Asian Social Studies and
Applied Research (ASSAR)
Published by ASAR Council

Volume 2 Issue 3
August, 2021
ISSN (E): 2709-9229

Impact of Work-Family Conflict on the Physical Health of Employees: Evidence Across the Banks in Lahore

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Abstract

In Pakistan, the environment in banks is very challenging. The employees used to work late hours. Most of the banks, especially the private banks even allowed their customers to do their bank account dealings before office hours, due to that employee are unable to fulfill their family roles and duties and faced conflict at work and in the family. This situation is enlisted as a work-family conflict. The present research is a cross-sectional quantitative research design with the survey as the method. The main objectives of the research revolve around the difference between men and women in work-family conflicts, the impact on their healthy living habits, consequences of work-family conflict on the physical health of bank workers in Lahore, Pakistan. The multistage sampling technique was used to select banks and respondents. The simple random technique was used to select four banks and a total of 200 sample respondents included 50 employees each from four different banks were randomly selected. Data were collected by using the Work-family conflict scale and healthy living questionnaire. The investigation outcomes discovered a noteworthy variance among men and women in WFC. Even a substantial change was seen among men and women in their physical wellbeing. A substantial moderate positive association has existed between WFC and healthy living behaviors. The findings of the research will be useful for bank workers, bank employers, and the public to frame their behavior, policies, and strategies to overcome this conflict. The banking sector should offer plans to deal with the mental tension like a vacation, time management courses, and relaxation to handle WFC among employees.

Key Words: *Work, Family, Conflict, Mental health, Banks, Private, Public.*

Introduction

According to Burke and El Kot (2010); Grandey, Cordeino, and Crouter (2005), work-family conflicts (WFC) are one of the important issues to investigate in the world especially in Pakistan. With passing time, this matter has turned into a serious issue for the people and the working environments (Posig & Kickul, 2003). In the words of Carmeli (2003), WFC means a tug of war between various roles that happen due to incompatible roles at the office and household setup. In WFC the responsibilities of one role made it challenging to satisfy the needs of the second role (Greenhaus & Beutell, 1985). The conflict has two-dimensional paradigms; one is conflict at work that influences family and the dispute at family badly impacts the work (Frone, 2000).

It's a globally recognized fact that inharmoniousness or conflict between these two dominions hurts the wellbeing and ease of staff (Kinnunen, et al., 2006; Aazami, Shamsuddin & Akmal, 2015). The difference was found in different studies among men and women at work and in-home, both genders suffered the damaging consequences of WFC, women were found to suffer more (Rose Hunt & Ayers, 2007). This perspective is not proven that females faced more stress than menfolk because of double burdens as housewives and breadwinners (Grzywacz & Marks, 2000; Hosking & Western, 2008; Friedman & Greenhaus, 2000). According to Duxbury, Higgins, and Lee (1994) women suffered more anxiety and workload than men because they have to provide equal time to their families and work.

Regular exercise is the key feature that keeps healthy living styles and it is useful to diminish the chances of illness and bad wellbeing (Dubbert, 2002). The folks who did work out fell less ill and maintained improved health (Ensel & Lin, 2004) than those who didn't exercise. As per the word of Allen et al. (2000) more the people faced stress in domestic and professional domains, the more they faced the psychosomatic symptoms of fatigue, worries, and lack of hunger. Many persons if practiced WFC that do affect their physical and psychological health (Buda & Lenaghan, 2005; Rothbard, 2001).

In the developed and underdeveloped nations, the work environment exerted tremendous pressure on their employee to work hard, put in more effort, to compete in the competitive environment inside and outside the banks. Due to this reason, employees faced disharmony at work or family that led to conflict at family or work. Such disharmonious factors caused health constraints. The employees can counter this with the adoption of regular physical activity like exercise.

The focus of this study was to examine the circumstance that how struggle at work or family affected the physical wellbeing of employee's banks. Though many studies have covered this area this study specifically identified how the bodily wellbeing of men and women staff in the banks suffered due to any conflict developed in the domestic and working environment of the working individuals. This research further studied how a family struggles influence work conflict. This also tried to assess the influence of working hours and meal practices in a gender context on the physical well-being of employees. WFC is mostly occurred because of an imbalance created between working, family, and personal domains of employees, it's a kind of disharmony in different roles that applies pressure. The majority of the cited researches was conducted in developed countries to understand the influence of WFC on the psychological health of employees, but the limited literature supports its impact on physical health, especially in a country like Pakistan. Hence the outcomes of this research may upgrade the laymen's understanding and learning of this specific region. The findings of the research will be beneficial for bank workers, bank employers, and the public to frame their behavior, policies, and strategies to overcome this conflict. The banking sector should offer plans to deal with the mental tension like a vacation, time

management courses, and relaxation to handle WFC among employees. The outcomes will be helpful for a family member of employees to extend social support to them to overcome this burden.

