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Impact of Night Shift on Work life Balance of Doctors in Punjab

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ABSTRACT

The term work/life Balance coined in 1986 in USA, has evolved around the idea of balancing work, life and family responsibilities. The interlinked concepts of work/life balance, work/family balance, work/life conflict, work/family conflict have gained prominence in the recent years due to the changes in the society and the workplace. The study was conducted to see the impact of night shift on work life balance of doctors in Punjab. The data was collected from 4 major cities of Punjab, having maximum number of hospitals. From each city 25 doctors from 5 hospitals were taken. The sample size was 100. The structured questionnaire was used. The objective of study was to check impact of night shift on personal and professional life of doctors. The other objective was the check the impact of night shift on physical and mental health of doctors. In order the fulfill objective, test were applied.

Keywords: Work life Balance, personal, professional.

1. INTRODUCTION

The term work/life Balance coined in 1986 in USA, has evolved around the idea of balancing work, life and family responsibilities. The interlinked concepts of work/life balance, work/family balance, work/life conflict, work/family conflict have gained prominence in the recent years due to the changes in the society and the workplace. Work-Life Balance means bringing work, whether done on the job or at home, and leisure time into balance to live life to its fullest. It doesn't mean that you spend half of your life working and half of it playing; instead, it means balancing the two to achieve harmony in physical, emotional, and spiritual health. Work-Life Balance does not mean an equal balance. Trying to schedule an equal number of hours for each of your various work and personal activities is usually unrewarding and unrealistic. Life is and should be more fluid than that. Your best individual work-life balance will vary over time, often

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on a daily basis. The right balance for you today will probably be different for you tomorrow. The right balances for you when you are single will be different when you marry, or if you have children; when you start a new career versus when you are nearing retirement. There is no perfect, one-size fits all, balance you should be striving for. The best work- life balance is different for each of us because we all have different priorities and different lives. However, at the core of an effective work-life balance definition are two key everyday concepts that are relevant to each of us. They are daily Achievement and Enjoyment, ideas almost deceptive in their simplicity.

Indian families are undergoing rapid changes due to the increased pace of urbanization and modernization. Indian women belonging to all classes have entered into paid occupations. At the present time, Indian women's exposure to educational opportunities is substantially higher than it was some decades ago, especially in the urban setting. This has opened new vistas, increased awareness and raised aspirations of personal growth. This, along with economic pressure, has been instrumental in influencing women's decision to enter the work force. Most studies of employed married women in India have reported economic need as being the primary reason given for working.

1.1. Shift work

There has been extensive research on the effects of shift work on health. This has found that shift work disrupts the body's circadian rhythms, that is, its daily cycle. It also affects the quality and quantity of sleep a person gets and Disrupts family and social life. This impact on the health of the shift worker can potentially cause: Tiredness, mental stress; cardio-vascular diseases; gastro-intestinal disorders; menstrual disorders; reproductive system dysfunction; poor performance; and increased accidents.

Night work causes particular health and safety problems. All the adverse effects of working shifts are worse among night workers. Paying attention to the legal protection afforded to night workers and to health and safety best practice is therefore particularly important. The Regulations limit night workers' normal hours (excluding overtime) to an average of 8 hours in every 24 hours. This can be averaged over a reference period of 17 weeks. They also limit hazardous night work to an absolute maximum of 8 hours. Adult night workers have the right to a free health assessment before starting night work and at regular intervals thereafter. Night workers have the right to be transferred from night work to suitable work that is not night work if, in the opinion of a qualified health professional, they are unfit for night work.

1.2. Factors affecting Work life Balance

Although there are many factors which effect work life balance of doctors and paramedical staff but in this research the main factor which has been taken is "Turnover, job satisfaction, performance appraisal". Now the point which arise is that how turnover and other factors affect the staff of health service department.

