

Effect of Nurse's Personal Income on Work-family Conflict Amongst Nurses in Selected Hospitals within Nairobi Metropolitan Area, Kenya

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Abstract

Globally, work-family conflict as studied by researchers all over the world from different disciplines is presented as a societal concern. The purpose of this research was to assess the effect of nurse's personal income on work and family conflict amongst nurses working in hospitals within Nairobi metropolitan area in Kenya. This study was based on role and conservation of resource theory. The study used descriptive mixed method research design. The population of study was 273 nurses. Choosing of facilities was through purposive sampling according to location and readiness to take part in the study, number of nurses and various services provided, while choosing nurses within the hospital was through stratified random sampling due to different cadres of nurses. A semi structured questionnaire was used to collect both qualitative and quantitative data from the nurses. An interview schedule was used to collect data from directors of nursing services. Quantitative data was analyzed in tables that generated descriptive statistics. Less than 50% of the nurses affirmed that the income has caused conflicts with the family at any point, while 93.5% says salary is not enough for sustaining the family. This means nurses personal income was enough only for the basics. Major categories included: Remuneration challenges (financial constraints and lack of remuneration), and secondly effects of inadequate salary (entrepreneurial opportunities and financial management). The study recommends integration of role theory and conservation of resource theory in reducing negative effect of nurse's income with work-family conflict. The study also recommends the role played by the organization in reviewing nurses' salary with a clear policy well understood, effective communication, and training on entrepreneur and management of funds. Overtime allowance to be incorporated as this will motivate nurses and minimize nurse turnover. Family support and understanding to save and do less stressful business that will enable quality family time.

Keywords: *Nurses, personal income, work-family conflict, financial constraints, job turnover*

1.0 Introduction

Work-family conflict is becoming an issue of concern in the current generation. “Work-family conflict is a growing challenge for modern society, as a vast majority of men and women report that work interferes with their family responsibilities” (Glavin & Schieman, 2012, p74). Work-family conflict is growing due to increase in working mothers with young children and men involvement with caregiving at home, and lastly due to technology that has kept people constantly connected to work and family concerns on 24hour basis (Kossek, 2016). Moreover, due to the high cost of living couples are both forced to work to improve the standard living of the family.

According to Kahn et al (1964), work-family conflict is a form of inter-role conflict in which role pressure from work and family domains are incompatible in some ways. This means participation in one role makes it difficult to participate in another role. Work-family conflict is a form of inter-role conflict that occurs when the energy, time, or behavioural demands of the work role conflicts with those of the family role (Greenhaus & Beutell, 1985). Nursing is one of the profession that experience relatively high level of work-family conflict. As reported by Aiken, et al (2011), approximately 30-60% of nurses in Germany experienced some high levels of burnout which may affect their work outcomes. In Kenya, nurses form approximately 69,1% of health care workers and are responsible for up to 90% of health care services (Kenya Survey Data Index, 2019).

Nursing faces high workloads and demanding schedules (Mullen, 2016, p.97). The demands and expectations (working long hours, lack of compensation) often conflict with those of the family (sudden illness of a family member, family roles, and financial constrains). Several studies have explored how the work that nurses do contribute to work family conflict (Lembrechts et al. 2015; Amstad et al. 2011 & Graham, 2017), but studies are yet to explore how the nurse’s income contribute to their work family conflict. Income is, strongly and positively, associated with healthy lifestyles as individuals' standard of living is raised (Rehnberg & Fritzell, 2016). Thus, pay is among some of the

factors that courses work-family conflict especially for nurses who are not satisfied as they are faced with financial constraints.

Furthermore, nurses are sometimes required to work extra hours, which may take up their personal time and energy. (Delecta 2011, p 186-188). This is due to costly living and increased family needs. This may lead to burnout, and eventually physical and mental fatigue, lack of quality family time and marital conflict. Depending on the amount of work-load, work-family conflict may increase (Ollier-Malaterre, 2016). Friendly working environment for nurses enable them meet their goals.

Work family policies are good as they foster positive engagement in work “Work-family policies and practices are adopted by employers and governments to help employees jointly manage work and non-work roles; enable successful participation in labour market activity, family and personal life; and enhance quality of life” (Kossek 2005,p66). Furthermore, study done by van Rijswijk et al, 2004), showed that use of some friendly practices decreased work –family conflict.

