The Influences of work support and family support on Work-Family Conflict (W-FC) Among Married Female Nurses in Shiraz-Iran

Hajar Namayandeh¹, Siti Nor Yaacob ¹, Rumaya Juhari ¹

¹ Faculty of Human Ecology, University Putra Malaysia
h_nemayandeh@yahoo.com

Abstract: The present study highlights the significance of work support (supervisor and coworker support) on work-family conflict. Furthermore, this paper also examines the effects of family support (husband and family members/relatives support) on work-family conflict. This study examines 198 married female nurses in Shiraz-Iran. The findings revealed that low support received from husband, family members/relatives and supervisor might increase perceived conflict between work and family. Unlike previous studies, the finding also indicates that there is no significant relationship between the respondents’ support from co-worker with work-family conflict, which may be explained by the specific cultural context in Iran. Implications are discussed and recommendations are made regarding future researches in this area.

Keywords: Work- family conflict, Work support, Family support

1. Introduction:

The rise in women’s participation in the workforce has introduced new challenges for most families (Davidson & Burke, 2004). Families in which both husband and wife work are more likely to create even more important conflicts between work and family (Livingston & Judge, 2008). In such families employed women have higher combined pressures from work and family responsibilities that lead them to experience work-family conflict (Pleck, 1977; Rexroat & Shehan, 1987). Based on this situation, scientists dedicated many investigations on this issue. However, according to Karimi (2008), more than 80% of investigations in this domain have been carried out in developed western society and very few comprehensive studies have been conducted in developing countries such as Iran. The results of the studies in developed countries are not necessarily interpretable in developing countries due to different cultural beliefs and practices (Grzywacz et al., 2007; Aryee 1992).

The participation of women in the workplace has increased in Iran. Statistics from 1956 to 1986 showed that about 9% of women in Iran were employed (Moayedi, 1994). The reported statistics for 2004 further revealed that 79.5% of women were employed (Statistical Bureau of Iran, 2004). Although women are working out of the home in Iran today, the structure of traditional way of thought about domestic works does not change much. Iranian women who already have a traditional role as housewives have to assume additional responsibility as an employee out of the home (Rastegarkhaled, 2004).

Nurses, like other female employees are faced with the demands of work and home responsibilities as their main daily tasks. According to Ministry of Health, nurses in Iran are mainly women. As of 2009, it was reported that 79.5% of Iranian nurses are female (ISNA, 2009). Nurses basically have to work in critical situation that includes dealing with high workloads and time pressures, number of hours worked, shift work, death and life situation, and stressful and demanding responsibilities. These situations have been denoted as the major issues in the nature of nurses’ job (Adibhajbagheri, Mehnosh & Fazlallah, 2004).

Working outside and inside the house has formed two of the most central domains in women’s life, each containing its own duties. According to Pleck (1977) work and family are two fundamental and interdependent systems for dual-career live that inconsistency in any one system may consequently influence the other one as well. This construct
represents conflict, namely, work interference with family (WIF). Accordingly, work-family conflict (W-FC) can be defined as the amount of conflict an individual experiences between her job or career and home-life (Mirrashidi, 1999).

The present study focuses on the role of social support in two dominant spheres of our lives, work and family. Studies of social support within the family and work could be relevant to the system theory. Both work and family could be classified into two subsystems. In the current investigation, the subsystem of work includes supervisor and co-workers support and subsystem of the family includes husband and family members/relatives support. Each of these subsystems might emotionally and/or instrumentally support the individual. This may suggests that support from each subsystem may influence other system. The present study aimed to consider the relationships between work support (supervisor and co-workers) and family support (husband and family members/relatives) with W-FC among nurses in the developing country with specific culture like Iran.

2. Social Support
Social support involves the exchange of resources between at least two persons, with the aim of helping the person who receives the support (House, 1981). For employed individuals, source of social support can be from work and family context. Social support can also be discussed in terms of emotional support (love, empathy, trust, concern) and instrumental support (time, money, goods, and services) (House, 1981). Further, two dimensions of social support sources have been identified: work support and family support. Both work and family setting may provide individuals with emotional and instrumental support.

3. Work support and W-FC
Social support at work can be derived from supervisor and co-worker. Previous studies successfully demonstrated relationship between social support and work interference with family. According to Yildirim and Aycan (2008) supervisory support included both instrumental and emotional supports. Instrumental support implied providing assistance and advice whereas emotional support referred to supervisor’s emphatic understanding and sensitivity to work-family issue. Yildirim and Aycan found that social support could be best conceptualized as the main effect directly influencing work-family conflict among nurses in Turkey. Ahmad (1997) investigated the relationship between perceived support from supervisors, co-workers, and spouse, family and friends and work-family conflict among 239 married female production operators. The results showed that about two third of the operators experienced moderate to high intensities of conflict. In general, the operators received less support from their supervisors and they stated that if they received support from their supervisors, they may experienced less conflict.