Work life balance (WLB) plays a positive role in minimizing the dissatisfaction among employees with respect to their jobs (Eikhof, Warhurst & Haunschild, 2007; Osterman, 1995). The determined organizations provide WLB opportunities to their employees to manage work and life activities comfortably (Eikhof, et.al, 2007), that leads to increased job satisfaction of the employees and helps in reducing the turnover rate (Burke, 2000). Eikhof, et.al, (2007) expressed that job satisfaction is the most important factors which effect life more than the work hours. Work life balance provide an opportunity to employees to freely able to use flexible working hour programs, to balance their work and other commitments like family, hobbies, art, traveling, studies etc. instead of only focusing on work (Frame & Hartog, 2003). Previous studies (Butt

and Lance, 2005; Cabrita and Heloísa, 2006) also reveal that improving company's employee work life balance, leads not only to greater productivity but greater company loyalty and job satisfaction. According to Osterman, (1995) organizations introduce family friendly policies to respond to the practical problems associated with the recruitment and retention of the employees. Healthy practices of work life balance leads to downward trends in job dissatisfaction and turnover.

1.3. Long working hours

More and more people are working longer hours and allowing themselves less down time. Doing a search online easily illustrates that this is a pervasive problem that is even affecting workers outside of the United States. Some companies have been in the news lately because, in an effort to ensure that their employees are taking time off without keeping in touch through e-mail, they are closing for a week at a time, usually between Christmas and New Years. Unfortunately, that is not an option in healthcare. What drives this need to work constantly? There are numerous causative factors. Increased connectivity, originally thought to be a means to help work life balance, has now become one of the biggest problems. Not only can we check our e-mail from home but we can use our blackberries to check e-mail everywhere that we go. We can be in touch constantly, and now bosses and coworkers have come to depend on always being able to reach us. Connectivity forces us to try to do more all of the time, and essentially, it just means that we are working more hours even when we are at home.

2. REVIEW OF LITERATURE

Mehta. Pallavi, Kundnani. Neera (2015): Conducted a study which indicated that Work Life Balance had been done with a view keeping in mind the momentum with which the concept had become pervasive due to changing work-life style and with major aim to bring an insight into various forces surrounding it which hinders its equilibrium and solutions to overcome this disequilibrium. The current synthetic review helps in identifying the effects of organization support, work-family conflict, workplace stress and personality on work-life equilibrium.

S. Ashwini, Kumaraswamy. M (2014): Conducted study and investigated that in terms of Indian context, the concern over Work-Life Balance was gradually becoming a common talk. Each role an individual play, whether personal or professional had different set of demands. Multiple problems were faced leading to complexities in managing the individual, the family, the organization and the society. Study, deals with Work-life Balance of the banking employees in order to determine the level of their Work Life Balance which was having very high importance on their total well being and hence their productivity and entire business growth.

Adisa.Toyin Ajibade, Mordi.Chima, Mordi.Tonbara (2014): Conducted study and investigated the challenges and the realities of work-family balance among Nigerian female doctors and nurses in their hysteric efforts to balance their work and family obligations. The paper explores sundry issues that arise in the process of juggling their work and family commitments, and proffer recommendations based on these issues.

Sharma. Jatindera, Mehta. Dharmendra (2014): Conducted study that work-life balance was gradually becoming a common talk. When employees go back to their homes, they should not carry any organizational stress with them. An individual had two roles to play i.e. personal and professional. Each role had different set of demands. When such role demands overlap, multiple problems were faced leading to losses for all concerned i.e. the individual, the family, the organization and the society.

Maren. R (2013): To analyze that if organizations offer facilities to reduce work-life conflicts, it will lead to improvement in employees' job satisfaction.

Chahal (2013): Conducted study to increase the efficiency of the employee's bank should timely appraise their employees and encourage them to work hard because satisfied employees are reason for the success of the organization. When employees were satisfied with their jobs they become loyal and committed to the organization.

Vartha Raj & Vasantha (2012): Specified that the ultimate performance of its employees which in turn depends on several factors. The relationship between personnel and professional life can be achieved through emotional intelligence. Better emotion management was necessary in order to achieve objective of life.