Review of Literature

There are various forms of conflicts, either a work-family (WF), family- work (FW), time and straining created, or behavioral-based, all caused stress and issues for the employees in the organizations. Currently, there is a great concern developed among employees on how to handle their working and household environment. Both working and family environments became very challenging with the time that created conflicts for employees at work and within the family. Due to growing burdens of manifold roles, two kinds of conflict developed like meddling from work to family, for instance, the sickness of some family member led to absence from work, and similarly, intrusion from family to work like long working hours enable the employee to attend to home duties (Akkas, Hossain, & Rhaman, 2015). Several factors caused role conflicts in working place and domestic sphere like longer hours at work, strict work agenda, shift work, role uncertainty, low spouse backing, and high expectations, unhealthy competition, and unhealthy working environment (Ahmad, 2008; Alam, 2010; Rathi & Barath, 2013).

Allen et al. (2000); Greenhaus, Allen, and Spector (2006) opined that physical health or wellbeing is adversely affected by any kind of conflict. According to several types of research, WFC caused many issues, many of the employees faced a lot of health issues that interfere with their oeuvre, both physical as well as mental health. WFC seriously disturbed the health of employees; this often led to poor health (Frone, 2000; Emslie, Hunt, Macintyre 2004; e Lange et al. 2003). WFC caused bulkiness, high blood pressure, raised cholesterol level, and other physical ailments (Kinnunen, Geurts & Mauno 2004), and even tiredness (Warner & Hausdorf, 2009, chest pain (Ballout, 2008), depression among employees (Wilson et al., 2007; Rotondo, Carlson, & Kincaid, 2003; Geurts, et al., 1999). It was also found out in previous literature that WFC also affected the behavior as employees started eating too much, or no appetites, and to develop less exercise-taking habits (Van & Ellemers, 2009).

Whereas, various studies described that WFC caused insomnia, headache, fatigue, pain in the chest, and intoxication (Frone, 2000; Roos, Lahelmae, Rahkonen, 2006), even it caused bodily fitness penalties like a muscle cramp. Hammig et al. (2011) examined the link between WFC and muscular pain. Carikci, Antalyali, and Oksay (2008) pinpointed an important variance between males and females for WFC; but there was no significant discrepancy for the family to work struggle. Veldhoven and Beijer (2012) recognize that women faced more protuberant degrees of struggle at work and family as compared to males, so far, this variance was found only when both spouses worked and lived with and without kids.

Similarly, WFC caused physical feebleness (Lallukka, et al., 2010). The females who faced more conflict had a poor nutritional pattern as compared to women with less struggle in life All revised works in this research recognized an association between WFC and physical health. Though there was an optimistic relationship among variables of the existing study, no direct research was founded on the connection between WFC and physical health. This study was steered to investigate the variable of health and conflict together with the main focus on differences between males and females in WFC and physical health.

Theoretical Framework

The theoretical framework is the Bakker and Demerouti (2007) model of job demands-resources (JD-R). This theory tried to explain the wellbeing of the employee based on occupation stresses and possessions. Rendering to such a concept that fitness and illness progress through double detached but

related methods (Torp, et al., 2018). This model addressed two-direction both positive and negative sides of phenomena. This study focused on the negative direction only as when the demand for the job increased and job resources are low then health-related outcomes increased. Like the bodily ailments are mainly compelled by high job demands such as long working hours, heavy workload, role battles in work that led to struggle at family, and struggle at family led to conflict at work and emotive stresses due to low resources like exhaustion, low motivation, and stress. The study hypotheses will support this fact. The JDR model accepts that there exist specific factors in every job that result in stress. Such factors are demands and resources. Social, physical, and emotional characteristics belonged to Job demands that work inflict (Duong, et al., 2015). Such demands like long work duration are undesirable factors and led to more conflict in work and family. On the other hand, job resources are optimistic features relaxed working hours that led to lower inharmony at work and in the family.

