

UNIVERSITY OF CAPE COAST

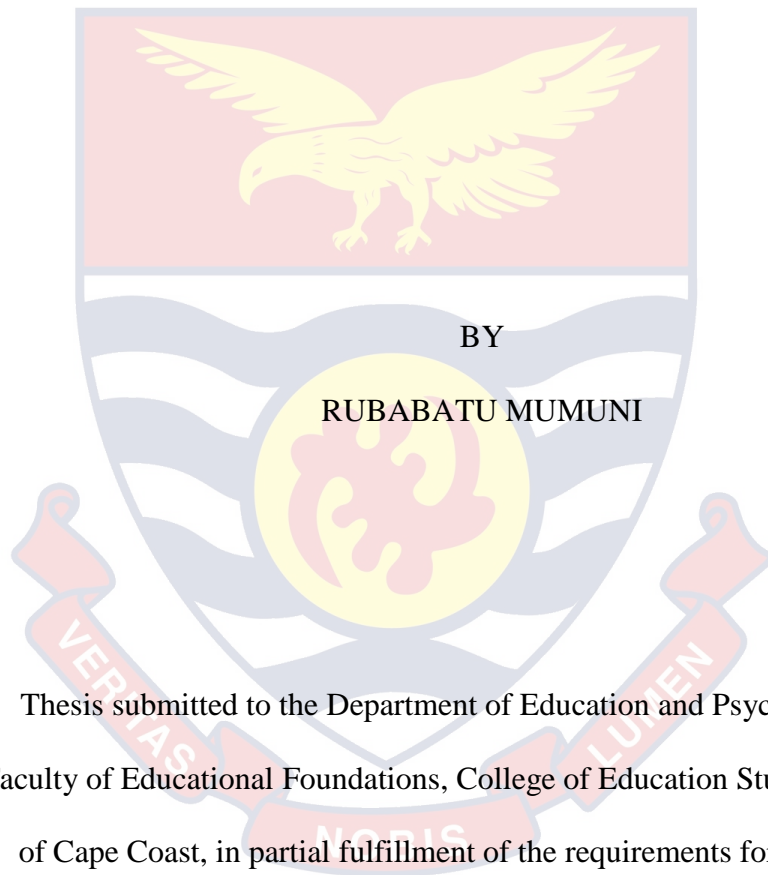
WORK-LIFE BALANCE AND PSYCHOLOGICAL WELL-BEING OF  
MENTAL HEALTH NURSES IN ANKAFUL PSYCHIATRIC HOSPITAL:  
THE MODERATING ROLE OF PERSONALITY TRAIT.



2020

UNIVERSITY OF CAPE COAST

WORK-LIFE BALANCE AND PSYCHOLOGICAL WELL-BEING OF  
MENTAL HEALTH NURSES IN ANKAFUL PSYCHIATRIC HOSPITAL:  
THE MODERATING ROLE OF PERSONALITY TRAIT.



Thesis submitted to the Department of Education and Psychology of the  
Faculty of Educational Foundations, College of Education Studies, University  
of Cape Coast, in partial fulfillment of the requirements for the award of  
Master of Philosophy degree in Clinical Health Psychology.

NOVEMBER 2020

DECLARATION

**Candidate's Declaration**

I hereby declare that this thesis is the result of my original work and that no part of it has been offered for another degree in this university or elsewhere.

Candidate's Signature:..... Date.....

Name:.....

**Supervisors' Declaration**

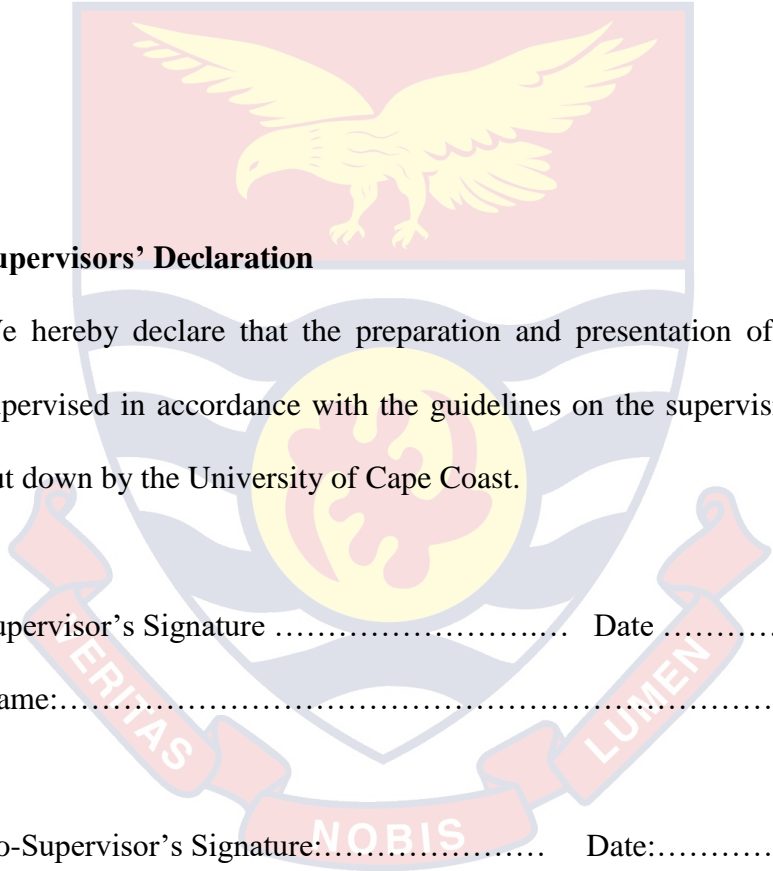
We hereby declare that the preparation and presentation of this thesis was supervised in accordance with the guidelines on the supervision of the thesis put down by the University of Cape Coast.

Supervisor's Signature ..... Date .....

Name:.....

Co-Supervisor's Signature:..... Date:.....

Name:.....



## ABSTRACT

The goal of this study was to look into mental health nurses' work-life balance and psychological well-being at Ankaful Psychiatric Hospital. Descriptive survey design was used for this research. Census method was used to select One hundred and thirty-three (133) mental health nurses. Data were collected using adopted questionnaire that is; psychological well-being questionnaire, work-life balance questionnaire and personality trait questionnaire. Statistical procedures used in data analysis were mainly percentages and frequency distribution, means and standard deviations, Pearson's product Moment Correlation Coefficient and process procedure by Hayes (2013) for moderation analysis. The study discovered that mental health nurses of Ankaful psychiatric hospital had a balanced work-family life. Moreover, respondents had high psychological well-being. Work-life balance and psychological well-being also had a weak positive relationship. Extraversion has also been revealed to be a moderating factor in the association between work-life balance and psychological well-being. Other personality qualities such as openness, neuroticism, agreeableness, and conscientiousness had no bearing on the work-life balance-psychological well-being link. To maintain the better psychological well-being of mental health nurses, work-based techniques such as work-conflict management strategies should be implemented.