Fatima and Sahibzada (2012): Concluded that due to heavy workload in universities, staff becomes dissatisfied. Hence, universities should develop strategies that could facilitate faculty needs to balance between work and life activities to achieve competitive advantage.

3. NEED AND SIGNIFICANCE OF STUDY

The need of this research was to fill the research gap that existed between the previous researches and the present research. In the present scenario, high demands of excelling in their respective fields and high workload in form of night shifts amongst skilled professionals creates mental stress and job dissatisfaction affecting their professional and personal lives.

This study will assess the stress factors and its effect on the proficiency and efficiency of professionals especially doctors and paramedical staff. This study will be beneficial in striking balance between their work as well as family life. The results of this study can also be extrapolated to other professions with similar working hours.

3.1. Research Problem

There had been extensive research on the effects of shift work on job satisfaction, performance, health and family life. Previous Researches suggest that it affects the quality and quantity of sleep a person gets and disrupts family and social life. When a person devotes more time to work and less time to home, then it affects its family and marital life. So the research problem is to find out the results of night shift on work life balance of Doctors in relation with job satisfaction, performance, health, Absenteeism, Job turnover etc. Therefore the study is on Impact of Night Shift on Work life Balance of Doctors in Punjab.

3.2. Research Methodology

Research Methodology is a way to systematically solve the research problem. The Research Methodology includes the various methods and techniques for conducting a Research.

3.3. Sampling Design

Sampling can be defined as the section of some part of an aggregate or totality on the basis of which judgments or an inference about aggregate or totality is made. The sampling design helps in decision making in the following areas:

3.4. Universe of the study

The universe comprises of two parts as theoretical universe and accessible universe.

- 1. Theoretical universe: It will include all the Hospitals throughout the universe.
- 2. Accessible universe: It will include hospitals of Punjab which consist of 21 districts, in which we are going to select 4 major cities of Punjab having maximum number of hospitals.

3.5. Sampling Unit

It indicates who is to be surveyed. In this project, sampling unit consisted of Doctors working in hospitals of Punjab. The hospitals will be Multi specialty.

3.6. Sample Size

It refers to the elements to be included in the study. So In order to have conceptualized view of all types of respondents in our study, we will cover 4 major cities from of Punjab.

3.7. Sampling Technique

Random sampling technique in which particularly Stratified Sampling will be used to collect the data from the respondents.

4. DATA COLLECTION

Both primary and secondary methods will be used for collection of data.

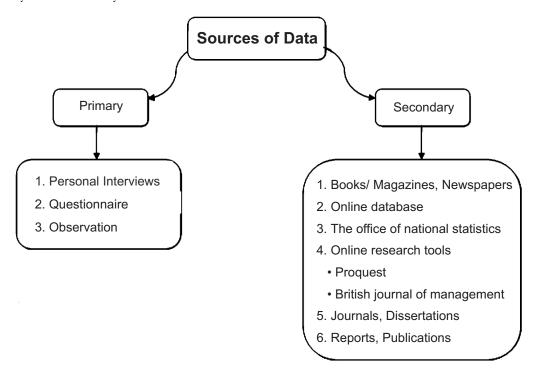


Figure 1: Showing the sources of data

Primary data: Primary data are the information collected firsthand from sources such as historical documents, literary texts, artistic works, experiments, surveys, and interviews. The primary data for present study will be collected from structured questionnaire and Interviews from doctors and Para- medical staff and through observation.

Secondary Data: Secondary data is data collected by someone other than the user. Common sources of secondary data for social science include censuses, organizational records and data collected through qualitative methodologies or qualitative research.

Structured questionnaire comprising different parts will be used for as primary source for collection of data whereas library research (journals, dissertations books, etc.) will be used as secondary source for collecting data.

5. OBJECTIVES OF THE STUDY

The following will be the objective of my study:

- 1. To compare the work life balance of doctors working in day shift and night shift in relation to some factors.
- 2. To study the impact of night shift on personal and professional life of doctors.

