

## THE EXIGENCIES OF WORK-LIFE BALANCE FOR IMPROVED PRODUCTIVITY IN THE HEALTH SECTOR IN NIGERIA

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### **Abstract**

There have been enormous transformations both in the socioeconomic conditions and demands of work all over the world. Work and family life influence each other; hence employers, individuals and societies cannot overlook one area without peril to the other. A coordinated balance in work and life will immensely influence the accomplishment of personal and professional goals. Basically, the concept of work-life balance is related to a condition of equilibrium where the demand of a person's work equals that of his personal life. Thus, work-life balance requires organizations to effectively create a synergy in employees' work and non-work roles so that levels of multiple-role conflict and the attendant stress that affects optimal employee productivity are relatively minimized or avoided. Medical doctors and nurses are knowledge workers whose works are structured into shifts that do not fit the typical pattern of being at the workplace daily by 8am and leaving for the day at 4pm, hence they need a balanced work-life for sustained optimal productivity. This paper seeks to highlight both the different work-life balance practices {such as child-care programmes (like provision of on-site child-care facilities), family-care leave programmes, flexible working arrangements (including telecommuting opportunities, compressed work weeks and flexible working hours), and even on-site sleeping quarters for the employees}, and the adverse effects of work-life imbalance on both individuals and organizations. The paper proffers recommendations on ways to correct these imbalances and invariably improve productivity in the health sector in Nigeria.

**Keywords:** Work-life balance, Productivity, Border theory, Health sector, Flexibility

### **Background to the Study**

The growth of industrial market economy in the past centuries caused the separation of activities along the lines of generation of income and caring for family members. The relationships between work and life outside the work environment are affected by the ever changing social, political, and economic sectors, creating a source of concern, which has necessitated further inquiry into their interdependence. Brief and Nord (1990), highlighted some of those changes to include (a) an increase in divorce rates leading to higher number of single parents, (b) growing labour force participation among women, (c) more part time work, (d) increased mobility among

workers, distancing them from social support from nuclear and extended family, (e) changed worker expectations indicating greater interest in the quality of life outside work, and (f) growing social value placed on father's involvement at home.

Guest (2001) notes that the impaired quality of life in homes and communities is a major problem that is of immense concern to all. The source of this problem is multifaceted. It can be attributed to the shift from family to career advancement by people as they strive to better themselves. According to Delecta (2011), organizations want their employees to spend more of their time working whereas the family on the other hand wants them to equally perform their home roles effectively. People who are unable to find the right balance between the two are likely to face problems both at work and in their families. Most times, long hours spent at work away from the home have direct and indirect adverse effects on family roles of people (as father, mother, wife etc), family commitments (like children upbringing, taking care of the aged family members and related house chores) and the community. For instance, Burke (2009) notes that medical doctors' and nurses' work patterns are structured into shifts and thus differ from the normal work pattern of being at work by 8am and leaving at 4pm weekdays excluding weekends. Their pattern of work is characterized by long working hours (Gjerberg, 2003), overtimes and sometimes they work during vacations and bank holidays (Perlow and Porter, 2009), all of which further make achieving work-life balance somewhat difficult. More so, perhaps strangely, medical doctors are obligated to put their work duties first and as such care of patients is put above their responsibilities to their families (Gjerberg, 2003) and these lead to family problems and other psychological trauma which have seriously affected their job performance and family roles. Fatigue, anxiety and other physiological impacts resulting from it such as broken homes, dissatisfaction with life, depression, plausible use of drugs or alcohol and engaging in deviant or criminal activities are some of the possible consequences attributable to this work life imbalance. Furthermore, factors such as increasing commuting times as a result of urbanization, working overtime to meet demands of the job and family demands (such as when there is illness with a family member) have contributed considerably to employees' expending more time either on work or on family related activities and this most times results in work-family conflict.

