23 to 30 and 31 to 40 ages. Additionally, all the respondents (100.0%) are Christian. Almost all (71.4%) belong to the Baptist Church of Mizoram denomination.

5.2 Work Profile of the Respondents

Based on the findings, a little less than half (45.7%) attained education up to HSSLC. Regarding job status a little more than one third (34.3%) are permanent.

A little less than one third (28.6%) both serviced for less than 5 years and between 11 to 15 years. Less than half (40.0%) of the respondents' reason for work is passion for profession.

5.3 Marriage concerns of the Respondents

The findings shows that a little less than one fifth (17.1%) of the respondents have been married for less than 5 years. Around 31.4% of the respondent's husbands are older. A little more than one tenth (14.3%) of the respondent's education qualification of husband is graduate. A little less than half (40.0%) of the respondents' husbands is employed. Two fourth of (25.7%) of the respondents' husbands work government job.

5.4 Family Details of the Respondents

According to the findings, a little more than three fourth (77.1%) come from nuclear families. A little less than three fourth (74.3%) of the respondents owned their house. A little less than half (48.6%) have children between 1 to 5. Almost all (94.3%) have 1 to 5 earners in their family. A vast majority (80.0%) of the respondents have a number of 1 to 5 dependents. A little less than half (40.0%) of monthly household income is 37325-62272.

5.5 Work Related Matters of the Respondents-01

The findings of the study indicates that a little more than half (57.1%) duty/work for 3 to 5 days in a week. Three fifth (60.0%) of the respondents work for 7 to 10 hours in a week. A little more than half (54.3%) of the respondents mean of going to work is personal vehicle. Almost all (97.1%) of the respondents choose agreed that their workplace is equipped with washroom. A little more than half (57.1%) of the respondents agreed that their workplace washroom is moderately convenient for usage and safety.

5.6 Work Related Matters-02-Descriptive

More than half (57.1%) grievances are always addressed well and a vast majority (80.0%) are always punctual to work. A little more than half (51.4%) of the respondent's achievements/inputs are sometimes acknowledged by superiors, majority (74.3%) sometimes put in extra hours to work, and 65.7 percent sometimes experience stress at work. Almost half (48.6%) sometimes experience anxiety at work, a vast majority (80.0%) are always paid on

time, majority (65.7%) of the respondents always feel safe a woman at work place. More than half (57.1%) home mood/tensions affect their work mood/performance. A little less than half (40.0%) of the respondents work stress/tensions often affect their role/performance at home. 48.6 percent of the respondents never displace their anger/tension upon their children. 31.4 percent of the respondents work performance are often affected when their children are sick. A vast majority (85.7%) always pay their own lunch. 22.9 percent of the respondents are always concerned when work demands travelling.

5.7 Work-Life Balance-Descriptive

31.4 percent of the respondent moderately agreed that their job give them energy to pursue personal activities. 28.6 percent of the respondents slightly agreed and moderately agreed that their job makes their personal life difficult. One fifth (25.7%) of the respondents slightly and moderately agreed that they are in better mood because of personal life. A little less than half (40.0%) strongly disagreed that their work suffers because of their personal life. 25.7 percent slightly agree that they neglect personal needs because of work. A little less than one third (31.4%) of the respondent slightly agree that they find it hard to work because of personal matters. 31.4 percent of the respondent strongly agree that they miss personal activities because of work. 22.9 percent of the respondent slightly agreed that their personal life suffer because of work. Two fourth (25.7%) strongly disagree of being too tired to be effective at work. 34.3 percent of the respondent slightly agree to put personal life on hold for work. One fifth (25.7%) slightly agree that their personal life drains them of energy of work. A little less than one third (31.4%) slightly disagree to struggling to juggle work and non-work. 34.3 percent of the respondent slightly agree that their personal life gives them energy for job. A little less than one third (28.6%) moderately agree to be happy with the amount of time for non-work. 28.6 percent of the respondent slightly agree of being in a better mood because of their job.