Objectives of the Study

- To recognize the difference between men and women in WFC.
- To scrutinize the influence of WFC on healthy living habits.
- To find the consequence of WFC on the physical health of employees.
- To investigate the relationship between WFC, FWC, physical health.
- To observe the effect of age on WFC and wellbeing.

Hypotheses

H1: There will be a significant difference between male and females bank employees in WFC.
H2: There will be a significant difference in men's and women's bank staff for healthy living habits.
H3: There will be an association between WFC and the healthy living habits of bank staff.
H4: More work conflicts than family fights will be practiced by bank staff.
H5. There will be an important variance in age, healthy living, and WFC among the staff of banks.

Method

The current study is exploratory, cross-sectional quantitative research with the main focus to understand the gender difference in WFC and the physical health of employees in banks. Two structured questionnaires with close-ended statements were used to gather data through the survey method. A multistage sampling technique was used to select respondents and banks. Firstly 4 banks were selected out of a total of 32 registered scheduled banks in the State Bank of Pakistan. Out of four Banks, two were public and two were the private bank. Private banks were Alfalah and MCB, and the public was NBP and Habib bank. These banks were chosen as being larger, leading, reputed, with maximum account holders, having the biggest network of branches, and most popular among masses. A sample of 200 bank staff as 100 men and 100 women from 04 diverse banks was randomly chosen. 25 men and 25 women staff were taken from each bank. The demographic data about age, gender, education, and marital status is well labeled in figures 1, 2, 3, 4.