Bearing in mind that hospital managers have responsibilities to both staff and patients and considering that we are in the 21<sup>st</sup> century, a century of technological advancement where any organization that wants to grow to a satisfactory cum optimal level of productivity has to keep both its technologies and employees updated, this paper seeks to examine if work-life balance practices and policies are practiced in the health sector in Nigeria and how they are impacting on the sector's productivity.

The basic research question for this paper is: Do work-life balance policies and practices exist in the Nigerian health sector? Other research questions include:

1. What is the impact of flexible working hours on employee job satisfaction in the health sector in Nigeria?

2. Does the availability of family leave programmes impact on employee morale in the health sector in Nigeria?
3. What is the effect of availability of on-site sleeping quarters on absenteeism in the health sector in Nigeria?
4. What recommendations can be proffered with regard to these work-life balance practices to ensure improved, efficient and sustained productivity?

The general objective of the paper is to examine if work-life balance policies and practices exist in the Nigerian health sector.

The specific objectives are:

- 1 To investigate the impact of flexible working hours on employee job satisfaction in the health sector in Nigeria.
- 2 To investigate the impact of the availability of family leave programmes on employee morale in the Nigerian health sector.
- 3 To investigate the effect of availability of on-site sleeping quarters on absenteeism in the Nigerian health sector.
- 4 To proffer recommendations on how these work-life balance practices can ensure improved, efficient and sustained productivity.

### **Methodology**

The methodology adopted in this investigation is library research that is anchored on analytical discussion. Materials from journals, textbooks, etc. were analyzed in line with the objectives of the study.

### **Work-Life, Family Conflicts and Productivity: A Review**

Work-family conflict, according to Flippo (2005), is a form of inter-role conflict in which role pressures from the work and family domains are mutually incompatible in some respects. The conflict exacerbates when the employees extend their efforts to satisfy their work demands at the expense of their family or vice versa (Cole, 2004). Considering that both work and family are significant parts of our lives, it becomes imperative to agree with Sehrish, Kiran, Rabia and Syed (2015), that any unipolar tilt towards one would bring about an unbalanced life. Therefore, integrating work and family is obviously part of the major challenges faced in everyday reality of majority of workers.

Work-life balance is a relatively new concept and could literally be seen as a condition of equilibrium where the demand of a person's work equals that of his personal life. Muchiti and Gachunga (2015) see work-life balance in its broadest sense, as a satisfactory level of involvement or 'fit' between the multiple roles in a person's life. This is based on their (Muchiti and Gachunga) inclination that paid work and personal life should be seen more like complementary than competing elements of life. The study of work-life balance involves the examination of people's ability to manage simultaneously the multifaceted demands of life.

Delecta (2011), (as cited in Sehrish, Kiran, Rabia and Syed , 2015), observed that various academic research on work-life balance elaborate that the concept portrays the ability to satisfy fundamental domains of life such as work and family. In continuance of Delecta's discussion, he elaborated that the demands of work domain of life included the hours spent working, the intensity of the work being done and the proportion of working hours actually spent in work. If more hours were taken from hours spent at home, thereby increasing the work intensity, the imbalance may possibly lead to both fatigue and anxiety and could cause some physiological impact that will have a negative effect on family domain of life. He assumed family demands as the roles of people as father, mother, wife etc, family commitments like children upbringing, taking care of the elderly family members and related house chores etc.

In an attempt to achieve a work-life balance, Yamamoto and Matsuurs (2012) highlighted some policies and practices adopted by Western organizations to include flexible working arrangements (including telecommuting opportunities and compressed work weeks), child-care programmes (such as provision of on-site child care facilities), family-care leave programmes (including maternal and paternal leave), provision of on-site sleeping quarters for the employees family and the establishment of departments for promoting work life balance practices. Each attempts to increase the flexibility by which employees can enact their work-roles whilst simultaneously enabling them to enact their family-based roles. A brief summary of the work-life balance practices is given below.