In Kenya, the role of nurses cannot be ignored as nursing is a key component in the sustainable Development Goals (SDGs) and Big 4 Agenda whereby all are pegged on quality of healthcare towards the realization of health goals enshrined in Kenya’s vision 2030. (Kenya Health Policy [KHP] 2012-2030). Therefore, nurse’s issues need to be addressed as this promotes nurses well-being. In addition, nurses need to be encouraged constantly with both verbal praises and financial incentives so that they can be motivated and do better. Some studies in Kenyan hospitals according to Ojaka et al 2015 & Goetz et al, 2015, have revealed dissatisfaction among Kenyan nurses on distribution of remuneration, working environment and hospital resources.

This study therefore looks at some of the effects of nurse’s personal income on work-family conflict amongst nurses in selected hospitals within Nairobi Metropolitan Area, Kenya to establish a link between nurse’s personal income, family and work relationship which may affect productivity and roles played for a better outcome both at work and at

home domain.⁴ Consequently, the realization will enable some nurses who may feel their income is not able to enable them live up to a certain standard and meet family needs. In addition, nurses will seek counselling services wherever there is need to and be able to balance.

2.0 Literature Review

The demanding nature of nursing, role of the nurse, structure of the organization, family concerns, fears are some of the stress experienced by nurses. (Al Azzam et al. 2017). This affects nurse's performance and commitment especially depending on the kind of motivation they get. According to the study done by Mbuthia et al. (2017), nurses felt that decision to leave workplace was due to feeling not appreciated, lack of professional development opportunities and poor remuneration. This is an indication that nurses will keep on seeking for better opportunities of earning more income so that they can meet family's financial demands to reduce financial constraints.

Theories that applied to this research were role theory (RT) and conservation of resource theory (COR). According to Allen (2001), Role Theory (RT) was developed by Herbert Mead and Talcott Parsons in 1920, and it provides a prediction that many responsibilities in life can cause individuals to experience inter-role conflict difficulties in performing their roles well due to conflicting demands. According to Van der Lippe (2007, p395). "The work and family domains refer to workplace activity and family engagement and leisure as well as to the ideologies about the appropriate roles and norms attached to them (e.g. working hours, working days and holidays)". For this case, nurses who work extra time for more income without having time to rest and bond with the family, could experience more work-family conflict.

Conservation of resource theory as developed by Hobfoll (1989), helps in maintaining the survival and well-being of the nurses and hence reduce some challenges of life that may lead to conflicts. Home, food and clothing are taken to be physical resources of very high importance in any family as they are connected to nurses' socioeconomic status. Grandey

et al (1999). Juggling between work and family domain roles can lead to anxiety, burnout, job dissatisfaction and sometimes death.

Study done by Prapanjaroensin et al (2017), explains that burnout is a threat of nurses not being able to mobilize more resources. In addition, Prapanjaroensin et al. states that “healthcare organizations and nursing administration should develop strategies to protect nurses from the threat of resource loss to decrease nurse burnout”. This will also increase productivity and acquisition of more resource for nurses. Arnold (2016) states that disagreements about money are one of the most difficult conflicts for people in relationships seek to resolve especially among nurses with financial constraints. This happens mostly when money is not enough to cater for family financial demands. Sometimes nurses have to go extra mile doing locums or doing some businesses that will enable them get more income.

The family on the other hand needs to find out ways in supporting the nurses meet the family’s demands and well-being, either financially or assistance in performing family for the family to be stable and reduce work-family conflict.

Work-family conflict however influences development outcomes, and this is seen in nurse’s productivity. Paying attention to nurses issues is therefore very important. A study done at KNH on factors influencing retention of health worker’s findings showed that “health care for one’s family was ranked as the most important compensation factor at 87.5% (n=230) followed closely by salary at 81.9% (217) then terminal benefits such as retirement and pension” (Ngure & Waiganjo, 2017). This direct motivation may promote nurse’s productivity through provision of quality care to the patients, leading to quick recovery.

The organization and family have a role to play in reduction of work-family conflict. Role of the organizations is to pay nurses well for better outcomes. Salary and other organizational compensation are linked to motivation and nurse retention and retention.