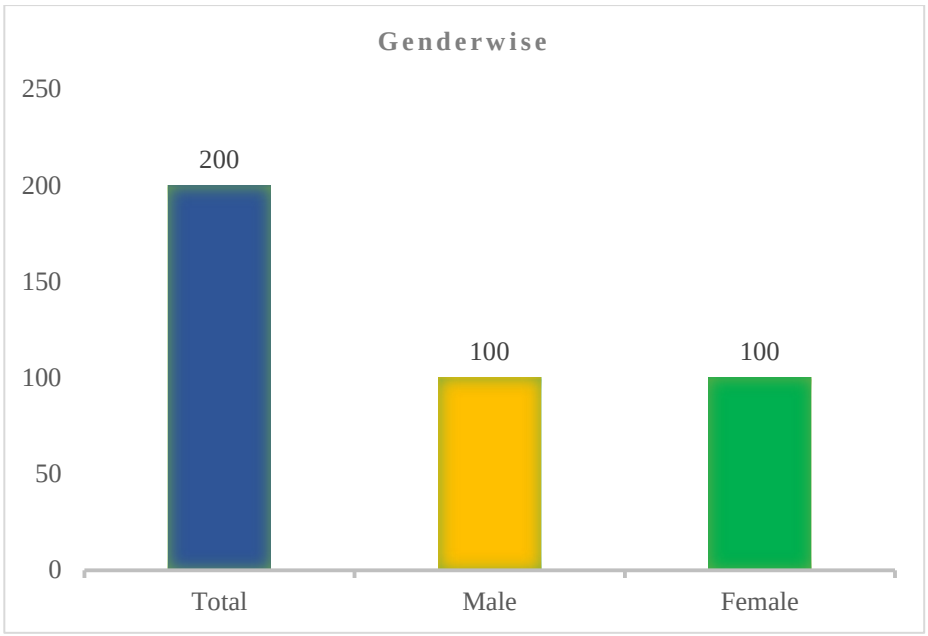

Figure 1: Gender wise Participants

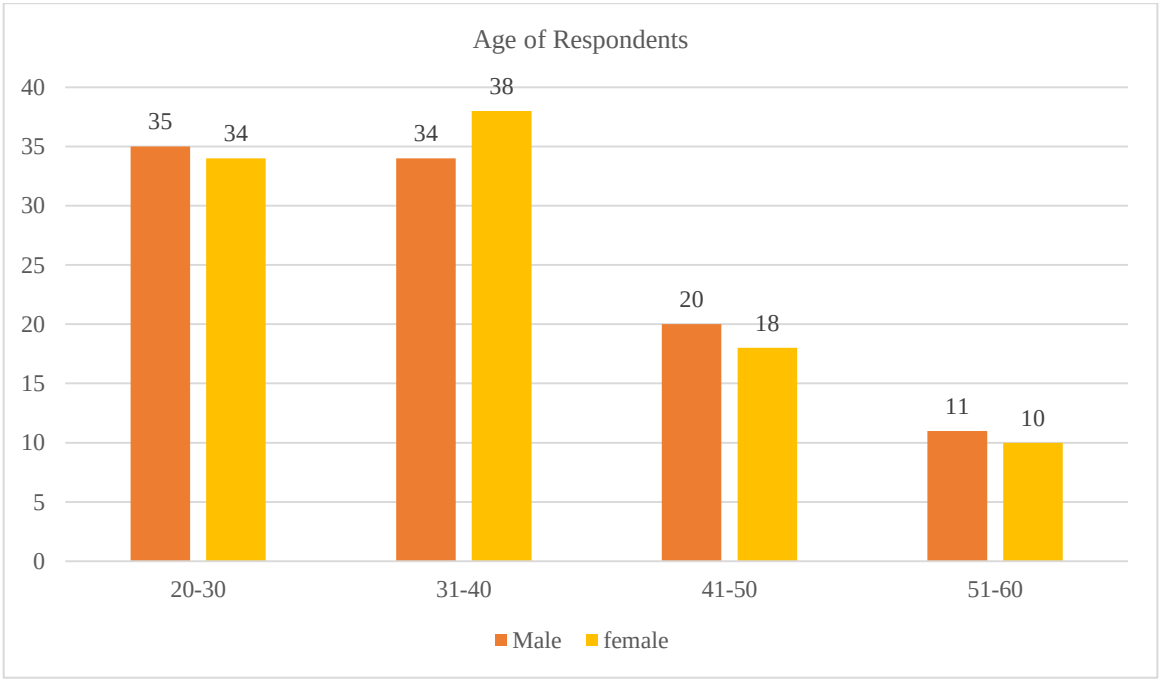

Figure 2: Age-Wise Data

Fig 2, showed that the majority of men employees 35 belonged to the 20-30 age bracket while 38 females on the other hand in 31-40 age group. 20 male and 18 female respondents were in the 41-50 age group. And only 11 & 10 male and female employees fall in the age brace of 51-60 yrs.

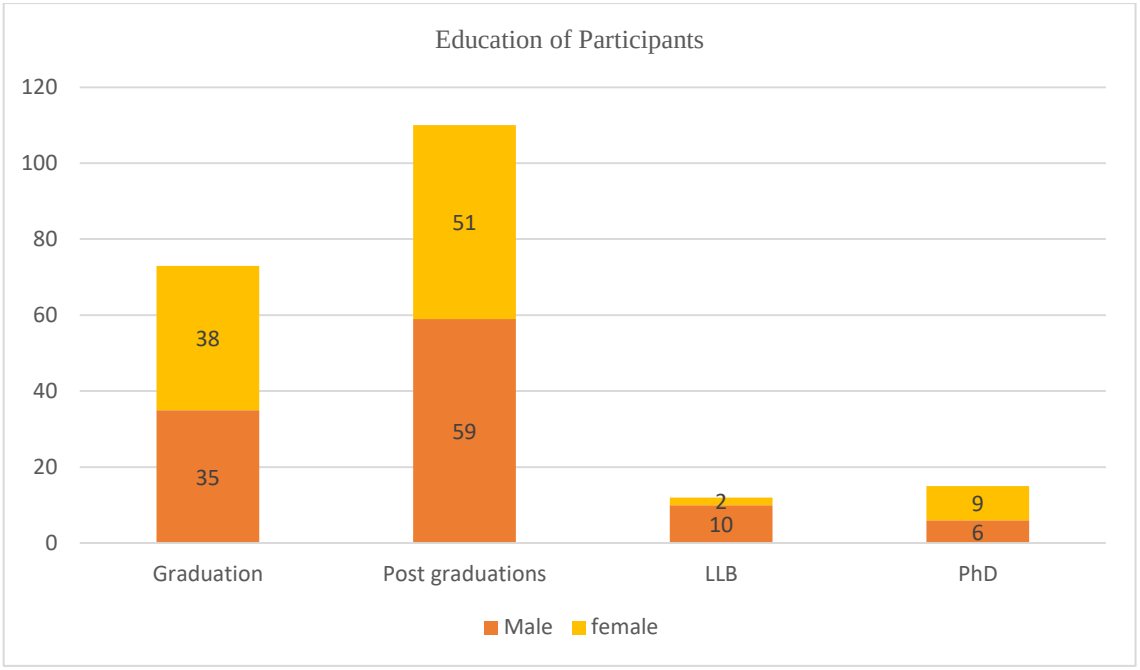

Figure 3: Educational Level of Participants

Fig 3, showed the education of staff. 38 women participants did graduation. While a majority of men respondents did post graduations. Only 2 female participants have completed a Bachelors of Law and 6 have a doctorate. While 10 male respondents have a law degree.