- a) Flexible working arrangements can be said to involve the ability of workers to make choices that influence when, where, and for how long they engage in work-related tasks. Flexible work time implies that employees must work a specific number of hours per week but are free to vary their hours to work within certain limits, thus allowing the employees to accumulate extra hours and turn them into a free day off each month. Compressed workweeks is a form of flexible work time where there is a transaction between number of hours worked in a day and the number of hours worked in a week so that the designated number of weekly hours is achieved in less than five days. Telecommuting is a virtual office phenomenon which is competing with the traditional work done from within a corporate office building. While working at home is not a new phenomenon (Harpaz, 2002), the outstanding feature of telecommuting is working from home but within the structure of an organizational network. The use of modern electronic communication from home or another location as a primary channel of contact between organizational members, clients / customers and stakeholders is the consistent feature of telecommuting. Hence, advancements in Information Communication Technology (ICT) could be said to have removed time and space barriers thereby making flexible offices, remote and teleworking possible.
- b) Child-care programmes include provision of on-site child-care facilities such as day care centers and schools within the premises of the organization mainly for the children and wards of employees thereby making it easy for parents to commute to work with their children, spend lunch and break together and leave with them at the close of the day's

work thus reducing the distractions incurred from running around to check on children and having to leave early to pick them up.

- c) Family-care leave programmes. Leave is an approved period of time that one must be away from one's primary job while maintaining the status of employee. Family-care leave, according to Cook (2004), encompasses maternity and paternity leave, as well as any other paid or unpaid leave policies. This contrasts with normal periods away from the workplace and working from home programmes and are considered exceptional circumstances.
- d) On-site sleeping quarters for the employees. Provision of sleeping quarters involving creating a space and time for naps and sleep-overs within the premises of the organization for employees.

The ability of any contemporary organization to successfully achieve its mission statements and objectives could be said to be reasonably dependent on how the organization's work force is able to manage concurrently the multifaceted demands of life, reduce conflict and utilize their time effectively and efficiently for optimal productivity. Hence, productivity could be interpreted as a measure of effectiveness (doing the right thing efficiently), which is outcome oriented. Akanwa and Ohiri (2003) see productivity as both the critical factor in economic and social development and the central theme in the work environment. Alugbuo (2004) opines that whichever way we look at the concept of productivity, it is the end result of every organization, the desires and goals which must be realized for both the organization, management and workers to move forward. To Favero (2014), productivity involves boosting organizational performance by becoming more efficient in specific areas, done by applying specific methods and tools and the end result is organizational excellence. Productivity has been noted by Anthony-Inman (2007), as being difficult to measure and can only be measured indirectly, that is, by measuring other variables and then calculating productivity from them. This difficulty in measurement according to Anthony-Inman (2007), stems from the fact that inputs and outputs are not only difficult to measure but are also difficult to quantify. For this paper, productivity will be measured indirectly using such firm performance measures as worker morale, level of satisfaction, turnover and absenteeism.

### **Empirical Review**

At this point, it is pertinent to state that integrating work and life produces divergent effects on productivity for different organizations. Yamamoto and Matsuura (2012) pointed out that many studies in business and labour economics literature have investigated the relationship between work life balance practices and firm performance measures, such as worker morale, turnover, stress, and absenteeism, as well as firm profit and productivity and came back with varying inconclusive results. Examples of such studies include those of Konrad and Mangel (2000) where work life balance practices have a positive impact on firm productivity and a contrasting study of 732 manufacturing firms in the United States, France, Germany, and the United

Kingdom by Bloom, Tobias, and John (2009; 2011) where no relationship between work life balance practices and firm productivity was found when management practices are controlled.