## KEYWORDS

Psychological well-being

Work-life balance

Personality trait

Counselling

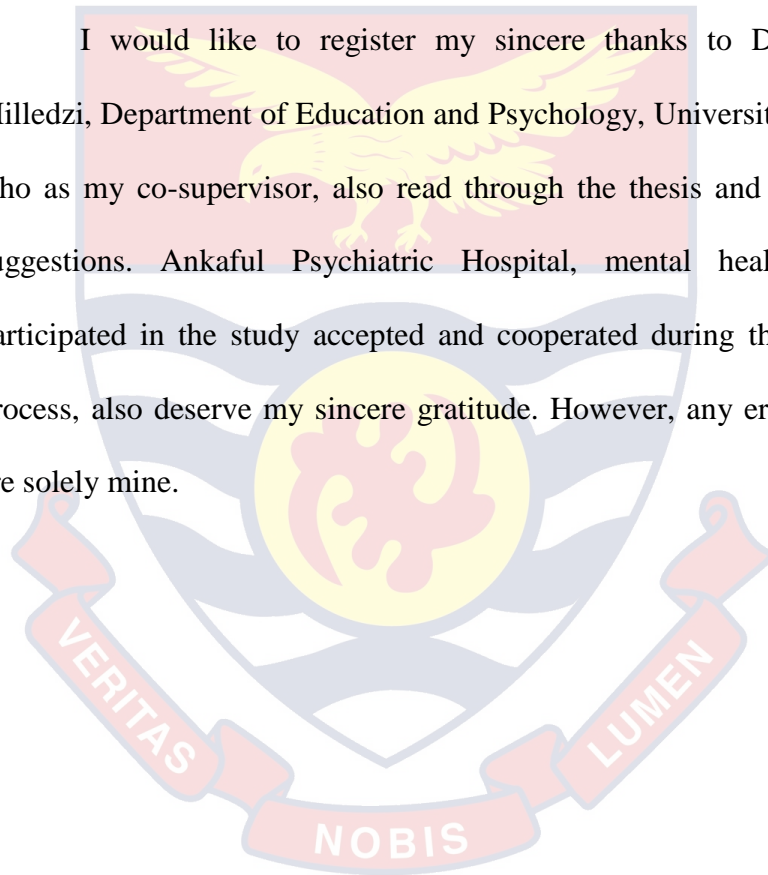
Communication



## ACKNOWLEDGEMENTS

In the conduct of this study, I relied on the help from many people without whose assistance the work would not have been successful. I wish to recognize and acknowledge my indebtedness to Mr Joseph Kwateng Ofosuhene-Mensah, Department of Education and Psychology of the University of Cape Coast, who as my principal supervisor, painstakingly read through the original thesis and offered valuable suggestions.

I would like to register my sincere thanks to Dr. Eugene Yaw Milledzi, Department of Education and Psychology, University of Cape Coast, who as my co-supervisor, also read through the thesis and offered valuable suggestions. Ankaful Psychiatric Hospital, mental health nurses who participated in the study accepted and cooperated during the data gathering process, also deserve my sincere gratitude. However, any errors or shortfalls are solely mine.



DEDICATION

To my lovely Auntie, Ayanata Dimbie



## TABLE OF CONTENTS

Contents	Page
DECLARATION	ii
ABSTRACT	iii
KEYWORDS	iv
ACKNOWLEDGEMENTS	v
DEDICATION	vi
TABLE OF CONTENTS	vii
LIST OF TABLES	xii
LIST OF FIGURES	xiii
CHAPTER ONE: INTRODUCTION	
Background of the Study	2
Statement of the Problem	6
Purpose of the Study	8
Research Questions	8
Hypothesis	9
Significance of the Study	9
Limitation	10
Definition of Terms	10
The Organization of the Study	11
CHAPTER TWO: REVIEW OF RELATED LITERATURE	
Overview	12
Conceptual Review	13
Overview of Health	13
Concept of Family	14



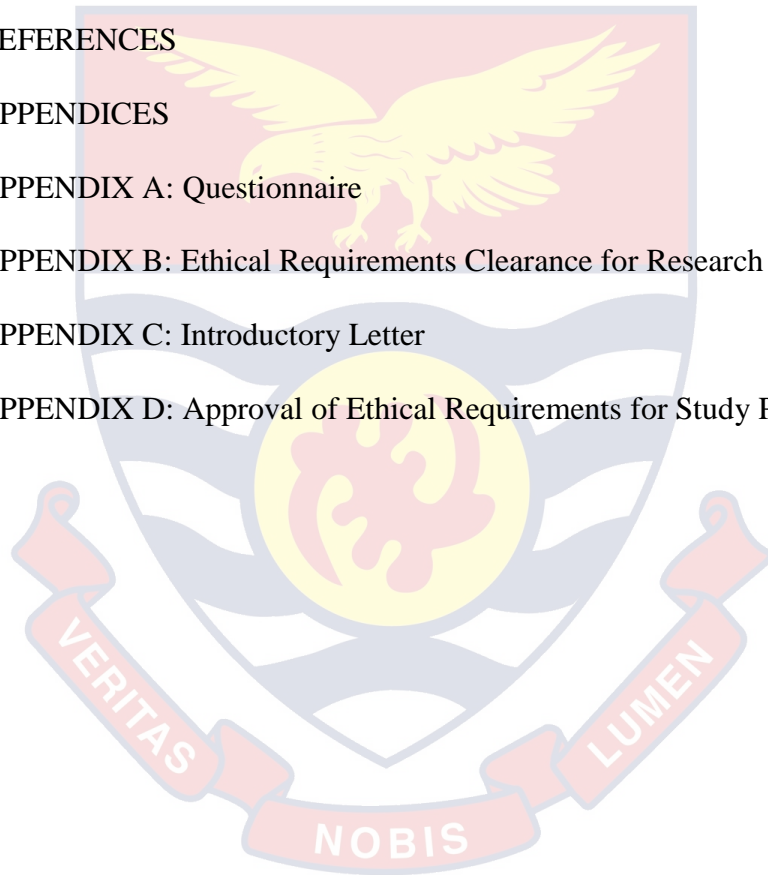
Work Satisfaction	16
Concept of Work-Life Balance (WLB)	17
Antecedents of Work-life Balance	18
Work and Family Organizational Policies	19
Workplace Flexibility	19
Long Work Hours	20
The Concept of Work-Family Conflict	20
Work-Family Enrichment (WFE)	22
Family Work Direction	24
Work-Life Balance and Demographics	25
Consequences of Work-Life Balance and Work-Life Imbalance	25
Concept of Psychological Well-Being	26
Psychological Well-Being Components	28
Autonomy	29
Personal Growth	29
Environmental Mastery	30
Purpose in Life	30
Positive Relations with Others	30
Self-Acceptance	31
Concept of Personality	32
The Big Five (5) Personality Dimensions	34
Extraversion	34
Openness to Experience	34
Conceptual Framework	35
Agreeableness	36

Neuroticism	36
Conscientiousness	37
Spill-Over Theory	37
Empirical Review	38
Psychological Well-Being of Mental Health Nurses	44
Personality Moderating the Relationship between Psychological Well-Being and Work-Life Balance	50
Summary of the Review	52
<b>CHAPTER THREE: METHODOLOGY</b>	
Overview	54
Research Design	54
Study Area	56
Population	56
Sampling Procedure	57
Data Collection Instruments	58
Questionnaires Structure	58
Work-Life Balance Scale	58
Psychological Well-Being Scale	59
Validity and Reliability of the Data Collection Instrument	60
Pilot Testing the Questionnaires	60
Ethical Considerations	61
Data Collection Procedures	62
Data Processing and Analysis	63
Chapter Summary	63

## CHAPTER FOUR: RESULT AND DISCUSSION

Overview	65
Background Information of Respondents	66
Results of Research Questions	67
Research Question One: What is the work-life balance experience of mental health nurses at Ankaful psychiatric hospital?	68
Research Question Two: What is the level of psychological well-being of mental health nurses at Ankaful Psychiatric Hospital?	69
Assumptions for Parametric Test Analysis	73
Normality	73
Checking for Outliers	73
Discussion	81
Work-Life Balance of Mental Health Nurses	81
Psychological Well-Being of Mental Health Nurses	82
Relationship between Work-Life Balance and the Psychological Well-Being of Mental Health Nurses	83
Personality Trait Moderating the Relationship between Work-Life Balance and Psychological Well-Being of Mental Health Nurses	84
Extraversion	85
Neuroticism	85
Conscientiousness	86
Agreeableness	86
Summary	87

CHAPTER FIVE: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS	
Overview of Research Problem and Research Methods	88
Summary of Key Findings	88
Conclusions	89
Recommendations	90
Suggestions for Future Research	90
REFERENCES	91
APPENDICES	116
APPENDIX A: Questionnaire	116
APPENDIX B: Ethical Requirements Clearance for Research Study	121
APPENDIX C: Introductory Letter	122
APPENDIX D: Approval of Ethical Requirements for Study Protocol	123