In a different study, Thomas and Ganster (1995) examined the effects of supportive supervisors on work-family conflict. The respondents of study were 398 health professionals who had children aged 16 years or younger. The finding by Thomas and Ganster indicated a direct positive effect of supportive supervisors on employee perceptions of control over work and family matters. Control perceptions, in turn, were associated with lower levels of work-family conflict. The research study by Rastegarkhaled (2004) also found significant relationship between support from work and family with work-family conflict. The finding suggested that supportive supervisor provide more support for employee and this may reduce the conflict experienced by employees in their occupation and family environment.

Prominent among the sources of support from work is co-worker support. Michael et al. (2004) investigated on work-family conflict and social support received by the respondents from work colleagues and family members. Their research showed that colleagues support reduced work interference with family sphere. Furthermore, Payamibosari (1995) concluded that support from co-worker is effective in reducing the work-family conflict of nurses in one of the hospital in Tehran. In contrast, the study by Kirrane and Buckley (2004) indicated that support of co-workers and supervisors at the workplace did not influence work-family conflict among 170 Irish working cohorts. The insignificant relationship may be due to the belief that after having a young child (6 years of age), the spouse-partner instrumental support becomes more important in determining W-FC.

4. Family Support and W-FC
Social support can be derived from husband and the family members/relatives. Past studies showed that family support functions to ameliorate work-family conflict. The study by Kim and Ling
(2001) indicated that if men provide greater support in terms of household chores and childcare, work-family conflict would not be a major problem for working women. However, this study indicated that spouse support plays an important role in reducing work-family conflict. Spouse emotional support has the greatest influence in reducing the level of work-family conflict among Singapore women. In another study, Aryee (1992) examined the impact of some antecedents of work and family domain variables on three types of work-family conflict (job-spouse, job-parent, and job-homemaker) among 354 married professional women from dual-career families in Singapore. Results indicated that spouse support reduces work-family conflict for these professional women.

Likewise, Thomas and Ganster (1995) reported that emotional support from one’s partner in a dual earner relationship reduces the negative effects of work on family life among 398 health professionals who had children aged 16 years or younger at home. The results of this study suggested that organizations could take steps that can increase employees' control over family responsibilities and that this control might help employees better manage conflicting demands of work and family life. According to Chee (1997) respondents did not experience much work-family conflict primarily because they received a lot of support from their spouses. The above findings contradict the study by Aryee et al. (1999). Aryee et al. examined the relationship between role stressors, interrole conflict, and wellbeing and the moderating influences of spousal support and coping behaviours. The respondents were 243 Hong Kong Chinese parents from dual-earner families. The results of the study revealed that spousal support was unrelated to work-family conflict.

Another important source of family support is support from family members/relatives. According to an investigation by Rastegarkhaled (2004), family support for women could lead to lower level of work-family conflict experience among working women. Michael et al. (2004) investigated work-family conflict in relationship to the role of social support from work colleagues and family members. Their result indicated that family support was significantly correlated with work-family conflict. Those with higher family support tend to experience lower W-FC. The study by Carlson and Perrewé (1999) examined the role of social support in work-family conflict. The respondents of study were 403 from a department of a state government in the southeast. Their result indicated that family support was negatively associated with work-family conflict. Support from one’s partner in a dual earner relationship reduces the negative effects of work on family life.

5. Methodology
The main objective of this study is to determine the relationship between work support (supervisor and co-workers), family support (husband and family members/relatives) and W-FC, among married female nurses in Shiraz-Iran. The population of the study consists of N = 647 married female nurses in 13 public hospitals in Shiraz. There were four criterias established for the selection of the population of this research; firstly, married female nurses who work for public hospital; secondly, the married female nurses who live together with their husbands; thirdly, nurses who have a minimum of 6 months job experience and have at least one child.

The method of data collection used was self-administered questionnaire and the study is correlation in nature. The respondents were selected by using simple random sampling technique. Initially, the identified and eligible sample size for the study was 323 respondents. Out of the total questionnaire distributed to the eligible respondents, only 198 (61.30%) questionnaires were returned. Pilot study was conducted before the actual data collection to assess the adequacy of the questionnaire. In the present study, the Cronbach’s Alpha for all measures used is mostly more than 0.70 indicating that the instruments are reliable to be used.