Mamedu (2016) asserts that very limited work has been done on work-life balance in Nigeria. Abdulraheem (2014) avers that work-life balance is a major factor that is affecting workers' performance and productivity in Nigerian higher education. Hassan (2015) assertion that work-life balance practices and policies are evident in Nigerian universities and that explicit work place policies have positive relationship with work-life balance of workers is seemingly in consonance with Nwosu's (2014) conclusion that work-life balance friendly policies have significant positive relationship with organizational productivity. Fapohunda (2014), found eight independent variables namely breaks from work, compressed working hours, self-rostering, tele-working, child-care, flexi-time, paid leave and job sharing significantly and positively correlated with work-life balance for both men and women.

In the health sector, Young (2013) cited two major studies performed several years ago which specifically looked at the work-life balance on doctors, both of which came to the conclusion that doctors want better work-life balance in their jobs. In the first study (The Ottawa Citizen, 2008), 2,800 medical students and 730 second year residents (about 93 percent of students and 88 percent of residents) attest that work-life balance plays an important part in accomplishing a satisfying and successful medical practice. In the second study, the Australian Medical Association (2008) revealed that 81 percent of hospitals surveyed want flexible working arrangements to allow them to spend more time with family and to continue further formal training. In his study of the work-life balance condition of doctors in public hospitals in a metropolitan city, Young (2013) concluded that a large number of the doctors affirmed to having a disturbed work-life balance, significantly reduced productivity and/or work quality, and elongated fatigue level, sleepiness and severe tiredness. Peng, Ilies and Dimotakis (2011), argue that professionals such as medical doctors and nurses find balancing their work and family lives very challenging as a result of their being required to work intensively and under non-typical work schedules most of the time (Burke, 2009).

In Pakistan, Malik, Gomez, and Saif (2010) examined the effect of work-life balance on turnover intention of doctors and found that doctors who were better able to manage their work and personal life were more satisfied with their job and had less intention of leaving their job. Okenwa (2016) confirmed through the results of regression analysis that there is a significant positive relationship between flexible work arrangement and commitment of nurses in public hospitals in Kenya. Adisa, Mordi and Mordi (2014) study of 131 female medical workers (60 female doctors and 71 female nurses respectively), in the six geopolitical zones of Nigeria illuminates that Nigerian female doctors and nurses are faced with dilemma in their efforts to achieve work-family balance.

### **Theoretical Framework: The Work/Family Border Theory**

Work-family border theory, also known as border theory, was propounded by Clark Sue Campbell in 2000 and is solely devoted to work and family domains. While stating that border

theory is a theory about work–family balance, Clark (2000) reiterated that work–family balance can be accomplished in different ways depending on factors such as the degree of resemblance between the work and family domains and the strength of the boundaries between them. The basic tenet of this theory is that 'work' and 'family' make up different domains or spheres which influence each other. Given their contrasting purposes and cultures, work and home can be likened to two different countries where there are differences in language or word use, differences in what constitutes acceptable behaviour, and differences in how to accomplish tasks. People are border crossers who make daily transitions between these two settings, often tailoring their focus, their goals and their interpersonal style to fit the unique demands of each. Though many aspects of work and home are difficult to alter, individuals can adjust to a reasonable extent the nature of the work and home domains and the borders and bridges between them in order to obtain a desired balance. Balance in this context depicts satisfaction and good functioning at home and at work with a minimum of role conflict.

Borders are separation lines between domains and take three main forms: physical, temporal, and psychological. Physical borders define where role-domain behaviour takes place. Temporal borders ascertain when role-specific work is done. Psychological borders are rules created by individuals and are concerned with when thinking patterns, behaviour patterns, and emotions are suitable for one domain but not for the other (Clark,2000). According to border theory, domain members, known as border keepers, play a crucial role in boundary management. They are involved in settling both what a domain is composed of and where the borders between domains lie. For instance, whereas supervisors act as border keepers within the work domain, spouses act as border keepers within the home domain. They may have differing views with regards to what constitutes work and family and offer differing degrees of accessibility that impact the ease with which individuals can cross borders in order to deal with competing work and family demands. For instance, not allowing personal phone calls at work prevents the family from intruding on the work domain.