5.1. Hypothesis

- 1. H_0 : There is no difference in work life balance of doctors working in day shift and night shift in relation to some factors.
- 2. **H**₂: There is significant difference in work life balance of doctors working in day shift and night shift in relation to some factors.
- 3. H_0 : There is no significant impact of night shift on personal and professional life of doctors.
- 4. H_3 : There is significant impact of night shift on personal and professional life of doctors.

5.2. Scope of Study

The scope of study is restricted to 4 major cities of Punjab, having maximum number of hospitals *i.e.* Jalandhar, Amritsar, Ludhiana, Chandigarh.

5.3. Data Interpretation

5.3.1. T-Test

Interpretation : In table 1, on the basis of day and night shift, different factors has been taken into consideration like work life Balance, Absenteeism, personal and professional life of doctors. The result shows that Doctors working in night shift have more mean than working in Day shift. In case of balancing work and life, the mean score in day time is 54 which is more than day score.

Table 1 (Here 1 stands for day shift and 2 stands for night shift)

Group Statistics								
	Current_shift	N	Mean	Std. Deviation	Std. Error Mean			
Work_Life_Balance	1	50	28.52	2.764	.391			
WOIK_LITE_Datatice	2	50	54.00	.000	.000			
Absentism	1	50	17.92	3.355	.475			
Absentism	2	50	23.52	.863	.122			
Domonal Life	1	50	43.94	5.293	.749			
Personal_Life	2	50	21.72	5.650	.799			
Professional_Life	1	50	32.56	3.111	.440			
	2	50	11.00	.000	.000			

Similarly in case of Absenteeism, Mean score of day shift doctor is 17.92, whereas mean score of doctors in night shift is 23.52. so this shows absenteeism caused more due to night shifts.

But in case of Personal and Professional life Mean in night is less than in day time, which shows that Personal and Professional life is more effected in day shift than in night shift.

Table 2
Table showing how shift affecting work life balance, absenteeism, personal and professional life

t-test for Equality of Means

95% Confidence Interval of the Difference

		t	df	p value	Mean Difference	Std. Error Difference	Lower	Upper
Work Life Balance	Equal variances assumed	-65.173	98	.000	-25.480	.391	-26.256	-24.704
	Equal variances not assumed	-65.173	49.000	.000	-25.480	.391	-26.266	-24.694
Absenteeism	Equal variances assumed	-11.429	98	.000	-5.600	.490	-6.572	-4.628
	Equal variances not assumed	-11.429	55.452	.000	-5.600	.490	-6.582	-4.618
Personal Life	Equal variances assumed	20.295	98	.000	22.220	1.095	20.047	24.393
	Equal variances not assumed	20.295	97.586	.000	22.220	1.095	20.047	24.393
Professional Life	Equal variances assumed	49.000	98	.000	21.560	.440	20.687	22.433
	Equal variances not assumed	49.000	49.000	.000	21.560	.440	20.676	22.444

In fig table 2, P value is less than .05, so this shows that there is significant relation between the work life balance of doctors working in day and night shift.

Table 3 (Here 1 stands for male and 2 stands for female)

	Gender	Gender N		Std. Deviation	Std. Error	95% Confidence Interval for Mean		Minimum	Maximum
	Genuer	1 V	Mean	3m. Deviaion	31a, E1101	Lower Bound	Upper Bound	Iviimmm	1v1uximim
	1	45	44.18	12.748	1.900	40.35	48.01	28	54
Work_Life_ Balance	2	55	38.87	12.735	1.717	35.43	42.32	28	54
	Total	100	41.26	12.951	1.295	38.69	43.83	28	54
	1	45	20.98	3.652	.544	19.88	22.08	16	24
Absentism	2	55	20.51	3.800	.512	19.48	21.54	11	24
	Total	100	20.72	3.723	.372	19.98	21.46	11	24
	1	45	29.60	12.816	1.910	25.75	33.45	15	45
Personal_Life	2	55	35.47	11.547	1.557	32.35	38.59	15	45
	Total	100	32.83	12.424	1.242	30.36	35.30	15	45
Professional_ Life	1	45	19.31	10.787	1.608	16.07	22.55	11	33
	2	55	23.80	10.952	1.477	20.84	26.76	11	33
	Total	100	21.78	11.053	1.105	19.59	23.97	11	33