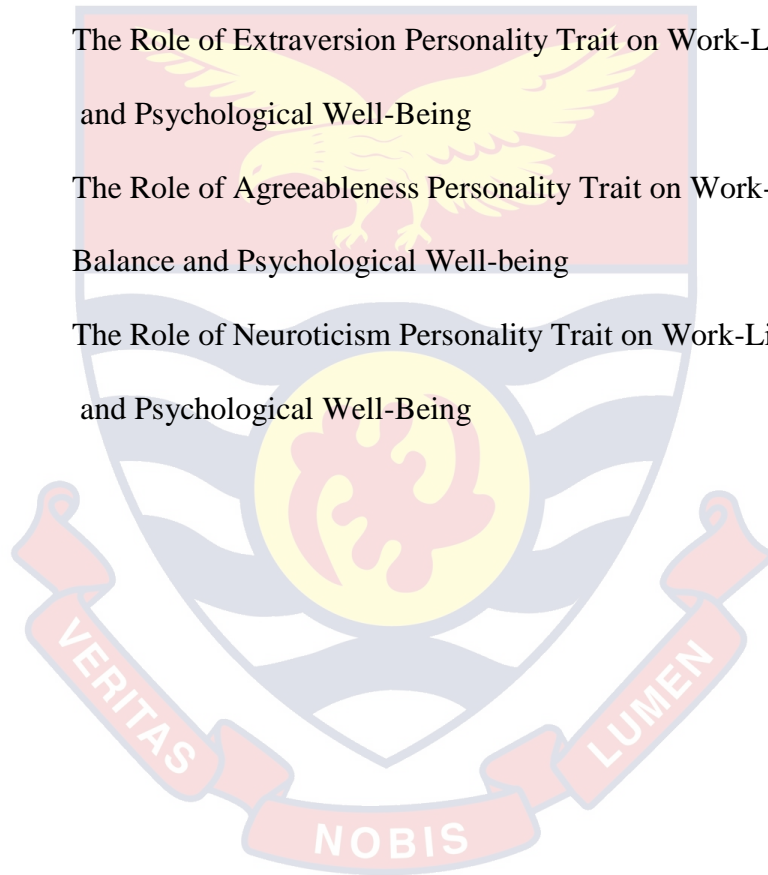


LIST OF TABLES

Table		Page
1	Reliability Estimate of Questionnaire	61
2	Demographic Variables of Respondents	66
3	Work-life Balance of Mental Health Nurses	68
4	Psychological Well-being of Mental Health Nurses	70
5	Relationship between Work-life Balance and Psychological Well-being	72
6	Moderating Role of Openness Trait on Work-Life and Psychological Well-being	74
7	Moderating Role of Conscientiousness Trait on Work-Life and Psychological Well-being	75
8	Moderating Role of Extraversion Trait on Work-Life and Psychological Well-being	77
9	Moderating Role of Agreeableness Trait on Work-Life and Psychological Well-being	78
10	Moderating Role of Neuroticism Trait on Work-Life and Psychological Well-being	80

## LIST OF FIGURES

Figure		Page
1	The Moderating Role of Personality	35
2	The Role of Openness Personality Trait on Work-Life Balance and Psychological Well-Being	75
3	The Role of Conscientiousness Personality Trait on Work-Life Balance and Psychological Well-Being	76
4	The Role of Extraversion Personality Trait on Work-Life Balance and Psychological Well-Being	78
5	The Role of Agreeableness Personality Trait on Work-Life Balance and Psychological Well-being	79
6	The Role of Neuroticism Personality Trait on Work-Life Balance and Psychological Well-Being	80



## CHAPTER ONE

### INTRODUCTION

Work-life balance and psychological well-being of mental health nurses at Ankaful Psychiatric Hospital: the moderating role of personality trait is the key issue under investigation. This current study is linked to Munir, Nielson, Garde, Albertsen and Carneiro (2012) which showed that psychological well-being and work-life balance are linked in different ways. The role of personality factors in the relationship between work-life balance and mental health nurses' psychological well-being appears to be underappreciated globally. However, in Ghana, both the link between work-life balance and mental health nurses' psychological well-being, as well as the moderating role of personality trait in the link, appear to be missing. The goal of this study was to see how personality traits influenced the relationship between work-life balance and psychological well-being among mental health nurses in Ghana, with a special focus on nurses at Ankaful Psychiatric Hospital. The study's findings were intended to provide the Mental Health Authority with information that would help mental health nurses improve and maintain positive psychological well-being while balancing their lives and job. Theoretically, by examining the moderating ability of personality trait, this study aimed to raise awareness and add to knowledge about work-life balance and psychological well-being among mental health nurses, laying the groundwork for future research into work-life balance and psychological well-being among mental health nurses by other scholars.

## Background of the Study

The term work-life balanced gained its root from the United States of America (USA) in 1986. This term developed around the knowledge of the principle of juggling the responsibilities of family and work. In recent years, the interconnected work-life balance principles, work-family equilibrium, friction between life and work, conflict between family and work, and cultural and workplace developments have all been prominent. Work-family balance is described as happiness at work and at home, with good functioning, and some little or no conflict between positions (Parkes & Langford, 2008). According to Clark (2000), work-family balance refers to a person's ability to balance work and family responsibilities. The Psychological well-being Construct was developed to accommodate subjective well-being in response to the alleged failure of Subjective well-being to understand various humanist conceptions of well-being associated with identity, intention, and relationship (Ryan & Déci, 2001).

Historically, trait study started with a proliferation of characteristics that later became more comprehensive. Subsequently, numerous efforts were made to minimize data and finally move to the Big 5 (McCarthy et al., 2008). More lately, researchers who reacted to the Big 5's victory led to even advanced level factor Models (Musek, 2007).

In social life, work has an important role (McDaid, Curran & Knapp, 2005). People function for different motives, external motivation, financial motivation and self-development (Kostaman, 2015). Most people work and communicate many times in their workplaces, consequently, the working environment is most likely to affect them and vice versa. According to



Harnois and Gabriel (2000), work can impact an individual's psychological well-being by causing the person to appreciate his/her social status, identity, and structure. Day and Randell (2014) clarify that the right office should foster positive elements like the employees' appreciation and development. Besides, a mentally sound workplace may also give workers a sense of flow and involvement.

Work and non-working time are difficult to reconcile effectively irrespective of one's life or occupation (Emslie & Hunt, 2009). The presence of imbalance between life and work is connected to mental and behavioral matters such as anxiety, depression, disgrace, loss of efficiency and alcoholic issues (Kalliath & Brough, 2008). Besides, inefficient work-life balance thus contributes to increased stress and burnout. Irrespective of sex, gender identity, marital status, the balance of non-work and work activities is a problem for both men and women (Powell & Greenhaus, 2010). In today's environment, globalization and technological advances have enhanced the essence of a global work-life balance (McDaid et al., 2005). The present atmosphere of the workplace is indicative of structures demanding activities, and the influx of highly skilled employees. Employees must learn more fantastic skills and adapt more to their survival at work.

As per the World Health Organization explanation, health is seen as the lack of illness and a real whole of the person's psychological, social, and physical status. It led to a transition from a medical model over-emphatic to creating a public health model (Conway & Macleod, 2002). At a macro level, attention from transnational and international organizations can represent the value of workplace well-being. The World Health Organization (WHO)

Framework for Occupational Health Promotion/ workplace health promotion has been one of the key facets for improving working conditions (Burton & WHO, 2010).

Nursing jobs are demanding by nature, but some are more so than others. Psychiatric nursing has a reputation for being more demanding than regular nursing (Quaicoe, 2018). According to Sutherland and Cooper (1990), psychiatric patients and nurses may engage in hazardous behavior, irregular behavior, or ineffective communication. The status of nurses working at these hospitals is lower than that of regular nurses. Furthermore, relating to patients on a human level, which is a key aspect of psychiatric nursing, makes the profession a potentially delicate minefield, according to Barker (1996). The primary source of stress for mental health nurses, according to Al-Zayyat and Al-Gamal (2014), is their obligations in caring for mentally ill patients. Furthermore, psychiatric patients, particularly those who have relapsed, can be more aggressive and violent. Because mental health nursing is a high-stress profession, it is prone to work-life conflicts.