5.8 Psychological Well-Beng- Descriptive

Based on the finding, 42.9 percent of the respondent slightly agree to be influenced by people with strong opinions. One third (37.1%) slightly agree that they are in charge of the situation in which they live. Majority (60.0%) of the respondent think that it's important to have new experiences that challenge how they think about themselves and the world. 28.6 percent of the respondent moderately agree that it is difficult and frustrating to maintain close relationship. 37.1 percent of the respondent strongly disagree to live one day at a time and do not really think about the future. 31.4 percent moderately agree to be pleased with how things have turned out in their life. Less than half (40.0%) moderately agree that they have confidence in their opinions even if they are contrary to the general consensus. 37.1 percent of the respondent slightly agree that the demand of everyday life often get them down. A little more than half (51.4%) strongly agree that life has been a continuous process of learning, changing, and growth. 34.3 percent of the respondent moderately agree that people would describe them as a giving person and who is willing to share time with others. One fourth (25.7%) slightly and strongly agree that they do not wonder aimlessly through life unlike other people. A little less than one third (28.6%) moderately agree in liking most aspects of their personality. A little more than one third (37.1%) of the respondent slightly agree that they judge themselves by what they think is important not by the values of what another think is important. A little more than half (51.4%) moderately

agree that they are quite good at managing the responsibilities of daily life. Less than one third (22.9%) moderately disagree on giving up to make big improvement or change in their life. A little less than one third (31.4%) of the respondent moderately disagree not experiencing many warm and trusting relationship with others. A little more than one third (37.1%) slightly disagree to feel as if they have done all there is to do in life. A little more than one third (34.3%) of the respondent slightly disagree on feeling disappointment about their achievement in life.

5.9 Coping Mechanisms

Based on the findings, more than half (57.1%) of the respondent attend religious/church activities to cope with their stress. Majority (88.6%) sometimes participate in community activities. Three fifth (60.0%) often read bible and pray to relieve their stress. A little more than half (54.3%) of the respondent rarely read or write to cope with their stress and problems. A little less than two third (65.7%) sometimes take travelling breaks. A little more than one third (37.1%) rarely go out for picnic. Majority (88.6%) rarely indulge in alcohol or substance abuse to cope with their stress. A little less than one fourth (24.3%) of the respondent never opt for sex, dating, or romantic affair in dealing with their stress. A vast majority (82.9%) rarely hit the gym. A little less than half (48.6%) rarely talk out with friends about their stress and problems. A little less than two third (65.7%) of the respondent sometimes seek guidance. Less than half (42.9%) rarely discuss with their spouse. 45.7 percent of the respondent often vent through social media. The remaining (31.4%) opted for other coping strategies.

5.2 Implications of the study

The study is not only beneficial for the nurses themselves but also for healthcare organizations and the patients they serve. By gaining a deeper understanding of the challenges nurses face in balancing their personal and professional lives, healthcare institutions can implement policies and practices that improve nurse well-being, reduce burnout, enhance job satisfaction, and ultimately improve patient care. In doing so, the study supports the creation of a more sustainable, effective, and compassionate healthcare system.

By identifying the factors that impact nurses' physical, mental, and emotional well-being, the study is essential for improving their welfare. In addition to improving nurse retention, healthcare organizations can establish more supportive policies and foster a more sustainable and healthy work environment by tackling issues such as stress, burnout, job satisfaction, and absenteeism. In the end, improved work-life balance benefits nurses' well-being and contributes to better patient care and a more effective healthcare system as a whole.

5.3 SUGGESTION

The following are suggestive measures to address the issue: -

1) Strategies that are active and grounded on research are necessary to improve work-life balance. Self-reflection is the first step in the process, which is followed by action. Many of the same factors that affect hospital nurses' well-being also entice them to the setting. However, nurses can acquire personal techniques to attain equilibrium and health. They will be able to continue responsibilities outside of the hospital that provide them joy and happiness with the use of this information as they become successful and productive at work. Effective WLB begins with acknowledging the need for change and making a commitment to it.

Research or study on the Work-Life Balance of Nurses is limited. Further research on strategies that can improve the work-life balance of nurses is crucial which can play an integral part for improving the welfare of healthcare workers.

Work-life balance issues may be alleviated through the implementation of flexible work schedules and collectivist teamwork techniques, increasing benefits and wages, as well as doing along with the "time-based job promotion" rule.