Interpretation: Work life balance of doctors on the basis of gender is as follows. The table 4, showing that work life Balance of males' means is 44.18 and female mean is 38.87, which shows that males Doctors get more difficulty in balancing their Work and life whereas female doctors can manage better in balancing their life.

Absenteeism doesn't make any difference in relation to gender. The table showing the figure in case of male, it is 20.98 and in females, it is 20.51. So absenteeism doesn't depend upon the gender.

Personal life plays an important role in one life, the table showing that Mean of male is 29.60 and female is 35.47 which shows the life of female doctors is more affected than men.

Professional life is another important factor for the study, the table showing the value in male is 19.31 and in female is 23.80, which showing that female professional life is more disturbed than male.

Table 4

		Sum of Squares	df	Mean Square	F	p value
Work_Life_Balance	Between Groups	696.553	1	696.553	4.291	.041
	Within Groups	15908.687	98	162.334		
	Total	16605.240	99			
Absentism	Between Groups	5.437	1	5.437	.390	.534
	Within Groups	1366.723	98	13.946		
	Total	1372.160	99			
Personal_Life	Between Groups	853.601	1	853.601	5.799	.018
	Within Groups	14426.509	98	147.209		
	Total	15280.110	99			
Professional_Life	Between Groups	498.716	1	498.716	4.215	.043
	Within Groups	11596.444	98	118.331		
	Total	12095.160	99			

In table 4, table showing that , P value in case of work life balance is .04 which is less than .05 that means there is significant relation between gender and work life balance. In case of absenteeism value of p is .534 which is more than .05, which shows that there is no significance relation between gender and absenteeism.

Table 5, showing different qualifications which may affect the work life balance, Absenteeism, Personal Life and Professional life.

Table 5

Descriptives									
		Νī	M	C(1 D : (:	Std.	95% Ce Interval	onfidence for Mean	M: :	Maximum
	Qual	N	Mean	Std. Deviation	Error	Lower Bound	Upper Bound	Minimum	
Work_	BAMS	35	42.11	13.141	2.221	37.60	46.63	28	54
Life_ Balance	MBBS	51	39.22	13.005	1.821	35.56	42.87	28	54
	MD	14	46.57	11.244	3.005	40.08	53.06	28	54
	Total	100	41.26	12.951	1.295	38.69	43.83	28	54
Absentism	BAMS	35	22.46	1.462	.247	21.95	22.96	21	24
	MBBS	51	20.04	3.939	.552	18.93	21.15	11	24
	MD	14	18.86	5.157	1.378	15.88	21.83	11	22
	Total	100	20.72	3.723	.372	19.98	21.46	11	24

				Descript	ives				
		N T	M	Mean Std. Deviation	Std.	95% Confidence Interval for Mean		3.50	16
	Qual	N	Mean		Error	Lower Bound	Upper Bound	Minimum	Maximum
Personal_	BAMS	35	34.51	10.106	1.708	31.04	37.99	22	45
Life	MBBS	51	33.43	13.967	1.956	29.50	37.36	15	45
	MD	14	26.43	10.234	2.735	20.52	32.34	15	45
	Total	100	32.83	12.424	1.242	30.36	35.30	15	45
Professional_ Life	BAMS	35	21.06	11.120	1.880	17.24	24.88	11	33
	MBBS	51	23.51	11.004	1.541	20.41	26.60	11	33
	MD	14	17.29	10.314	2.756	11.33	23.24	11	33
	Total	100	21.78	11.053	1.105	19.59	23.97	11	33

Similarly in case of personal and professional life, *p* value is more than the other value, which shows there is significant relation between gender and personal and professional life.