6. Measures

6.1 Work Family Conflict (W-FC)
Work-family conflict was measured by using work-family conflict and family-work conflict scale developed by Netemeyer, Boles, and McMurrian (1996). The scale consisted of 2 subscales: W-FC and F-WC. Each subscales consisted of 5 items. In this study W-FC subscale was used. Responses were obtained using a seven point Likert type scale where 1= strongly disagree, 2= disagree, 3= slightly disagree, 4= neutral, 5= slightly agree, 6= agree and 7= strongly agree. A sample item from this scale is “The amount of time my job takes up makes it difficult to fulfill family responsibilities”. The scale scores range from 5 to 35, with high score indicates a high level of perceived...
conflict between work and family and low score will indicate a low level of perceived conflict between work and family. The Cronbach’s Alpha estimate in the present study for work-family conflict scale is .86.

6.2 Social Support: Work Support, Family Support

Social support from the work and from family was measured by using social support scale developed by Caplan, Cobb, French Jr, Harrison, and Pinneau Jr (1975) with minor adaption. The scale consisted 4 items related to emotional support (the extent to which the sources of support will help, how easy to talk to the sources of support about your personal problems) and instrumental support (sources of support include things easier and can be relied on). This measure has been widely used and has remained one of the most established scales used to measure social support in a job (Lim, 1996). One new item was added to respondents’ satisfaction with the support received from sources of support. Altogether, 5 items was used to measure support from:
1. Husband
2. Family members / relatives
3. Supervisor
4. Co-workers

The item were answered on a 4 point likert-type scale option from 0 = not at all, 1 = a little, 2 = somewhat and 3 = very much for the four items, while the score for additional item range from 0 = very dissatisfied, 1 = dissatisfied, 2 = satisfied and 3 = very satisfied. The scores for each source of support range from 0 to 15. High scores show that respondents perceived high support from each source of social support. The Cronbach’s Alpha estimates for social support in the present study are husband (.89), family members/relatives (.88), co-worker (.83) and supervisor (.83).

7. Results and Discussion

7.1 Descriptive Statistics

Table 1 presents descriptive data that includes mean, standard deviations, minimum and maximum scores of all variables of the study. The finding of this study shows that most of the participants (56.1%) are below 36.50 years old. More than half of the respondents (56.1%) have been married for less than 11.68 years. Moreover, more than half of the respondents (56.6%) have less than 12.49 years job experience.

Figure 1 presents categories of the scores for all variables of the study. The finding shows that most of the respondents received high support from husbands and family members/relatives while large proportion of respondents received moderate and low level of supervisors and co-worker support. Respondents’ total scores in W-FC are illustrated in Figure 1. A large proportion of the respondents perceived moderate and high level of work-family conflict. The remaining respondents have low level of work-family conflict.

Table 1: Descriptive Statistics

<table>
<thead>
<tr>
<th>Variables</th>
<th>Min</th>
<th>Max</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (Years)</td>
<td>23</td>
<td>59</td>
<td>36.50</td>
<td>7.15</td>
</tr>
<tr>
<td>Job Experience</td>
<td>1</td>
<td>30</td>
<td>12.49</td>
<td>6.86</td>
</tr>
<tr>
<td>Duration of Marriage</td>
<td>1.90</td>
<td>40</td>
<td>11.68</td>
<td>7.55</td>
</tr>
<tr>
<td>Work-family conflict</td>
<td>8.00</td>
<td>35.00</td>
<td>24.36</td>
<td>6.51</td>
</tr>
<tr>
<td>Support from husband</td>
<td>0.00</td>
<td>15.00</td>
<td>9.42</td>
<td>4.10</td>
</tr>
<tr>
<td>Family members/relatives’ support</td>
<td>0.00</td>
<td>15.00</td>
<td>9.00</td>
<td>4.20</td>
</tr>
<tr>
<td>Co-worker’ support</td>
<td>0.00</td>
<td>15.00</td>
<td>6.53</td>
<td>3.55</td>
</tr>
<tr>
<td>Supervisor’ support</td>
<td>0.00</td>
<td>15.00</td>
<td>5.89</td>
<td>3.79</td>
</tr>
</tbody>
</table>

7.2 Hypotheses Testing

Ho1: There is no significant relationship between respondents’ support from supervisor and W-FC.

The finding from Pearson Correlation analyses showed a significant negative relationship between the respondents’ support from supervisor with W-FC ($r = -0.143$, p<.05). Hence Ho1 was rejected. The finding indicates that decreasing support from supervisor is associated with increasing W-FC. The finding is consistent with findings of past studies by Yildirim and Aycan (2008), Rastegarkhaled (2004) and Ahmad (1997), which have successfully recognized that supervisory support...
could be best conceptualized as having effect on W-FC. Considering the available evidence, it appears that support from supervisor in work will influence respondents’ life with family. Married female nurses require supervisors to provide enabling conditions at the hospital to minimize work interference with family responsibilities.