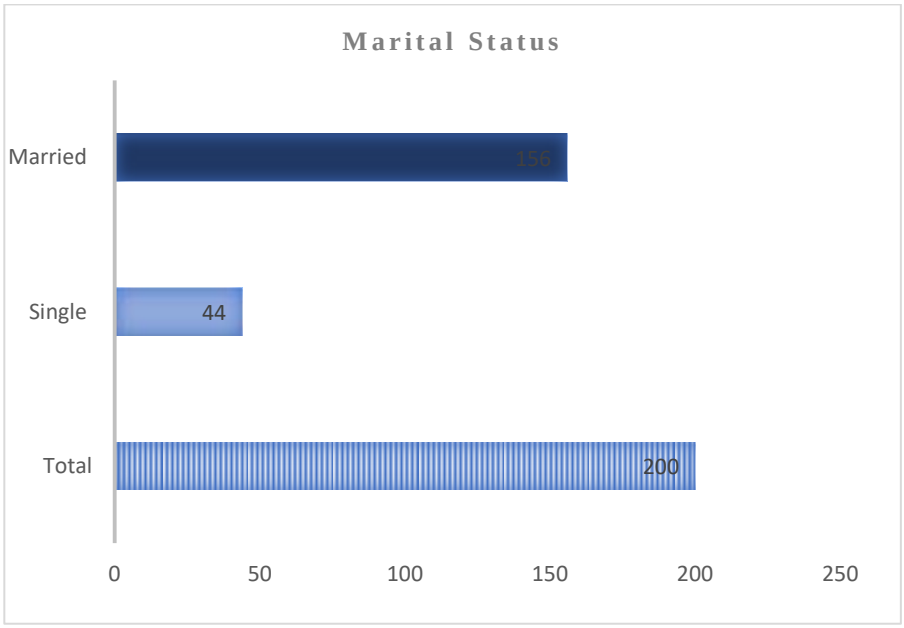

Figure 4: Marital Status of Participants

Fig 4, established marital status. Out of 200 respondents, 156 were married while 44 were unmarried.

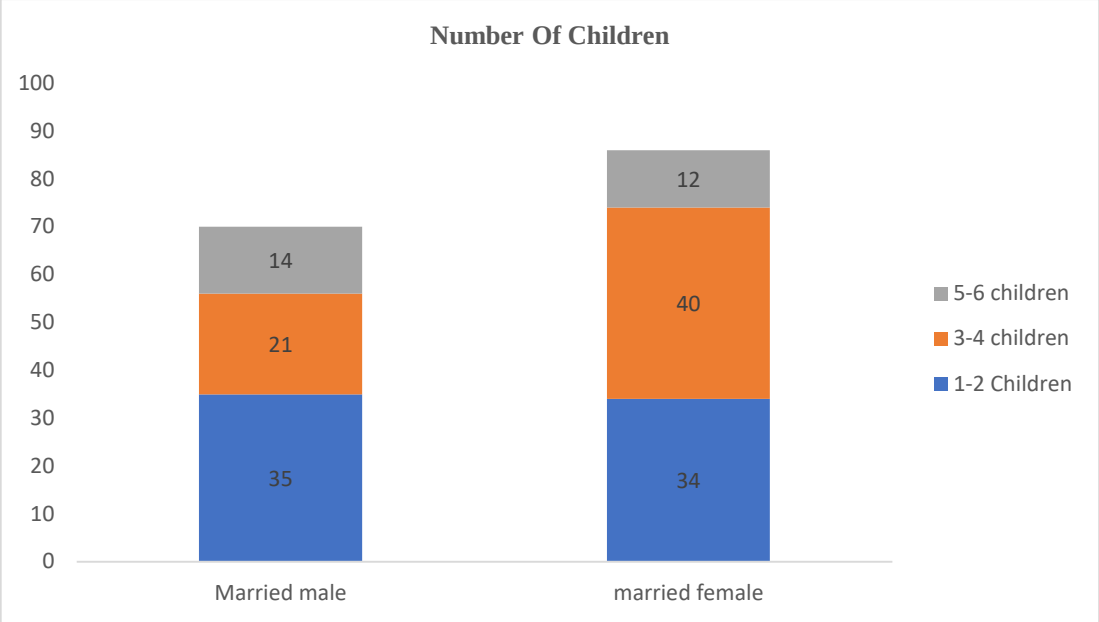

Figure 5: Number of Children

Out of 156 married male and female employees, the majority of study employees have 1-2 children, while 14 male participants have 5-6 children.