2) Provisions for safe and secure work place for nurses

Providing a safe and secure work environment is crucial for nurses' health, happiness, and well-being. Physical safety, emotional support, well-defined policies, and wellness initiatives are all components of a holistic strategy that creates a nurturing atmosphere in which nurses can flourish. Thus, in addition to providing nurses with benefits, a safer and more secure workplace also improves patient care quality, lowers employee turnover, and advances the general effectiveness and prosperity of healthcare institutions. If nurses' well-being is given priority, they will be able to continue to deliver high-quality care while preserving their own health and work-life balance.

3) Establishment of grievances and counselling centre for healthcare workers

Having a dedicated space or mechanism for grievances and counselling is essential for creating a safe, supportive, and effective work environment. A grievances and counselling centre place refers to a designated system, space, or service where nurses and other healthcare workers can express concerns, seek support, and receive guidance regarding personal or professional challenges they may be facing at work. These services can help address conflicts, emotional stress, mental health issues, and any workplace-related problems that affect the well-being and performance of healthcare staff.

4) Mental health campaign for the improvement of mental health at work place:

A mental health campaign in the workplace is a proactive and necessary step toward creating a supportive environment that promotes the well-being of all employees, particularly those in high-stress roles such as healthcare workers. By raising awareness, reducing stigma, and providing tools, resources, and strategies for improving mental health, such a campaign can not only improve the well-being of individual staff members but also enhance team performance, retention, and overall workplace culture. Mental health support is essential for long-term success, both for staff and the patients they care for.

5.4 CONCLUSION

The hours that nurses work is a crucial component of the healthcare system, affecting not only patient outcomes but also the health and happiness of the nurses. Providing nurses with fair working hours, sufficient staffing, and adequate support can enhance patient care, boost job satisfaction, and create a more viable healthcare workforce. Balancing work hours extends beyond mere efficiency; it focuses on fostering a healthy and supportive environment where both nurses and patients can flourish.

Managing the balance between work and personal life is a considerable challenge for many nurses, as factors like extended hours, emotional pressure, physical demands, and limited

time for personal activities all add to the burden. To tackle these issues, systemic changes within healthcare organizations are essential, including appropriate staffing levels, improved work scheduling, access to mental health resources, and opportunities for rest and recovery. Nurses require a nurturing work environment and a healthy balance between work and life to sustain their physical, emotional, and mental health. When nurses receive support in both their professional roles and personal lives, they are able to deliver higher quality care to their patients and enjoy fulfilling careers.

Therefore, nurses often seek guidance to cope with their stress, problems, life challenges, and the many responsibilities and demands of everyday life.

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WORK-LIFE BALANCE AMONG NURSES IN LUNGLEI TOWN, LUNGLEI

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(Dear respondent, kindly offer your valuable time for this questionnaire. This is purely academic, confidential and for research purpose only. Thanking you with anticipation)

Date:

Place:

Section – I: Profile of the respondent

Personal details

1	Age	
2	Marital status	1. Unmarried <input type="checkbox"/> 2. Married <input type="checkbox"/> 3. Divorced <input type="checkbox"/> 4. Single parent <input type="checkbox"/>
3	Religion	1. Christian <input type="checkbox"/> 2. Hindu <input type="checkbox"/> 3. Muslim <input type="checkbox"/> 4. Others <input type="checkbox"/>
4	Denomination	1. Baptist <input type="checkbox"/> 2. Presbyterian <input type="checkbox"/> 3. Salvation Army <input type="checkbox"/> 4. UPC (NE) <input type="checkbox"/> 5. UPC (MZ) <input type="checkbox"/> 6. Seventh Day Adventist <input type="checkbox"/> 7. Others <input type="checkbox"/>
5	Educational qualification	1. Below HSLC <input type="checkbox"/> 2. HSLC <input type="checkbox"/> 3. HSSLC <input type="checkbox"/> 4. Graduate <input type="checkbox"/> 5. Post Graduate <input type="checkbox"/>
6	Job status	1. Permanent <input type="checkbox"/> 2. Contract <input type="checkbox"/> 3. Casual <input type="checkbox"/> 4. Substitute <input type="checkbox"/>
7	Years of service	1. Less than 5 years <input type="checkbox"/> 2. 5-10 years <input type="checkbox"/> 3. 11- 15 years <input type="checkbox"/> 4. 16 – 20 years <input type="checkbox"/> 5. More than 20 years <input type="checkbox"/>
8	Reason for work	1. Support family <input type="checkbox"/> 2. Economic independence <input type="checkbox"/> 3. Career opportunity <input type="checkbox"/> 4. Passion for profession <input type="checkbox"/> 5. Others (Please specify) _____
<i>Marriage concerns (Only for married respondents)</i>		
9	Duration of marriage	1. Less than 5 years <input type="checkbox"/> 2. 5-10 years <input type="checkbox"/> 3. 11- 15 years <input type="checkbox"/> 4. 16 – 20 years <input type="checkbox"/> 5. More than 20 years <input type="checkbox"/>
10	Who is older?	1. Husband <input type="checkbox"/> 2. Self <input type="checkbox"/>