**Ho2:** There is no significant relationship between respondents’ support from co-worker and W-FC.

The finding indicated that there was no significant relationship between the respondents’ support from co-worker with W-FC ($r = .071, p > .05$). Hence Ho4 was failed to be rejected. This direction of relationship is consistent with finding of past study by Kirrane and Buckley (2004) that reported co-workers did not influence W-FC among 170 Irish working adults. In contrast, Payamibosari (1995) concluded that support from co-worker is the more effective support reducing the W-FC of nurses in one of the hospital in Tehran. Furthermore, Michael, Brough, and Kalliath (2004) showed that colleague support could reduce the consequences of work interference with family in some situations. It should be mentioned that despite the lack of significant relationship between the respondents’ support from co-worker with W-FC there was discrepancy in regard to two variables. One possible explanation for this result may be due to difficult conditions of work in hospital, support from co-worker is not common among nurses in these hospitals. According to Adibhajbagheri, Mehnosh and Fazlallah (2004) feeling of lack cohesion among nurses create an atmosphere of lack of support and mutual trust between them.

**Ho3:** There is no significant relationship between respondents’ support from husband and W-FC.

The finding showed a significant negative relationship between the respondents’ support from husband and W-FC ($r = -.183, p < .05$). Hence Ho4 was rejected. The finding indicates that increasing support from husband is associated with decreasing W-FC. This direction of relationship is consistent with findings of past studies by Michael, Brough, and Kalliath (2004) and Carlson and Perrewé (1999) who found that respondents who received higher family support experienced less conflict between work and family. The present finding also support Rastegarkhaled’s (2004) study which concluded that family support reduce W-FC. Considering the available evidence, it appears that respondents’ support from family members/relatives has consistently been shown to be the most significant antecedent of W-FC. Based on this finding, it would be of interest to elucidate that support from husband in family would influence work. Respondents need the husband support to provide enabling conditions at home to minimize the interference of work with family responsibilities.

**Ho4:** There is no significant relationship between respondents’ support from family members/relatives and W-FC.

The finding from Pearson Correlation analyses showed a significant negative relationship between the respondents’ support from family members/relatives and W-FC ($r = -.198, p < .01$). Hence Ho1 was rejected. The finding indicates that increasing support from family members/relatives is associated with decreasing W-FC. This direction of relationship is consistent with findings of past studies by Michael, Brough, and Kalliath (2004) and Carlson and Perrewé (1999) who found that respondents who received higher family support experienced less conflict between work and family. The present finding also support Rastegarkhaled’s (2004) study which concluded that family support reduce W-FC. Considering the available evidence, it appears that respondents’ support from family members/relatives has consistently been shown to be the most significant antecedent of W-FC. Based on this finding, support from family members/relatives in family will influence work. Respondents’ need the family members/relatives support to provide enabling conditions at home to minimize the interference of work with family responsibilities.

8. Conclusion and implication

In conclusion, results from the present study suggest that low support received from husband, family members/relatives and supervisor might increase perceived conflict between work and family. Establishing and reinforcing family support policies that include emotional family support and sharing of household chores can be effective in balancing cohesion and adaptability among family members. Consequently, balance in cohesion and adaptability in family could affect work positively and hence reduce W-FC. In addition, according to Adibhajbagheri, Mehnosh, and Fazlallah (2004), difficult work condition in hospital has increased feelings a lack of support and cohesion among nurses in Iran.
Therefore, administering work support policies (e.g. child care and elder care services, flexible working schedules and welfare of nurses) may result in higher work satisfaction and motivation among nurses; and ultimately culminated a sense of cohesion and closeness among them. Hence, these policies might help working women manage the demands from work and family domain, and consequently reduces the W-FC.

9. Recommendations for Future Study

There are several recommendations and limitations that have been identified throughout this study, which may direct future studies. Primarily, having a low response rate and relying on one city for data collection limit the generalizability of the findings. Also, findings cannot be attributed to nurses of private hospitals. Accordingly, the results are not generalizable to the entire nurse population in Iran. Assessing the variables of the model across gender would contribute to the generalizability of the results. This study also needs to be replicated with a more heterogeneous population such as other ethnic groups, religions, occupational variations and different cultural values. More studies of this nature should be conducted especially among women in Middle Eastern countries. Finally, this study used a self-report measure (questionnaire). Thus, future researches can use combined methods of data collection to strengthen and enrich the findings.

References


9/10/2010