Although suitable family-work arrangements can be made, problems may still occur (e.g., arrangements for the family work) (Riley et al., 2012). For example, people can have a conflict if they have to meet their deadlines and deal with a child's sudden illness. Every day with adversity and stressors for health professionals, especially those involved in mental health and their families in general, can be overwhelming. How employees and their families meet daily challenges can influence the well-being and adaptability of individuals and their prosperity (Riley et al., 2012).

Senge, Scharmer, Jaworski and Flowers (2005) pointed out that corporations need to view their own employees as a whole, use their hearts rather than focusing on profit alone and forget past paradigms that tend to impair workers and corporate well-being. The new paradigm that will allow employees to maintain a stable working and family interface has perhaps arrived. The time to take a model that ensures human growth and the well-being of people and organizations to thrive in the synergistic win-win paradigm is here.

Personality variables (e.g. Big Five personality, personality type A) help to improve the psychological well-being of the individual (Brown, Ryan & Creswell, 2007). The American Psychological Association (2017) notes, that every person differs in thought, feeling, and behavior patterns. However, while emotions can fluctuate during a day, it is presumed that a person is stable after a certain age (McCrae & Costa, 2003). Personality is thought of to have some amount of influence on a person's general life management both at work and at home. One of the most studied models is the Big Five based on McCrae's and Costa's early work, which is measured by the Big Five; consists of five personality components: Agreeableness, openness to experience, conscientiousness, neuroticism and extraversion. The central collection of arrangement characteristics of the Big Five has been suggested by John and Srivastava (1999). According to Grant, Langan-Fox and Anglim, (2009) alternatives to the structured framework can be incorporated in the Big Five model. In earlier study, the link between the Big Five and the Psychological well-being was concentrated (for example Schmutte & Ryff, 1997).

In Ghana, psychological issues (such as stress, burnout and well-being) that health workers, especially mental health workers face in the country have gain substantial attention of researchers (Gobena, 2016; Quaicoe, 2018). These studies generally agree that mental health workers' duties at work are tedious, repetitive and stressful. The idea gathered at this point may be that, there is high chance of certainty that mental health workers' work demand and accompanied stress may dovetail into their personal family life which may counter affect their family satisfaction and general well-being. Clark and Farmer (1998) said that home satisfaction is a way of achieving close relationships and personal happiness. An empirical research by Clark (2000) found that versatility at the workplace increases workforce health and well-being and the balance between life and work.

Moreover Clark revealed that people whose working hours are flexible have a healthier work-family relationship. Previous research on mental health nurses' psychological well-being and work-life balance concerns has been lacking (Naruse et al., 2012; Quaicoe, 2018). As a result, the researcher evaluated the mental health and work-life balance of mental health nurses in Ghana, using Ankaful Psychiatric Hospital as a study site.

#### Statement of the Problem

Munir et al. (2012) show how psychological health and work-life balance are linked in various ways. According to Grossi et al. (2006), the word psychological well-being can mean a sense of satisfaction or absence of mental agony. It can also be considered as quality of life as well (Hallberg, Ringdahl, Holmes & Carver, 2005). The positive emotional aspects of well-

being, appreciation, self-recognition, satisfaction, hope and optimism can also be described as mental well-being (Seligman & Csikszentmihalyi, 2000). The development of workforce and the growth of dual-earning families had a big influence on a person's role at home, especially with regard to work-life balance. Personality studies show a strong link between key personality traits and psychological well-being, as well as other measures of happiness (Anglim & Grant, 2016; Sun, Kaufman & Smillie, 2018).

Several studies have been carried out in Ghana, on mental health practitioners, regarding mental health, their job, problems they face in their field of work, and mental health as a field (Raja et al., 2010); Dixon, 2012; Antwi-Bekoe & Mensah, 2009). For example, Antwi-Bekoe and Mensah who worked on the basic needs of mental health system in Ghana, reported that there exists a limited workforce for the profession. They also reported in a different study about mental health challenges in Ghana (Antwi-Bekoe & Mensah, 2009). Dixon (2012) further reported that those needs (such as financial and psychological well-being) were still unmet and peculiar to the mental health organization not only in Ghana but Africa as a whole, following his research. Gobena (2016) also looked at community workers' perspectives on mental health promotion and delivery in mental health facilities, finding that mental health awareness is low and that the profession is stigmatized.

Quaicoe (2018), in what appears to be a relatively recent study, looked into job-related stress among mental health practitioners and found that many of the mental health nurses felt their employment to be stressful, the foregoing studies emphasize the fact that issues relating to mental health professionals have been of interest and well investigated among a lot of scholars in Ghana.

What appears to be missing has to do with work-life balance link with psychological well-being of mental health nurses in the Ghanaian context. The purpose of this study was to investigate the link between work-life balance and psychological well-being among Ghanaian mental health nurses, with a specific focus on those employed at the Ankaful psychiatric hospital.

#### Purpose of the Study

The major goal of this research is to explore personality factors moderating ability in the link between psychological well-being and work-life balance among mental health nurses at the Ankaful Psychiatric Hospital.

Precisely, the research objectives sought to:

1. Explore the work-life balance of mental health nurses at Ankaful Psychiatric Hospital.
2. Examine the psychological well-being of mental health nurses at Ankaful Psychiatric Hospital.
3. Assess the link between work-life balance and psychological well-being of mental health nurses at Ankaful Psychiatric Hospital.
4. Examine if the big five personality traits will moderate the link between work-life balance and psychological well-being of mental health nurses at Ankaful Psychiatric Hospital.

#### Research Questions

1. What is the work-life balance experience of mental health nurses at Ankaful Psychiatric Hospital.?
2. What is the level of psychological well-being of mental health nurses at Ankaful Psychiatric Hospital.?

### Hypothesis

1.  $H_0$ : There is no association between work-life balance and psychological well-being of mental health nurses at Ankaful Psychiatric Hospital.

$H_1$ : There is an association between work-life balance and psychological well-being of mental health nurses at Ankaful Psychiatric Hospital.

2.  $H_0$ : Personality trait will not moderate the connection between work-life balance and psychological well-being of mental health nurses at Ankaful Psychiatric Hospital.

$H_1$ : Personality trait will moderate the association between work-life balance and psychological well-being of mental health nurses at Ankaful Psychiatric Hospital.

### Significance of the Study

This research is important for a variety of reasons. First, data on work-life balance and psychological well-being among mental health nurses will aid the government in developing better and more effective psychological well-being management policies in public hospitals. Second, the study results will provide the Mental Health Authority with information relevant especially to help mental health nurses develop and maintain positive psychological welfare and balance their work. Furthermore, the study's findings will raise awareness of the link between work-life balance and psychological well-being among mental health nurses, offering deeper insights to policymakers such as the Mental Health Authority and the Psychiatric Hospital Management Team. This study may inform health planners in Ankaful Psychiatric Hospital to

establish a favorable working condition for the employees. Finally, the study will serve as a foundation for future research on the work-life balance and psychological well-being of health-care personnel.

### **Delimitations**

This research was confined to only mental health nurses at Ankaful Psychiatric Hospital who were at post as at the period of the data gathering.

#### Limitation

The tool used to collect the data was a questionnaire, and its shortcomings cannot be ignored. When questionnaires were given to respondents, some might not have time to read them carefully and answer them accurately and might have provided answers that seem to show the good part of the problem and overlooking the bad part, on issues that bothered on their integrity (Bratton, Mattes & Gyimah-Boadi 2005). It could affect the results of the study. Moreover, only a single psychiatric hospital was used, so the sample size was not too large, which might affect the generalizability of the study.