Tools

To measure WFC, FWC, and physical health, two standardized scales were used. The WFC scale by Haslam et al. (2015) with 10 items, 5 items that calculated work to family conflict, and the last 5 statements family to working conflict. The rating of the scale was founded on a Likert scale scoring 1for strongly disagree to 7 scorings for strongly agree. The Cronbach's alpha coefficient was .76 as portrayed in table 1. Healthy Living Questionnaire (2011) contained 18 statements; it was a free access instrument; the score ranging from 1 for not at all to 5 very frequently.

Results

The data gathered from the sample were then examined through the Statistical procedure of SPSS and calculated differences among men and women in WFC and the well-living of staff. The association between variables was also deliberated. The independent-sample t-test, ANOVA, and Pearson correlation was used for investigation. The Cronbach's alpha is revealed in table 1.

Table 1: Reliability of the Tools

Scales	Cronbach's Alpha
WFC Scale	.76
Healthy Living Questionnaire	.78

Table 2: Independent samples t-test was utilized to test the WFC among the men and women workers.

Variables	Male		Female				95% Cl	
	M	SD	M	SD	t (200)	p	LL	UL
WFC	33.5	9.33	36.22	8.00	-2.17	.031	-1.32	3.23

To test the H1 Independent t-test was utilized, shown in table 2. Outcomes discovered a noteworthy difference in WFC among men *(M=33.5, S. D=9.33)* and women *(M=36.22, S.D=8.00), t= -2.17 (200), P=.031* bank staff in Lahore, Pakistan. Womenfolk confronted excess WFC than their counterpart.

Table 3: Independent samples t-test was employed to measure healthy living habits.

Variables	Male		Female				95% Cl	
	M	SD	M	SD	t (200)	p	LL	UL
HLH	18.72	3.95	20.35	4.28	-2.79	.006	-2.32	4.23

To prove H2, again t-test was employed, table 3 showed the result. Findings showed that there was a substantial change in the HLH of men *(M=18.72, S.D=3.95)* as compared to women *(M=20.35, S.D=4.28), t=-2.79 (200) =.006* workers of banks. Women exhibited not very good HLH than the menfolk.

Table 4: Pearson correlation was employed to test the association between WFC and healthy living habits of bank personnel.

	M	SD	Healthy living habits	Work-family conflicts
HLH	19.53	4.193	-	.296** .000 200
WFC	34.88	8.77	-	-

Pearson's correlation between WFC and FWC outcomes in table 4 presented that there was a noteworthy moderate encouraging connection found between WFC and HLH *(r=.296, n=200, p<0.01).*

Table 5: One sample t-test was utilized to measure the change between WFC and FWC.

	WFC		FWC			95% CL		
	M	SD	M	SD	t(df)	P	LL	UL
Total	19.23	5.66	15.65	4.85	47.97(199)	.001	-2.42	3.23

P<.05

One sample t-test result in table 5 specified that the FC score *(M=15.65, S.D=4.85)* was substantially low as compared to WF *(M=19.23, S.D=5.66), t =47.97 (199), P=. 001*

Table 6: One way Anova was employed to measure age, WFC, and HLH between male and female

Source	SS	df	MS	F	P
WFC	781.5	4	231.9	3.32	.002
HLH	871.4	4	301.7	4.12	.008

One-way ANOVA analysis displayed in table 6 showed that a significant difference was found between in WFC across the four age groups of employees [f= (4, 180) =3.32, p=.002], similarly, a significant difference was recorded in healthy living in all four age categories of employees at p=.008. To further elaborate the significant difference in WFC and HL based on the age of respondents, a Post Hoc comparison has been done to ascertain which group means in the age group differed from for WFC, HL which proved substantial at the 0.05 alpha level. The comparison Tukey HSD examination showed that the actual difference in means found between the age group of 41-50 years (M = 29.39) and 20-30 years (M= 18.98). Therefore, it can be found from the analysis that WFC increases with one's age. So, the older the employee, the more WFC they will face. Similarly, the healthy living of the same group of employees also decreases with age, the older you are, the less healthy living you will show.