3.0 Research Methodology

This study used mixed method research design. The study design was a cross-sectional study which the researcher was able to explore to understand multiple issues in looking at the effect of nurse's personal income in work-family conflict. The paradigm stand is interpretivist and post-positivist which is significant for in depth information rather than numbers. The study focused Nairobi metropolitan area (NMA) which include Nairobi, Kiambu, Kajiado, and Machakos, focusing on level 4, 5 and 6 hospitals. These included Mama Lucy Kibaki hospital, Mater hospital from Nairobi, PCEA Kikuyu hospital, Kiambu hospital Athi-river sub county hospital, Athi-river medical hospital Ngong sub-county hospital and Nairobi women hospital in Kajiado County. The target population for the study was 986 nurses registered by Nursing Council of Kenya of all cadres and working 35 hours a week. Sampling design used for the hospitals was purposefully chosen to include 4 private and 4 public with a total sample of 273 nurses and 8 DNS. Choosing of facilities was through purposive sampling while choosing the nurses within the hospital was through stratified random sampling. The levels for nurses included: staff nurses, senior nurses, sisters and unit in-charges. Data collected from nurses involved qualitative and quantitative data, with open and closed ended questions which were filled by the nurses.

Qualitative data was mostly non-numerical and descriptive and was filled by director of nursing services. Data analysis was purely qualitative. Ethical consideration was considered where by special attention was special attention was dedicated to the anonymity of the participants. Nurses worked in eight different healthcare facilities, and so identification was done where numerical numbering was used instead. Ethical consent was obtained from Daystar university ethics research committee (DU-ERC), hospital administration and NACOSTI. The participants gave their consent to fill the surveys or be interviewed. They were assured confidentiality and anonymity in the data presentation.

4.0 Results and discussion

Quantitative Results

Total sample used for analysis was 273 nurses. Most nurses were female (81% Vs 19% male). On work-family conflict, there was no much difference between female and male (Mean 16.58 vs 16.28 respectively), while WFC for hospital between private and public (Mean 16.23 vs 16.80 respectively). For academic qualification, diploma holders were highest at 67.4%. 70% of the nurses were married. Majority of the nurses had worked between 1-10years (71%). Most participants were staff nurses (35%), while most nurses who participated aged between 21-30years (50.6%).70% of nurses had children with majority having eldest child aged 4 years and youngest being 2 years.

Information on nurse’s personal income (NPI) was captured and according to the descriptive statistical tests more than 80% of nurses have their spouses working, and more than 90% feel like their salary is not enough for sustaining their family. This could be because 72% are paying rent and more than 60% don’t have other means of getting more income. This apparently has led to more than 55% who stated that they would like to work for more hours for more income (Table 4.1).

Table 4.1 Financial items of NPI

| | Yes | No | Total |
|--|------|------|-------|
| Are you the only one employed in your family? | 16.0 | 84.0 | 100.0 |
| Do you consider your salary enough for sustaining your family? | 6.5 | 93.5 | 100.0 |
| Apart from your job, do you have any other income-generating activity? | 35.0 | 65.0 | 100.0 |
| Has your income caused conflicts with your family at any point? | 38.6 | 61.4 | 100.0 |
| Would you like to work more hours for more income? | 57.9 | 42.1 | 100.0 |
| Are you able to do some savings as a family? | 63.3 | 36.7 | 100.0 |

Qualitative data

Data collected was coded, cleaned, and checked for missing values. Content analysis was used to analysis open ended questions which were captured in Excel. The researcher identified frequencies, and themes as well (Hsieh & Shannon, 2005).

The researcher further followed content analysis. The responses were copied in a word

document where coding was done, line by line (open coding). Researcher compared data to come up with categories and kept on modifying the codes in the codebook along the way. In second level coding (axial coding), the codes developed in the first cycle of analysis were organized and categorized. The researcher also confirmed cases in order to avoid forcing data in categories specified in this question. This is as shown in Table 2 below:

Table 4.2: Cycle 2 coding

| Main Categories | Sub categories | Explanation | Examples | Sample of quotes from nurses |
|------------------------------|-----------------------------------|--|---|--|
| Remuneration challenges | i).Financial constrains | This is a threat that forces nurses be confined and restricted in use of pay they get | Not able to meet family financial demands, finance imbalance, House help leaving due to delayed salary, got a better paying house-help job, money I earn, can't sustain the family, financial struggles | <i>Financial constrains hence not able to meet family demands(DN1)</i> <i>Money not enough for monthly budget(P55)</i> <i>Having to take care of family bills alone is very strenuous(P83)</i> |
| | ii). Lack of compensation | This is inadequate pay to the nurse for hours worked that exceed their normal scheduled working hours | No overtime pay work overtime with no compensation | <i>Reduce working hours or remunerate according to time(DN5)</i> <i>P208...Payment of salary with no compensation and yet work done is too much, therefore this is not motivating.(P208)</i> |
| Effects of inadequate salary | i). Entrepreneurial opportunities | This consists of other ways apart from salary that helps increase household income through livelihood diversification. | side hustle for more income, look for alternative source of income to be able to balance, work extra hours without a break, do extra work like farming. | <i>Trying to look for some investments to help me earn more money to sustain my family(P66)</i> <i>Alternative source of income(P85)</i> |
| | ii).Financial management | This is the process of wisely budgeting, spending, saving, and investing the money that nurses earn. | Proper budgeting, proper budget management, Good financial management, avoid unnecessary expenses, have budget only for the basics, avoid unnecessary expenses. | <i>Work with what is available by reducing house budget(P81)</i> <i>Economizing and doing without some things(P180)</i> |

| | | | | |
|---------|---|---|---|--|
| | iii).Nurse resignation | This is where nurses leave work for better opportunity somewhere else | Nurse resign for greener pastures. Lack of overtime pay. | Oversees employment for better pay(P93) Demotivation due to lack of promotion with better pay(P105) |
| Support | Better remuneration by the organization | This is a motivational act for nurses from the organization in the form of pay so that to improve the living standard of their family | Nurses to be paid for working extra time, pay nurses well | Review nurses pay and increase(P215) Motivate nurses through better pay(P222) |
| | Family financial support | This is financial help given to the nurse to reduce stress and meet families financial demands adequately | Family to help with family chores, Funds planning | Proper family budgeting(P36) Financial support from spouse(DN3) |

The following key findings discussed include remuneration challenges, effect of inadequate pay and support to minimize work-family conflict as pertains to nurses pay. The following were discussed:

Remuneration challenges

Nurse indicated that they experienced financial constrains as their personal income and small savings from their pay sometimes cannot sustain their families. In addition, the income is not enough to pay their fees for those who want to pursue further studies. This was coupled with inconsistence in paying nurses, delayed salaries with no compensation for working overtime, and pay cut due to COVID-19. Financial strain has lead nurses to struggle financially, causing them juggle between employment. Nurses statements on financial constrains was as follows: *“House help left because she complained of a lot of house chores with low pay” (P34)*. Pay is a major motivator for house help which keeps them around as they play a big role helping with family chores. In addition, P55 stated that *“Money not enough for monthly budget leading the nurse to side hustle for more income”* Sometimes it is hard to tell how much is enough, however, nurses like any other person desire to have e better living standard, and so nurses keep on searching for more

job for a better pay. DN1 perspective was that *“Nurses seems to be struggling financially as some of them don’t take time to rest. They keep on moving from one locum to the other, in the name of making money, the question is how much is enough? They need to realize that one may never have enough”*. This seems to nature of most people to have more than what their budget demands and keep on saving just in case of anything. However sometimes its at the cost of the family where by nurses are busy making money, and neglect family time which has consequences.

The challenges of inadequate pay and lack of overtime compensation is demotivating. Nurses prefer to jungle between employment where they can be paid. Sometimes it leads to nurses quitting when they get a better job with good terms. Nurses who had house help, experience turnover as most house-helps worked between 3 months to 1 year. Some of the reasons that led them leave work was because they were not satisfied with the pay

Effect and management of inadequate salary

Nursing being a thriving field, entrepreneurial opportunities enabled nurses find other ways of getting more income without much stress with good planning. Nurses statements on entrepreneurial opportunities was as follows: *P70 stated that leaving the family for many hours as I juggle between employment. This may interfere with children upbringing for nurses who have families because they have very limited time with the family.*

However due to costly leaving *sometimes nurses are forced to do locums and small business enterprises like kiosk(P76)*. However, from DNS Perspective, *“Nurses are involved in some businesses and doing locums so that they earn more to take care of their families. However, they also need to plan in such a manner that they have time with their families which is very important as it increases bonding(DN8)*.