The choice of work/family border theory as theoretical framework is based on a lot of premises. Firstly, work/family border theory is a new theory designed to remedy the criticisms and gaps of previous theories on work and family. Basically, the theory posits that people cross borders daily between the different but entangled domains of work and family. Secondly, work/family border theory can provide a framework for individuals and organizations to encourage better balance between work and families. To Clark (2000), “permeability, flexibility and blending combine to determine the strength of border”. Border strength is determined by its degree of permeability, flexibility, and blending. According to Clark, whereas border blending occurs when there is a great degree of permeability and flexibility; strong borders are impermeable and inflexible and do not allow blending. Hence, the theory buttresses the need for work-family programmes that allow employees to have control in managing their work-family boundaries. If for instance, work and family life become so highly integrated, it blurs the work-family boundary, resulting in such negative issues as work-family conflict, stress, depression and dissatisfaction with both work and family life. Thus, knowledge of the theory will embed the

need to be supportive of the schedules set by employees to ensure that family need is accommodated whilst optimal productivity is assured.

In conclusion, work-family border theory has important implications for both research and policy on work and family. It addresses the building of work-family boundaries as a complex interaction between employees' strategies and preferences, the socio-cultural contexts in which they are embedded, and the peculiar meanings attached to work and family. The theory charts an interesting and worthwhile course for researchers and practitioners alike to navigate.

### **Work-Life Balance in the Health Sector in Nigeria**

The relative paucity of existing literature on work-life balance among medical doctors and nurses in Nigeria is one of the factors that steered this study in that direction. The Nigerian health sector is characterized by private and government / public hospitals with the Medical and Dental Council of Nigeria (MDCN) regulating its affairs. The health workforce, according to Adeloye, David, Olaogun, Auta, Adesokan, Gadanya, Opele, Owagbemi and Iseolorunkanmi (2017), includes all persons involved in activities primarily devoted to enhancing health and is the bed rock of every functioning health sector in any country, without which both clinical and public health services will not be delivered to the populace. Careers in hospitals historically demand a selfless emphasis on caring for one's patients. It won't be wrong to assume that hospital personnel would have difficulties in meeting the needs of patients if their own needs are not met. Ramsay (1999) rightly postulates that the work aspect of doctors can very well be likened to a professional who is married to his/her work hence, it is relatively difficult to remove work from non-work related activities with regards to doctors.

According to Fapohunda (2014), developing economies like Nigeria and other African countries are saddled with serious economic setbacks, labour market pressures in addition to poor social infrastructures, poverty, high unemployment and corruption. These conditions to (Fapohunda), further exacerbate the work and life of the average Nigerian worker whose aim is to make a living at work. Most workers in Nigeria inclusive of those in the health sector are affected by lack of work flexibility, elevated work pressures and long working hours; a situation that decreases their job performance and productivity.

Poor employee productivity is a major concern for every organization. This problem could be attributed to either lack of organizational policies that could improve productivity, lack of awareness of the existence of such policies or employees' reluctance to use the practices in spite of being aware of them. According to Uneke, Ogbonna, Ezeoha, Oyibo, Onwe and Ngwu (2007), Nigeria is notably one of the several major health-staff exporting countries in Africa with a sizeable number of physicians, nurses and other medical professionals being lured away to developed countries in search of fulfilling and lucrative positions. The causes of this brain drain could be attributed to inadequate infrastructure and poor compensation packages. For example, Nnamuchi (2007) in Uneke et al (2007) notes that 432 nurses legally emigrated from Nigeria to work in Britain between April 2001 and March 2002, compared with 347 between April 2000 and March 2001, out of a total of 2000 (legally) emigrating African nurses. Awofeso (2008)

points out that hundreds of Nigerian-trained doctors continue to migrate annually although data on Nigerian doctors legally migrating overseas is scarce and unreliable. This is largely because most wealthy ‘destination’ nations like Australia currently make it virtually impossible for overseas-trained doctors to migrate to their countries primarily on the basis of medical skills. Dussault and Franceschini (2006) and Zurn (2002) are in agreement that more generous benefits such as tuition reimbursement, flexible work hours, bonuses based on experience or length of commitment, study and recreation leaves, employment opportunities for doctor’s spouses, better accommodation facilities and improvements in educational institutions for doctor’s children (most of which are family-friendly policies) go a long way in tackling the issue of brain drain and impact positively on productivity.