Discussion

The current research showed that female staff confronted more struggles than men. A substantial change was found between the two. As working women have to fulfill dual responsibility, the household tasks as well as work tasks that gave rise to conflicts at workplace and homes, it's tough for them to accomplish these twofold chores, as she has to perform the full duty of a spouse and mother. She has to give her best in all roles as being a woman. This may cause resistance, she was unable to maintain a balance between numerous, roles, tasks, and responsibilities, resultantly it all turned turtle. Pakistan as being a patriarchal society, where it was the responsibility of men to be the bread earner for the family and women to be treated as house makers, women were supposed to stay home, look after the kids and family, it is her sole responsibility. This result is in line with Mann and Armitage's (1993); Veldhoven and Beijer's (2012) researches in which they proved that women handled more WFC than men of their age, yet, this difference was only noticeable when both spouses worked and survived with and without kids. It was in line with research conducted by Carikci, Antalyali & Oksay (2008) in Turkey that supported the outcome of the current research that differences existed between men and women for WFC. The womenfolk barely handle more WC than males Veldhoven & Beijer, 2012). But it was opposing the results of Korabik et al. (2008) who held that menfolk met more work conflict than females. The JD model believed that females have fewer job resources available to them so women are most expected to face a higher level of WFC than men (Schieman & Reid, 2008).

When employees led a conflict-free life without anxiety and stress, it can enhance good health. When people got older, their well-being also changed which provoke an increased contagion risk to health and wellbeing. If the stress was overcome by healthy habits, then this risk can be avoided. Other outcomes of the study showed a noticeable difference among males and females in healthy living habits, results showed that females are not good at maintaining healthy living practices as compared to men. Females appeared to be aware of their wellbeing, but unable to maintain proper health as they have to performed multi-tasking at home and work. If employees are keeping good health, then they will do their best at work and in a domestic setting. It was learned from the research outcomes that men were ready to take their health seriously under both pleasant and unpleasant circumstances as they have to earn their living and manage their homely affairs. These conclusions are contrary to the findings of Mansfield et al. (2003), Wellstead (2011), Renahy & Chauvin (2006), Renahy et al. (2010), who disclosed that women always took their health seriously than men. Females are more informed and update about health-related facts than men in Pakistan as compared to other regions in the world but the circumstances like more childbirths, pregnancy complications, being women, preference to have a male child, mal-nourished, diet plans, anemic, dual responsibilities, to manage homes and many other related factors unable them to maintain good health or to get time to do exercise. This finding was in line with Hughes and Glinsky (1994) that multifaced responsibilities of women were found to have negatively affected their mental and physical

health such as sleeplessness, intolerance, and backache. According to job Demand Resource model, every job leads to stress due to specific characteristics. These factors are demands, these are social, physical, and emotional (Doung, et al., 2015). Such job demands of long work length proven to be negative that leads to work-family conflict and poor health at the end.

If any change occurred at work and in homes that become a burden for the employee, then an unevenness was visible on the job and in family life for both men and women. This nonstop inequity directed towards struggle, which in turn disturbed exercise and meal-taking habits like negligence in maintaining a well-nourished food chart and bodily activity. A significant link was observed between WFC and the HLH of the personnel. If employees faced no conflict at work and in a domestic place then they are healthy and free from stress, they will do better at the job and home. But if they faced conflict at both places, they can encounter many health constraints such as stress and hypertension. The studies of Netemeyer, Boles, & Mcmurrian (1996); Bellavia and Frone (2005) endorsed the findings that WFC is allied to act at work, mental and physical capability. If an employee is confronted with a conflict of any type, then their physical wellbeing will be affected. Outcomes of research done by Aazami, Shamsuddin and Akmal (2015) also endorsed that woman if faced with work-family conflict then they will possibly have poor health status. This research finding believed that the JDR model has different predictors for work-family conflict among men and women in Pakistan due to socio-cultural context in working and domestic domains.