11	Educational qualification of husband	1. Below HSLC <input type="checkbox"/> 2. HSLC <input type="checkbox"/> 3. HSSLC <input type="checkbox"/> 4. Graduate <input type="checkbox"/> 5. Post Graduate <input type="checkbox"/>
12	Employment status of husband	1. Employed <input type="checkbox"/> 2. Unemployed <input type="checkbox"/>
13	If employed, job setting of husband	1. Government <input type="checkbox"/> 2. Semi Govt. <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Church <input type="checkbox"/> 5. Self employed <input type="checkbox"/>

Family details

16	Type of family	1. Nuclear <input type="checkbox"/> 2. Joint <input type="checkbox"/>
17	Ownership of house	1. Owned <input type="checkbox"/> 2. Rent <input type="checkbox"/> 3. Others <input type="checkbox"/>
18	Number of family members	
19	Number of children	
20	Number of earners	
22	Number of dependents	
23	Average family monthly income	1. Below ₹12,444 <input type="checkbox"/> 2. ₹12,445 – ₹37,324 <input type="checkbox"/> 3. ₹37,325 – ₹62,272 <input type="checkbox"/> 4. ₹62,273 - ₹93,380 <input type="checkbox"/> 5. ₹93,381 – ₹1,24,488 <input type="checkbox"/> 6. ₹1,24,489 - ₹2,49,043 <input type="checkbox"/> 7. Above ₹2,49,044 <input type="checkbox"/>

Section – II: Work related matters

1	How many days in a week is your duty/work shift?	
2	What is your working hour?	
3	What is your means of going to work	1. Personal vehicle <input type="checkbox"/> 2. Public transpd <input type="checkbox"/> 3. Colleague's vehicles <input type="checkbox"/> 4. By foot <input type="checkbox"/>
4	Is your workplace equipped with washroom or toilet facility?	1 Yes <input type="checkbox"/> 2. No <input type="checkbox"/>
5	How convenient is it for your safety and usage?	1 Excellent <input type="checkbox"/> 2 Moderate <input type="checkbox"/> 3 Poor <input type="checkbox"/> 4. Very poor <input type="checkbox"/>

Please rate your opinions in matters concerning to work by indicating a tick (✓) mark as where appropriate

S/N	Statements	Always	Sometimes	Often	Never
1	Are your grievances addressed well?	1	2	3	4
2	Are you punctual to work?	1	2	3	4
3	Are your achievement/inputs acknowledged by your superiors?	1	2	3	4
4	Did you put in extra hours of work?	1	2	3	4
5	Did you experience stress at work?	1	2	3	4
6	Did you experience anxiety at work?	1	2	3	4
7	Did you experience discrimination or abuse at work place?	1	2	3	4
8	Are you paid on time?	1	2	3	4
9	How concerns are you about your safety as women at workplace?	1	2	3	4
10	How are home stress/tensions affecting your mood/performance at work place?	1	2	3	4
11	How is work stress/tensions affect your mood/roles at home	1	2	3	4
12	When work stress our/ tensions rises, did you happen to displace your anger upon your children?	1	2	3	4
13	When your children are sick, how does it affect your performance at work?	1	2	3	4
14	Did you pay your own lunch?	1	2	3	4
15	When work demands travelling, how concerned are you?	1	2	3	4