#### Definition of Terms

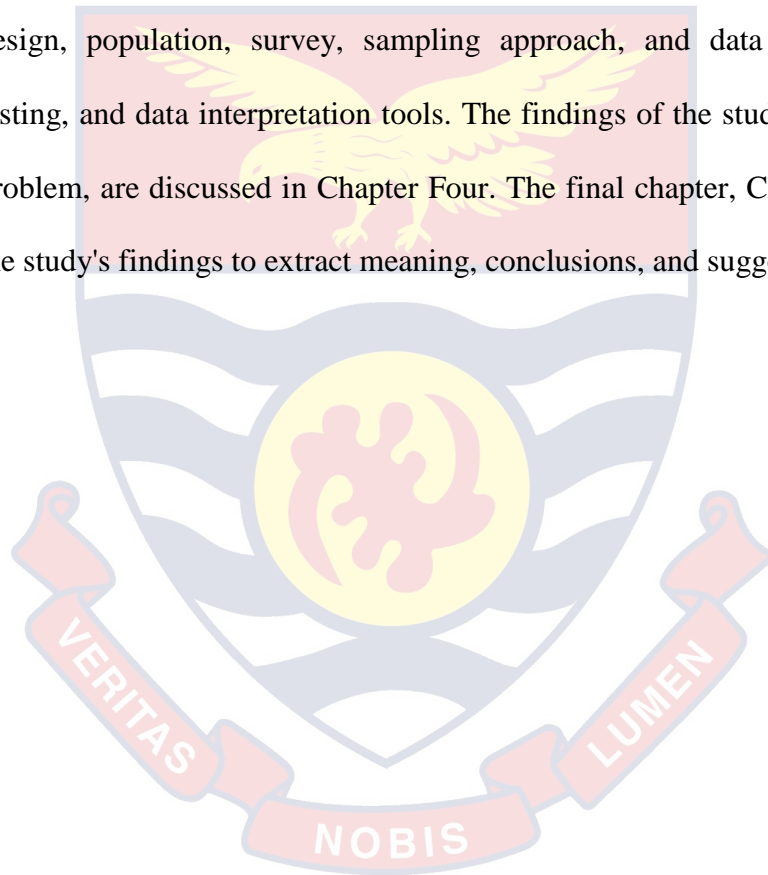
**Work-life balance:** This is how a person can manage mental, behavioral and time loads of paid job, family, and private duties at the same time.

**Psychological well-being:** This refers to being happy or feeling good as well as accomplishing one's vital life goal.



## The Organization of the Study

The first chapter of the research contains the introduction, background of the study, problem statement, purpose of the study, hypothesis, research questions, relevance of the study, limitation, and delimitation. In Chapter Two, the literature review is discussed. The conceptual, theoretical, and empirical foundations of the problem are investigated in this chapter. In Chapter Three, the research procedures used in the study are discussed, including the research design, population, survey, sampling approach, and data collection, pre-testing, and data interpretation tools. The findings of the study, as well as the problem, are discussed in Chapter Four. The final chapter, Chapter Five, uses the study's findings to extract meaning, conclusions, and suggestions.



## CHAPTER TWO

### REVIEW OF RELATED LITERATURE

#### Overview

This chapter reviews previous researches in connection with the stated questions of the study. It highlights the conceptual, theoretical frameworks and empirical evidence surrounding the study. The areas reviewed include the following:

1. Conceptual bases of the study
  - i. Overview of Health
  - ii. Concept of Family
  - iii. Concept of work-life Balance
  - iv. Concept of psychological well-being
  - v. Concept of personality
2. Theoretical framework:
  - i. The spill-over theory
3. Empirical review
  - i. Work-life balance of health workers.
  - ii. Psychological well-being of mental health nurses.
  - iii. Association between work-life balance and psychological well-being of mental health workers
  - iv. Regulating role of personality trait in the association between work-life balance and psychological well-being.

## Conceptual Review

### Overview of Health

The World Health Organization (2007) defines health as the absence of disease and a total mental, physical, and social well-being condition of a person. Based on the above definition, there has been a shift in emphasis from overemphasizing the medical model to creating a public health model (Conway & Macleod, 2002). Antonovsky (1987) and Strumpfer (1995) further corroborated the new theoretical model in health management strategies that focused on a pathogenic orientation of disease treatment to a salutogenic /fortigenic approaches to health promotion and prevention of disease. Besides, Salutogenesis is regarded as the study of physical fitness rather than the learning of ailments, as the attention is traced from the root of health.

More importantly, Strumpfer (1995) noted that the source of power is as a result of Fortigenesis. Further elaborations reveal that if the emphasis is on the treatment of disease, then it is crucial to have a pathogenic orientation. The salutogenic process, on the other hand, focuses on health promotion. With particular attention to mental health, the plan deals with paradigm changes. Depression problems, for example, which are near related to anxiety, stress, and work-life imbalance, are currently affecting many people around the globe (World Health Organization, 2007).

Despite the fact that previous health-care programs mostly concentrated on psychopharmacological medicines for depression, anxiety, and stress, modern researchers have employed strategies to improve psychological well-being (Conway & Macleod, 2002; Edwards, 2005).

## Concept of Family

Barnett and Hyde (2001) note that the multiple aspects of the term 'family' are difficult for a lot of researchers to explain. In the conventional family theories, the emphasis is on the married couples with children. Whereas the men are engaged in the world of work, their wives are also engaged in household activities and childcare (Hilliard, 2007). According to Barnett and Hyde this paradigm does not inculcate single-parents families, lesbians and gays. Grzywacz and Marks (2000) also say that some researchers edge their sample to married couples or persons with kids and indicate that a conceptualization of the family is too specific to such a limitation, that they also have obligations to their parents, siblings, and other relatives, mostly as individual and childless adults, they should, therefore, be involved in family work studies.

Workers with extensive dependency duties, such as elder care, childcare, or family members, had higher work-family conflict than those who did not, according to (Frone, Russell, & Cooper, 1992; Greenhaus & Beutell, 1985). According to Grzywacz and Marks (2000), family care or strain determined the extent of family-work conflict. As found by Grzywacz and Marks Lower critical levels of family and burdens have shown lower stress among working women, and lower levels of family support have shown increased adverse consequences between the two. Grzywacz and Marks identified children as factors that draw on the tension between family and work. Grzywacz and Marks also came out that men with older children above five years of age perform better than males with children under five years of age. However, the family work disputes between women and men who had

children of all ages are more pronounced than those who had kids. Marks and Grzywacz also identified married status as an influential issue in the work-family conflict that unmarried women and men have less stress than women and men in marriage.

This research refers to both non-traditional and traditional sense of family, including married persons with children or without children. The family also refers to an individual's overall home life, including parents, siblings, other family members, partners, spouses, and children.

### **Family Satisfaction**

Several researchers have used the word family satisfaction to mean different concepts in their lives. For instance, life satisfaction (e.g. Diener & Oishi, 2005), or family happiness (e.g. Hill, 2005). Satisfaction at life is a decision process in which individuals judge their lives by their particular standards, according to Diener, Inglehart and Tay (2013). It involves well-being and healthy relationships; however, individuals may be regarded or weighed in diverse ways (Diener & Oishi). Di Domenico and Fournier (2014) claim that household fulfillment refers healthy relations and personal satisfaction. The research covers 'family gladness', including family members and parents, and does not limit the term 'family' to children, wives, and partners. This terminology was mainly used when the questionnaire was completed to differentiate participants' working lives and families. This language helps prevent misunderstanding, for example, if enjoyment with family life and work-life can be converted into happiness.

A research study like (e.g. O'Driscoll, Brough, Timms & Sawang, 2010) establishes the relations between people's well-being, job satisfaction,

and families. However, in the literature, very few have focused exclusively on family happiness and employee wellness, which performs a central role in workers' well-being and can impact employee productivity (Hill, 2005). Because family and working lives are the main fields of everybody's life (Clark, 2000), family and employment satisfaction are clearly linked. According to Hill higher levels of family happiness can also increase satisfaction at work participation in the organization and productivity growth.

### Work Satisfaction

Several researchers have concluded that the correlation between satisfaction at work and health is clear and positive, (Greenhaus, Collins & Shaw, 2003; Hill, 2005). An aspect of Job satisfaction is the emotional satisfaction centered on the general work context and satisfaction based on an efficient examination of working conditions (e.g., hours of work, compensation, and pension schemes), unique opportunities, and accomplishments (Turkyilmaz, Akman, Ozkan & Pastuszak, 2011).

Job satisfaction, according to Clark and Farmer (1998), relates to a sense of accomplishment and financial security. Factors determining work satisfaction, are two groups of factors: (a) intrinsic factors such as education, employment value, work objectives, and family requirements, and (b) factors relating to work such as job safety, variety of skills, overload, and conflict of work and more generous care (Paton, Jackson & Johnston 2003).