Employees can pleasantly be able to avoid the extreme consequence of WFC on their bodily strength if they adopt strategies like a habit to take nutritional diet and improved eating habits. It was found in the finding of study that bank personals met with more skirmishes at work than household battles. The fight brings dissatisfaction among staff, it narrowed their efficiency, led to poor clienteles, and anxiety or, sometimes more terrible case condition. The perfect ability to maintain a balance between family and work led to minor WFC while disharmony at work to family led to more WFC (Olson-Buchanan & Boswell, 2006). It has adhered to the outcomes of a study by Clark (2002), Matthews & Barnes-Farrell (2010) who believed that when an employee highly absorbed him or herself in the family then it will lead to more work-family conflict whereas if more involved in work, they will face more FWC.

The results of the investigation also showed a significant difference in age group built on work-to-family conflict. Such difference, though, describes an optimistic linkage between age and WFC. Thus, the outcome suggests that banks should take extra care while assigning roles ad tasks to employees of different age groups. This is because assigning higher tasks or over thought-provoking jobs to older staff possibly leads to more conflict at home and this, in turn, will harmfully disturb their efficiency at work. This finding is supported by the conclusion drawn by Dartey-Baah (2015).

The theoretical framework of Bakker and Demerouti's (2007) model of job demands-resources (JD-R) supported the outcomes. Initially, our outcomes proposed that work tasks (work quantity and length of time), means how much time was used to perform an amount of work, and issues encountered while doing those tasks, may appear to be the reason for WFC for workers. From the model of job demand-resources, this is in line with the notion that work demands often deprived workers of their resources like health, time, energy, which result in poor performance at home, less time and energy for family, and WFC (Bakker, et al., 2011). So, while discussing the finding that women faced more WFC and HLH than men, as in the South Asian region especially in Pakistan it was observed that more demands were expected from working women in both homes and work, like more work in a lesser period, a balance between work and family, fulfill the work task and at the same time satisfy the family. Meet the official demands of a boss

and the personal demands of spouses and children. No buts, sorry, or tomorrow were expected from females in homes and at work for their responsibilities.

Conclusion

The study revolved around the perception of bondage between work conflict and the health of bank workers. WFC occurs when a worker's work disturbs the personal life in the form of strict hours, stress, struggle, and burden at work, change of job, excessive tours, and unhelpful administrator.

Most of the findings of the research-proven significant in the case of women. Working faced more work-family conflict because of their dual responsibilities, if the family support system was there then it would be helpful to overcome this conflict. Though women are aware of their well-being and health while doing home and work affairs. But unable to maintain their HLH due to multiple personal and societal reasons. Working women were expected to fulfill double role difficulties and expectancies by husbands that led to extensive WFC for them.

In conclusion, the current investigation endorsed previous researches asserting that, amongst numerous predecessor factors, WFC is a vibrant issue that significantly disturbs healthy living habits. It is concluded that the family support and positive participation of spouse in home affairs and matters helped the women to experience less WFC.

This research thus contributes to existing research data on WFC and reveals the results of the demographics of participants on this multifaceted and multi-dimensional paradigm. JDR model believed that resource perspective such as flexibility in work helped to lower down the work-family conflict.

Limitations

Though the current investigation gives the perception about the WFC and healthy living habits of bank staff, because of the strict time limit and meager reply frequency, the researchers failed to get more data than the current 200 cases. The survey outcomes are not generalized to the entire populace because only bank personals were taken as the sample, for the upcoming study other sectors can be welcome. For in-depth insight, a qualitative analysis should be conducted for future results. Added restriction of the investigation is a dependency on sole data i.e., quantitative method. Purposive sampling technique was used to draw data, simple and stratified sampling was not possible because private and public banks did not properly maintain their employee records. In absence of an employee list, other sampling techniques were not possible. There is a prerequisite to deliberate work setting, job satisfaction, family support, and working hours in future research.

Suggestions

In banks, there should be relax working hours, workweeks, leave rules, summer breaks, and extended short leaves for private reasons. The banking sector should offer plans to smooth mental apathy like a vacation, time management courses, and relaxation to handle WFC. The administration and associations should raise the quotas for women in decision-making positions. There should be the provision of counseling or session services for workers having difficulties due to WFC. The opportunity should be provided to personals to stabilize their work and domestic tasks. Social backing from the household will lessen the workload and conflicts at work and in the family.

Acknowledgment

This paper is academic research so no funding has been provided. We strongly acknowledged the participants who took part in this research and made it possible to come up with concrete findings.

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