Section – III: Work-life balance

Please rate your work-life balance by indicating a tick (✓) mark from the statements that are most appropriate to you

S/N	Statements	Strongly disagree	Moderately disagree	Slightly disagree	Slightly agree	Moderately agree	Strongly agree
1	My job gives me energy to pursue personal activities	1	2	3	4	5	6
2	My job makes personal life difficult	1	2	3	4	5	6

3	I am in a better mood at work because of personal life	1	2	3	4	5	6
4	My work suffers because of my personal life	1	2	3	4	5	6
5	I neglect personal needs because of work	1	2	3	4	5	6
6	I find it hard to work because of personal matters	1	2	3	4	5	6
7	I miss personal activities because of work	1	2	3	4	5	6
8	My personal life suffers because of work	1	2	3	4	5	6
9	I am too tired to be effective at work	1	2	3	4	5	6
10	I put personal life on hold for work	1	2	3	4	5	6
11	My personal life drains me of energy for work	1	2	3	4	5	6
12	I struggle to juggle work and non-work	1	2	3	4	5	6
13	Personal life gives me energy for my job	1	2	3	4	5	6
14	I am happy with the amount of time for non-work activities	1	2	3	4	5	6
15	I am in a better mood because of my job	1	2	3	4	5	6

Section – IV: Psychological well-being

Please rate your psychological well-being by indicating a tick (✓) mark from the statements that are most appropriate to you

S/N	Statements	Strongly disagree	Moderately disagree	Slightly disagree	Slightly agree	Moderately agree	Strongly agree
1	I tend to be influenced by people with strong opinions	1	2	3	4	5	6
2	In general, I feel I am in charge of the situation in which I live	1	2	3	4	5	6
3	I think it is important to have new experiences that challenge how you think about yourself and the world	1	2	3	4	5	6
4	Maintaining close relationships has been difficult and frustrating for me	1	2	3	4	5	6
5	I live life one day at a time and do not really think about the future	1	2	3	4	5	6
6	When I look at the story of my life, I am pleased with how things have turned out	1	2	3	4	5	6
7	I have confidence in my opinions, even if they are contrary to the general consensus	1	2	3	4	5	6
8	The demands of everyday life often get me down	1	2	3	4	5	6

9	For me, life has been a continuous process of learning, changing and growth	1	2	3	4	5	6
10	People would describe me as a giving person, willing to share my time with others	1	2	3	4	5	6
11	Some people wonder aimlessly through life, but I am not one of them	1	2	3	4	5	6
12	I like most aspects of my personality	1	2	3	4	5	6
13	I judge myself by what I think is important, not by the values of what others think is important	1	2	3	4	5	6
14	I am quite good at managing the many responsibilities of my daily life	1	2	3	4	5	6
15	I give up trying to make a big improvement or change in my life a long time ago	1	2	3	4	5	6
16	I have not experienced many warm and trusting relationships with others	1	2	3	4	5	6
17	I sometimes feel as if I have done all there is to do in life	1	2	3	4	5	6
18	In many ways, I feel disappointed about my achievements in life	1	2	3	4	5	6

Section V- Coping mechanisms

Please rate your coping strategies to maintain positive work-life balance

S/N	Activities for coping	Often	Sometimes	Rarely	Never
1	Attend religion/church activities	1	2	3	4
2	Participate in community activities	1	2	3	4
3	Reading Bible/Praying	1	2	3	4
4	Reading /Writing	1	2	3	4
5	Engage in hobbies	1	2	3	4
6	Take travelling breaks	1	2	3	4
7	Go out for picnic etc	1	2	3	4
8	Indulge in alcohol/substance abuse	1	2	3	4
9	Opt for sex/dating/romantic affairs	1	2	3	4
10	Hit the gym	1	2	3	4
11	Talking out with friends	1	2	3	4
12	Seek guidance	1	2	3	4
13	Discuss with spouse	1	2	3	4

14	Vent through social media	1	2	3	4
15	Others (specify)	1	2	3	4

THANK YOU