This research relates to emotional job satisfaction and tests job satisfaction using subjective emotional judgments made by individuals to ascertain whether persons are happy with their jobs (Behery, Paton & Hussain, 2012).

### Concept of Work-Life Balance (WLB)

In health literature, combining work and life is crucial concept. There are many different perspectives on how to describe, measure, and research work-life balance (Grzywacz & Carlson, 2007). While it stands for 'work-life balance,' some researchers also use different terms. Clark (2000), Frone (2003), Clarke, Koch, and Hill (2004), for example, use the term 'work-family match.' Burke (2000) and Burke, Koyuncu, and Fiksenbaum (2008) use the terms 'work-personal life balance' and 'work-life balance,' respectively. Work-family balance is frequently associated with traditional homes, i.e. married couples with or without children (Barnett & Hyde, 2001), To avoid any ambiguities, "work-life balance" refers to both non-traditional and traditional family arrangements in this study.

Work-life balance, according to Grady, McCarthy, Darcy, and Kirrane (2008), is a more specific term that includes community, leisure, and personal time. Work-life balance, in its broadest sense, comprises all areas of a worker's personal and professional lives; this means that WLB should pay attention to people, families, jobs, neighborhoods, and society as a whole. Nevertheless, this research omitted society and social factors and concentrated on people, families, and workplaces (i.e., mental well-being workplaces) due to the specificity of the material in relations to the nature of this work and clarification.

A variety of work-life balance ideas are proposed in the health literature. WLB is defined as happiness and well-functioning at work and at home with the least degree of position conflict (Clark, 2000). WLB is frequently referred to as the interval and total of work and family

accomplishments (Greenhaus et al., 2003). Furthermore, Frone (2003) proposes a four-fold taxonomy on the combination between work and life, characterizing WLB as low interplay levels and high interplay levels. Furthermore, WLB, according to Grzywacz and Carlson (2007), is the attainment of mutually agreed-upon and declared role-related goals in the home and workplace. When families or careers are the two crucial elements of somebody's life, it is essential to compromise on family and employment. Any conflicts between family and occupation will cause resentment and risk to staff's well-being (Clark, 2000; Frone, 2000). Happiness, the absence of position conflict, and an overall sense of calm are all visual components of WLB, according to (Clarke & Kitzinger, 2004; Clark, 2000). Balance between work and family domains also includes involvement balance, time balance, and satisfaction balance, according to Greenhaus et al. (2003).

The four observable magnitudes of the balance between family and work responsibilities identified by Frone (2003), are work-family conflict, work-family change, family-work change, and family-work conflict. Because these elements have bidirectional effects on the domains of family and work, involvement in the employment role can impede or increase performance in the family role, and vice versa (Frone, 2003; Grzywacz & Marks, 2000; Greenhaus & Beutell, 1985).

#### Antecedents of Work-life Balance

Work-life balance solutions have been developed to increase employee productivity and efficiency while also reducing stress, anxiety, and disease. There haven't been many studies in this area, although there have been a few.



## Work-Family Conflict

Work-life balance was found to be significantly and negatively related to family-work conflict (i.e. time) and work-family conflict in a study done by Kalliath and Monroe (2009). (i.e. time, stress, and behavior). These researchers discovered that work-family time-based conflict is a critical predictor of work-family imbalance, implying that this construct must be overcome if employees are to achieve optimal work-life balance. Work-family balance was found to be highly and significantly linked with supervisor and coworker support.

### Work and Family Organizational Policies

Firms have answered to work-family imbalance by implementing work-family-friendly plans (e.g., elder care, flexible work schedules, daycare, and telecommuting), which are referred to as work-life interventions (Clark, 2001). However, these programs are mainly seen as a successful tool for employee recruiting and retention from a boss's perspective (Brough, O'Driscoll, & Kalliath, 2005).

### Workplace Flexibility

Clark (2000) has indicated that organizational liveness increases employees' strength, well-being, and balance of work life. Clark concluded that individuals with flexible work schedules are more harmonious with the work-family, fewer job disputes, and job fulfillment. The same research showed that supervisory assistance positively affected workers, enabling them to enforce family policies and show employee empathy during family crises. The study revealed that managers helped by managers. With the five work-

family balance indicators excluding home satisfaction, significant positive results have been found.

### Long Work Hours

In studies involving service personnel, white and blue-collar workers revealed a weak link between work-family balance and many working hours (Casper, Eby, Bordeaux, Lockwood & Lambert, 2007). Lengthy employed hours leading to health problems, job frustration, and reduced employee well-being were found increased absenteeism, and decreased production, turnover, and injury degrees (Sparks, Cooper, Fried, & Shirom, 1997).

A survey of 50,000 respondents from a Dutch retail outlet was performed by Taris, et al. (2006) and concluded that longer working hours had no detrimental effect on well-being and health. Weston, Grey, Qu and Stanton (2004) found that fathers working more than 60 hours a week are more comfortable than comparable fathers with low job satisfaction who work 40 hours a week. Elements such as workers' engagement and job gratification have a big role in work-life balance Taris (2006). Poelmans, Kalliath and Brough (2008) have argued that in order to achieve long-term objectives, individuals should lose large sums of money (i.e. long working hours) and endure conflicts and disharmony. Despite the significance of these findings, little research has been done on the impact of dissonance on mental health nurses' work-life balance and psychological well-being.

### The Concept of Work-Family Conflict

A family-work conflict occurs when family business gets in the way of work activities, whereas a work-family conflict occurs when work gets in the way of family events (Breugh & Frye, 2007; Hill, 2005). The study looks at

work-family conflicts as well as family-work conflicts. Netemeyer, Boles, and McMurrin define family-work tensions (1996) as a sort of inter-role conflict in which work-related success collides with public demands, time, and family responsibilities. The literature presents different ideas of conflicts between work and family.

Family labor disputes, according to Netemeyer et al. (1996), are a type of conflict between duties that interferes with the needs, time, and family burden of working activity. Studies demonstrate that mismatched vocations and family roles cause family-work conflict (Yang, 2005; Greenhaus & Beutell, 1985). It suggests that a lack of workplace knowledge can negatively affect employees' home lives, and vice versa (Wayne, Grzywacz, Carlson & Kacmar, 2007; Yang, 2005). Confrontations like these are two-way. Work-family conflict has a bad impact on family happiness, and family problems have a negative impact on job satisfaction, so it happens (Frone, 2003). Work-family and family-work conflicts can take three forms: Conflict that is caused by a person's actions, a conflict that is caused by a strain, and a conflict that is caused by time Greenhaus and Beutell (1985). Conflict arises due to the passage of time, when time constraints make meeting norms in another work impossible, and it is based on the shortage model.

As an outcome of the deficiency of attitude and the Newtonian belief (i.e., segmentation theory), this conflict happens. As a result, time-based conflict arises when people perceive that their work or family responsibilities are competing with other priorities. (Yang, 2005). On the other hand, strain-based conflict happens when job circumstances become intolerable. Occupational stresses may arise when, in one part, work insecurity, anxiety,

irritability, anger, interpersonal withdrawal, or depression are transported to a different role, making it hard to work (Edwards & Rothbard, 2000). When a person's behavior in one job differs with the behavior planned in another, behavior-based conflict emerges (Greenhaus & Beutell, 1985).

When informing families about a family member's illness, a mental health nurse, for example, may need to seem detached and emotionless at times. Nevertheless, when family members use the same attitude and behavior, these similar behaviors may not be suitable and may result in interpersonal conflict. A wife speaks of a busy and stressful working day and the husband, for instance, appears unemotional and unselfish, rendering the wife unrecognized. This type of conflict is not a function of requirements for work or family; instead, it results from transitioning to another scenario (Edwards & Rothbard, 2000).