### **Discussion and Analysis**

Every institution, the Nigerian health sector inclusive, is saddled with the challenge of effectively managing a knowledgeable workforce while anticipating optimal productivity. Since productivity is the efficient and effective use of resources with minimum waste and effort to achieve outcome, a decline in productivity is a cost that many organizations cannot afford. Work-life balance is a new concept which literally depicts a condition of stability, where the demand of a person’s work equals that of his personal life. Fatigue, anxiety and other physiological impacts resulting from it such as broken homes, dissatisfaction with life, depression, use of drugs or alcohol and engaging in deviant or criminal activities are some of the possible consequences attributable to work-life imbalance and the concurrently reduced organization productivity. This paper seeks to add more credence to the need to imbibe work-life balance practices in organizations particularly the medical facilities. This is based on the principle that in order for organizations to succeed, it is important that they invest in man and not in just a plan. Organizations should be mindful of the interests of their employees at all times, ensuring that they are able to balance their work and family life at all times. Border theory buttresses the need for work-family programmes that allow employees to have control in managing their work-family boundaries through the analysis that, if work and family life become so highly integrated, it blurs the work-family boundary, resulting in such negative issues as work-family conflict, stress, depression and dissatisfaction with both work and family life. Hence there is the need to maintain a balanced work-life at all times for optimal productivity.

Flexible work hour is one of work-life balance practices whose benefits, according to Dalton and Mesch (1990), are already being harnessed in the Western world. Some of these benefits include reduced overtime, reduced hostility towards management, increased autonomy for employees all of which lead to every organization's ultimate goal: increased and sustained productivity. Seemingly in agreement, Wolf and Beblo (2004), posit that companies using flexible work-time operate more productively as well as more efficiently.

According to UNICEF (2019), “family friendly policies such as paid parental leave, breastfeeding breaks, and quality childcare and child benefits are not yet a reality for most parents around the world”. UNICEF (2019) goes further to assert that “although many

governments and companies have already adopted these policies, the change is not fast enough or substantial enough to address the balance that workers strive to achieve between work and family.” It follows then that there is need for aggressive inclusion of these policies since Ansari, Chimani, Baloch and Bukhari (2015) stated that provision of paid leave enhanced employee production and satisfaction as it stimulates employees' nerves after relaxation, enabling them to produce more.

### **Conclusion**

The drive for increased productivity has become the fundamental objective of organizations in Nigeria and elsewhere. It is obvious that while employees wish to work in facilities that will reduce their hectic schedule hours and affect positively their work life as well as family life, employers equally seek to enhance optimal productivity. Bearing in mind that employees are an integral part of an organization's success and failure, it is of utmost importance that organizations integrate work-life policies and practices into employee's work environment to make for sustained optimal productivity in both the organization and the employees' personal life. This is the crux of this article.

### **Recommendations**

The fierce competition globally has made it pertinent for organizations to radically alter and initiate new workplace trends that will provide for improved and sustainable productivity for their organizations. Nigeria, being part of the global environment is not excluded in this quest.

It is recommended that organizations in Nigeria, especially the health sector and institutions, should look far and beyond to learn the positive effects of work-life balance, (which is one of these new trends), on sustainable optimal productivity in organizations.

Furthermore, there is need for a comprehensive academic research work to be carried out on work-life balance and productivity in Nigeria with focus on analyzing the disparities in the availability of work-life balance practices in medical institutions/facilities in Nigeria. This recommendation borders on the knowledge that there is paucity of literature in that area.

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