The organization need to encourage nurses constantly with not only verbal praises but also financial incentives. Remunerations include overtime pay and other financial benefits. Good pay help maintain motivational well-being of the nurses and family. Well

managed remunerations have the potential to increase nurse's motivation, productivity, satisfaction, nurse retention and wellbeing of nurse's families.

Most families are dual earners to try meet financial obligations of the family, so nurses have to look for manageable and less stressful jobs considering need to participate in other family chores. Some of the income generating activities mentioned by nurses included counselling, small businesses like farming and online business.

Financial management enables nurses manage their family financial demands. This is through wisely budgeting and investments. Nurse try to work with what they have as they try other ways of getting more income. Savings from salary is one way that helps contribute to long-term goals however small the savings are. Spousal financial support reduces financial constraints. House-help and family support in doing household chores is encouraging to the nurses as the nurses is not faced with stress of doing house chores and being alone to provide for the family. This promotes the well- being of the family.

Discussion

The researcher observed the following key findings: Remuneration challenges (Financial constraints and lack of compensation for extra time worked) and secondly effects of inadequate pay (Entrepreneurial opportunities and financial management). Lastly support (organization and family).

The findings of this study demonstrates that financial constraints and lack of compensation together significantly influenced work-family conflict. Insufficient pay led to constant job search and eventual job turnover. This agrees with study done by Scott (2016) which stated that financial stress can cause general stress and other factors such as work, raising children and even one's health.

Organizational support through better remuneration influenced work-family conflict. This agrees with Adeoye (2014) study that showed that salary and wages are crucial factors of compensation management for the motivation of employees and to increase overall productivity. Consequently, this has influence on work-family conflict positively as it improves nurses living standards. Clear policy guideline on review of nurse's salary is

vital as this might reduce nurse turnover. The results support conservation of resource theory.

Nurse profession gives them higher chances of entrepreneurial opportunities. Shift flexibility allows nurses to do counselling, home based care services, and locums. Family support however has positive effect on work-family conflict. Conflicts at work domain and family domain are encountered almost on a daily basis. The determining factor is how they are handled.

This study was conducted in selected healthcare facilities within Nairobi metropolitan area, so the results may not be a representation of all nurses.

The results advocate that healthcare facilities should aim at reducing work-family conflict by creating a friendly working environment. Better Income for nurses is one of the ways that reduce WFC as it helps with free budgeting for family needs. In a study done by Odhiambo (2020, pg. 41) “Inadequate house budget was indicated as a source of domestic conflict”. A central factor is organizational support. This study has shown that organizational support may depend with structures of the organization, but more so clear and effective communication from the organization, nurse’s remunerations, long term goals and plans on compensations and reward systems. Employment of administrative personnel and nurse assistants will help in reduction of overtime hours and work overload and this will enable nurses go off on time.

5.0 Conclusion

Testing the effect of financial constraints, lack of compensation, entrepreneurial opportunities, financial management, organizational and family support, the researcher found out that poor funds management, will always lead to financial constraints. It is important for nurses to live within their income and look for other ways that will enable them get more income as they plan for short term and long term plans. In addition, Organizational support was most recommended as support that will reduce work-family conflict. This could be because of the fact that they make decision on how much to pay the nurses and how much pay to increase at certain period of time. In addition, it’s the organization role to compensate nurses overtime and human resource employment. This study was necessary as it has attempted to address the effects of nurse’s personal income in work-family conflict whose outcomes affects nurse’s productivity at work especially

with nurse quitting job and demotivation which affects quality care provision to the patients. In addition, family effect may lead to family and spousal conflict that affect the well-being of the family. A family that is not stable is not productive. The researcher identified that the higher the financial constrains for nurses the more nurses experience work-family conflict and the poorer the outcome. For Kenya to attain vision 2030, there is need to understand the level nurses experience work-family conflict and how to come out with ways to moderate WFC both at work and family domain to meet expected goals. Nurses issues especially their income needs to be reviewed as it will help reduce nurse turnover so that the country retains the nurses, improve quality of care in care provision and a stable family with satisfactory income that improves the living standard of the family. This eventually leads to a healthy nation and promote development.

Suggestion for further Research

- 1.Future research should consider doing a study on nurses who have worked in more than one hospital in finding out what might have been the cause of them quitting one hospital to the other. Doing a comparison with previous employer
- 2.Promotions and pay increment with career growth development

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