#### Work-Family Enrichment (WFE)

Scholars have used several expressions to explain the beneficial characteristics of the work-family border: (a) work-family enhancement (Greenhaus & Parasuraman, 1999), (b) enhancing the work-family relationship (Greenhaus & Powell, 2006) c) work-family remuneration (Edwards & Rothbard, 2000); d) work-family facilitation by employers (Edwards & Rothbard, 2000). (Frone, 2003; Rotondo & Kincaid, 2008). Although there are some differences in these concepts, the supportive affiliation amid work and family and its useful effect, on the contrary, are all discussed. (i.e., work or family). The enrichment of family work is utilized in this investigation to explain the good parts of the work-family touch point. Enhancing a work-family system is a multifaceted system defined as the procedure by which the

workplace experience (work) and well-being of an individual's employees can be acquired and improved (Greenhaus & Powell, 2006; Voydanoff, 2001).

Carlson, Kacmar, Wayne and Grzywacz (2006) proposed that enrichment processes may occur when other functions known as the instrumental path enrich the resources extracted from one function. For example, workers develop capabilities at work (e.g., practical problem solving or conflict resolution) and transmit the new abilities from work to home, leading to better relationships with family members (Madsen & Stoddard, 2007). Also, enhancement can arise when the moods and feelings attained in a role are enriched by another role known as the affective route (Hanson, Hammer & Colton, 2006).

Studies have shown that one position's views, beliefs, and abilities can improve and reward participation in other enrichment roles (Edwards & Rothbard, 2000; Allis & O'Driscoll, 2008). Powell and Greenhaus (2006) indicated that supported marital relationships with high-quality roles serve as a barrier against workplace stress factors. Allis and O'Driscoll (2008) thought that people could maintain equilibrium between family and work through personalized habits (sports, hobbies, spiritual tasks, research, spiritual studies, meditation, family outings, etc.). They settled that individuals who participate in personal acts restore their self-esteem and help generate wellbeing.

Family-work enrichment is in the early phases of the family/work interface, unlike conflict work/family interventions (Frone, 2003). Work and family researchers who have researched the beneficial effects of the work-family interface (Grzywacz & Marks, 2000; Barnett & Hyde, 2001) have found that workers' different functions can be beneficial for each role (i.e., to

optimize their resources). In order to evaluate assistance, development, reward, and joyous outpourings, these researchers used interventions. A positive asset was defined by Powell & Greenhaus (2006) as an asset that can be used when appropriate to resolve a problem and manage a challenging situation.

The productive essence of work-family interfaces has been discussed in various studies, including (Grzywacz & Bass, 2003; Carlson et al., 2006; Kirchmeyer, 1992). In 2006, Carlson, et al., contended that preceding interventions did not correctly describe the excellent part of the concept and had unpredictable implications, making it hard to authenticate the concept (Tetrick & Buffardi, 2006). Thus, Carlson et al., have established and authenticated an enrichment for family work in response to empirical concerns and interpreted work-family enrichment as assets that can enable individuals to do well in all their duties (e.g. family and work/life). The extent involves three magnitudes that assess family work (i.e., development, capital, impact,) and three magnitudes that assess family work (i.e. effectiveness, improvement, impact,). Madsen and Stoddard (2007) developed the following WFE dimensions, and this metric precisely defines the existing principles regarding the right sides of the work-family interface.

#### Family Work Direction

Development happens when family experiences help acquire or strengthen skills, abilities, ways, or behaviours to see things that make a person successful. When family interaction adds to a favorable attitude or emotional state that aids an individual's ability to perform efficiently, affects

emerge. Efficiency happens when family interaction is created by a sense of emphasis or urgency that makes a person a better worker.

### Work-Life Balance and Demographics

About some decades ago, changes in demographic conditions have raised growing challenges employees face, such as increasing women's participation in employment, households with two incomes, and family care of older adults (Tennant & Sperry, 2003). Such distress and higher family and work-life stresses have been shown to have adverse effects on employees and their families (Hochschild, 1997) which leads to family and job disputes (Aryee, Srinivas & Tan, 2005).

Fine-Davis, Fagnani, Giovannini, Hojgaard, and Clarke (2004) found that in Ireland, husbands worked 45 hours per week and wives 32. Married males work more hours than married women, according to the report. According to 2011 statistics, 44.5 percent of married men worked 40 hours or more per week, while 14.7 percent of married women did. Because women dedicate more time to family chores and childcare, males use WLB services less frequently than women, according to Fine-Davis, McCarthy, Edge, and O'Dwyer (2005).

### Consequences of Work-Life Balance and Work-Life Imbalance

Research by Malik, Saleem and Ahmad (2010) shows that higher stresses emerge from work-family life imbalances as an come of higher work requirements. Conflicts between work and family are exacerbated by increasing labor demand (Aryee, Srinivas & Tan, 2005). Work-life imbalance has adverse costs not only for workers but also for their relatives (Hochschild, 1997), It can make people feel uneasy at home and at work, and it can lead to

poor family ties (Parasuraman & Greenhaus, 2002). More significant needs for jobs such as overtime and shifting can cause family tension, resulting in decreased work and employee satisfaction (Paton, Jackson & Johnson 2003). Individuals, organizations, families, and society all suffer as a result of occupational stress (Brought & O'Driscoll, 2005).

WLB guidelines are intended to reduce absenteeism and have a positive impact on job satisfaction, proficiency, and worker retention (Allen, 2001; Grady et al., 2008; Hill, 2005), highlighted the value of adopting WLB programmes by organizations, such programmes, including counselling, flexible working hours, temporary arrangements, childcare and support (Grady et al. 2008). A higher WLB is linked to the retention of a trained personnel, as well as the impact on organizational dedication and profitability (Ryan & Kossek, 2008; Hill, 2005). Individuals' priority is more likely to be held by WLB culture organizations (Kristof, 1996). The work-family conflict, on the other hand, happens when the WLB goals of employers and employees differ. This can contribute to workers in companies with high WLB cultures determining to vacate an organization and look for new work (Kristof, 1996).

#### Concept of Psychological Well-Being

Pleasure, vigor, contentment, confidence, self-actualization, and excitement are all associated with well-being (Seligman, 2002). Aristotle maintains that eudaimonia (a Greek term for happiness) is the highest value for men, and that it can be attained through ethical action that leads to personal well-being in his Nicomachean Ethics. According to Myers (1992), well-being is the use of spiritual, emotional, physical, and social elements to enhance



one's life and work talents and effectiveness, as well as make significant contributions to society.

Wellness may be measured in relative to life fulfillment (e.g. perceived stress) as well as objective physical health metrics (e.g. blood pressure) through subjective assessment of individuals (Grzywacz, Almeida & McDonald, 2002). Studies have shown that improved mental well-being, increased life expectancy, and physical well-being are positively linked to well-being (Diener, 2005; Ryan & Deci, 2001).

It is possible to categorize well-being into: (a) psychological well-being, focusing on maximizing the full ability of individuals (b) subjective well-being, centering on optimistic results and avoidance of adverse effects (Ryan & Deci, 2001). This present study is only concerned with psychological well-being. Mental well-being can be understood as the nonexistence of the degrading elements of depression, human experience, anxiety, frustration, fear and positive emotions, meaning, healthy ties, environmental mastery, commitment, self-realization. In addition to the lack of mental illness, a wider variety of constructs have been recognized for psychological well-being than happiness (Seligman & Csikszentmihalyi, 2000; Seligman, 2011).

Psycho-stabilization is required for the management of conditions, such as severe schizophrenia or depression (World Health Organization 2001). Individuals with mental disorders do not have emotional stability, the lack of these disorders; however do not guarantee emotional prosperity. There are two forms of well-being definitions, according to Ryan and Deci (2001): hedonic and eudamonic. According to hedonistic beliefs, happiness is the result of

pleasure, fulfillment, and contentment with one's life. Meanwhile, well-being is a good commodity from a Eudamonic standpoint, understanding the meaning of self-actualization and life. Carol Ryff's psychological well-being model (1989) Atonomy, personal advancement, purpose in life, environmental mastery, self-acceptance, and positive interactions with others are some of the Eudamonic ideas on well-being. When assessing an individual's psychological well-being, other factors must be considered in addition to these.