Interpretations: In table it is showing how different qualifications affects the work life balance, Absenteeism, personal and professional life of doctors. Mean score of BAMS doctor is 42.11, MBBS is 39.22, MD is 46.57, which shows that work life balance of specialist doctors is more affected than others. Similarly incase of absenteeism, Mean score score of BAMS doctor is 22.46, MBBS is 20.04, MD is 18.86, which shows that absenteeism is more in BAMS doctors comparisons to others. Incase of personal life Mean score score of BAMS doctor is 34.51, MBBS is 33.43, MD is 26.43, in this case personal life of doctors is more affected than others. Incase of professional life Mean score score of BAMS doctor is 21.06, MBBS is 23.51, MD is 17.29, which shows that professional life of MBBS doctors is more affected than other doctors.

Table 6

ANOVA									
		Sum of Squares	df	Mean Square	F	p value			
Work_Life_	Between Groups	633.641	2	316.821	1.924	.152			
Balance	Within Groups	15971.599	97	164.656					
	Total	16605.240	99						
Absentism	Between Groups	177.838	2	88.919	7.222	.001			
	Within Groups	1194.322	97	12.313					
	Total	1372.160	99						
Personal_Life	Between Groups	691.429	2	345.714	2.299	.106			
	Within Groups	14588.681	97	150.399					
	Total	15280.110	99						

		ANOVA							
		Sum of Squares	df	Mean Square	F	p value			
Professional_ Life	Between Groups	453.672	2	226.836	1.890	.157			
	Within Groups	11641.488	97	120.015					
	Total	12095.160	99						

Table 6, showing different qualifications which may affect the work life balance, Absenteeism, Personal Life and Professional life.

Interpretation: In figure we can see that four factors are taken *i.e* Work life balance, Absenteeism, Personal and Professional life. Here p value is more incase of work life balance, which mean there is no significant difference between work life balance and qualification.

In Absenteeism *p* value *i.e* .001 is less than .05 which means there is significant relation between absenteeism and qualification. In personal life, p value .106 is more than .05 which means there is no significant relation between personal life and qualification. In professional life p value is .157 which is more than .05 which mean there is no significant relation between professional life and qualification of doctors.

5.4. Findings

- 1. On the basis of day and night shift, different factors has been taken into consideration like work life Balance, Absenteeism, personal and professional life of doctors. The result shows that Doctors working in night shift have more mean than working in Day shift. In case of balancing work and life, the mean score in day time is 54 which are more than day score, which shows that day shift is more hectic than night shift.
- 2. In case of Personal and Professional life Mean in night is less than in day time, which shows that Personal and Professional life is more affected in day shift than in night shift.
- 3. In table 2, P value is less than .05, so this shows that there is significant relation between the work life balance of doctors working in day and night shift.
- 4. While comparing two shifts, it shows that day shift is more hectic than the night shift. It was compared on different factors like Age, Gender, Qualification, Marital status, city etc.
- 5. BAMS doctors face more problem than MBBS and MD doctors. As from the result, work life balance, personal and professional life of BAMS doctors is more affected than others.
- 6. Married doctors are busier than unmarried doctors.
- 7. Many times due to heavy load of work they feel frequent headache

6. LIMITATION OF STUDY

- 1. Time consuming questionnaire for doctors.
- 2. Sample size could be increased for detail study.
- 3. Lack of reliable data.
- 4. Time limit was an issue, as to get time from doctors busy schedule.

7. CONCLUSIONS

There was a time when the boundaries between work and home were fairly clear. Today, however, work is likely to invade your personal life — and maintaining work-life balance is no simple task. This might be especially true if you're concerned about losing your job due to restructuring, layoffs or other factors. Work and home life are both necessary, but they should be fulfilling and satisfying. To achieve not only balance but also peace, fulfillment, and happiness in your life, know yourself, take action, and maintain as much control over both work and home as possible.

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