The number of psychological needs associated with the psychological well-being study proposed by Ryan and Deci (2000) has decreased significantly. Ryan and Deci identified three intrinsic psychological demands in order to obtain psychological well-being: autonomy, competence, and relatedness, which their study suggested were significant. It is imperative to note that they concern themselves with behaviors that facilitate well-being rather than items that reflect well-being (Chavez, Campos, Corona, Sanchez & Ruiz, 2019). The idea of well-being is a crucial aspect of positive psychology, which explores the attributes and values that allow people and societies to prosper (Oguz, 2013). Non-biological methods to the study of psychological well-being have come forward to explore other perceptions of psychological well-being. These include Alkire (2013) who described Reflective life satisfaction, positive effect, spirituality and mind training as psychological well-being.

#### Psychological Well-Being Components

For the sake of grouping and illumination, Ryff's parts of objective psychological well-being are stated separately below. When Ryff's psychological well-being components are unloaded, there is a link between

them. and the previously mentioned components of psychological capacity, with components of psychological well-being clearly interrelated with different components of psychological abilities. An extra connection is that a several procedures, including breathing and self-talk, are adopted to boost therapeutic ability and therapeutic well-being (Weinberg & Gould, 2007; Berger, 2001).

### Autonomy

Autonomy is the regulation by an internal locus of influence of one's own behaviour (Ryff & Keyes, 1995). A completely operative individual has a extraordinary degree of internal appraisal, judging himself on personal norms and accomplishments while not depending on the norms of others. People with Autonomy trait do not seek endorsement from other people, they rely on their own values and are less moved by other people's views. A high degree of autonomy implies independence, reflecting concern for self-perception at a low level. A significant component of motivation is the internal locus of influence (Weinberg & Gould, 2007). Self-determined motivation is also related to autonomy (Huang & Jeng, 2005).

### Personal Growth

Personal growth is the wish to grow and mature as a person, to become a person who works to fully comprehend himself and achieve his objectives (Ryff & Keyes, 1995). One must continue to establish oneself in diverse life aspects to hit peak psychological functioning (Robins, Trzesniewski, Tracy, Gosling & Potter 2002). It helps you to grow and solve challenges frequently by growing your knowledge and abilities. High

individual growth is related with sustained growth, while a decrease in growth implies lack.

### Environmental Mastery

Environmental mastery relates to the choice and control of the imagined environment and surrounding through mental and physical actions (Ryff & Keyes, 1995). Although a great degree of environmental mastery affects one's background, a low degree is linked to the incapability to regulate one's setting (Fava & Ruini, 2003). A developed person is typically able to interrelate and relate to various individuals in different situations and adapt to various scenarios on demand. Environmental mastery means controlling the environment and life's tricky situations and seize the opportunities that present themselves (Ryff, 1989b).

### Purpose in Life

The meaning of life implies a feeling of nature and requires the fulfillment of the aims to encourage the enjoyment of life (Ryff & Keyes, 1995). Mental well-being requires recognizing that one's intent and mission in life is greater (Ryff, 1989b). The goal provides direction in life, eradicating the pain, it can be stimulating and empowering to set and meet goals (Weinberg & Gould, 2007).

### Positive Relations with Others

In terms of building trusting and long-lasting relationships, as well as belonging to a network of contact and support, having positive connections with people is critical for psychological well-being (Ryff & Keyes, 1995). A serene and tranquil demeanor denotes maturity, improves relationships, and demonstrates significant regard for others. Although virtuous relations

contribute to others' appreciation, resentment can be caused by bad relationships (Ryff, 1989b). One key trait of mental well-being with pathology frequently marked by the failure of social functioning is the capacity to have healthy human relationships (Huppert & So, 2013).

### Self-Acceptance

The most common feature of psychological well-being is self-acceptance. It's a crucial feature of mental wellness as well as a crucial operational component (Ryff & Keyes, 1995). Self-acceptance promotes a more positive outlook on life as well as a greater sense of fulfillment (Ryff, 1989b). Moderate degrees of self-assurance are linked to higher levels of achievement and acceptability (Weinberg & Gould, 2007). Maintaining self-assurance and belief in the face of constructive criticism is crucial. Self-acceptance, according to Ruff, is a necessary component of self-actualization, improved psychological functioning, and development. It entails accepting the past as well as the present while maintaining a focus on the future. In short, psychological well-being is closely linked to personal well-being and is considered one of the most significant fields of well-being (Allen, 2001). Good relationships with others are now generally recognized as an integral component of psychological well-being. While autonomy is vital for psychological well-being, so are choices and the right to choose them. Personal growth, self-reliance, environmental mastery, healthy interpersonal relationships, life purpose, and self-acceptance are statistically important predictors of psychological well-being. Psychological well-being also encompasses good psychological functioning, which involves self-acceptance, self-actualization, and optimal performance.

## Concept of Personality

The concept of personality derives from the curious range of human individuality (Passer & Smith, 2004). It has been noted that people vary dramatically and have distinctive patterns of behaviour that help define one's identity as an individual. Personality has been defined as the unique and relatively persistent means of rationalising, sensing, and acting that define an individual's responses to life situations by Passer and Smith. Heinström (2004) defines it as a pattern that distinguishes one person from another in terms of characteristics, emotions, feelings, and behaviors. An individual's personality is defined by these ideas, feelings and actions, and they have the characteristics as follows: Firstly, they are seen as behavioral elements of identification that separate individuals. Secondly, attitudes are seen as largely caused by internal causes rather than external factors. Thirdly, according to Passer and Smith an individual's acts have both an agency and a structure

During the 1950s and early 1960s, a high degree of research activity on industrial applications of personality assessment was accompanied by a prolonged dormancy period. It was mainly due to insufficient psychometric data on the accuracy and validity of personality instruments available (Guion, as cited in Guthrie, Coate & Schwoerer, (1998). The lack of an agreed taxonomy for normal personality was a fundamental issue. Recent years have seen a revival in concern in the importance of workplace personality tests. Thus, after fifty years of personality studies, a general agreement in the field shows that five core personality dimensions form the basis of personality (Heinström, 2004; Larsen & Buss, 2005). The five central dimensions of personality are (1). Extraversion (being gregarious, sociable, assertive); (2).

Agreeableness (being empathic, good-natured, cooperative); (3). Emotional stability (being anxious, sad, emotional, nervous, for example, seen from the negative pole); (4). Conscientiousness (being trustworthy, reliable, vigilant, thorough); and (5). Openness to experience (e.g. being innovative, curious, original, and broad-minded).

Different labels such as the Five Factors Model, the Big Five and the High Five have been given to these (McCrae & John as cited in Larsen & Buss, 2005). It is important to remember that the Big Five personality traits have overtaken certain features suggested by earlier personality psychologists who introduced the personality of extraversion-introversion (Boeree, 2006). Allport's theory of traits suggested that three kinds of traits are made up of human personality. These include cardinal characteristics, core characteristics and secondary characteristics (Allport, 1961; Boeree, 2006). The higher degree of agreement that the Big Five Personality Traits Model has earned in the history of personality trait psychology over other trait taxonomies is due to its empirical evidence. However, Larsen and Buss (2005) and McAdams (1994) have criticised the Big Five Personality Traits Model. They argued that the model does not capture the underlying mechanisms of causal personality in which investigators are interested. For example, it can help classify someone as high on neuroticism in social communication or global character representations. However, it does not capture the underlying psychological mechanisms involved in feeling guilty and becoming concerned with worst-case scenarios.

## The Big Five (5) Personality Dimensions

In personality studies, Goldberg's five-dimensional personality model is known as the big five model (Goldberg, 1992; Sancier & Goldberg, 1998). Agreeability, neuroticism, conscientiousness, extraversion, and openness are the five main personality traits.

### Extraversion

We meet people who seem to be more talkative for some time, fighting for their views, communicating very honestly with others, and finding excitement in every aspect of their living (Cattell & Mead, 2008). Extraversion is the personality characteristics that cover these groups of individuals (Burch & Anderson, 2008). This level of personality also makes individuals more social and more outgoing, like the compatibility trait (Mount, Barrick, Scullen & Rounds, 2005). A trait of an individual who is highly withdrawn, less expected to be social and appears to be uncomfortable engaging with visitors is the reverse of extraversion and is called introversion (Goldberg, 1992). Such individuals are less possible to be open to anyone quickly and would rather be self-centered and alone.

### Openness to Experience

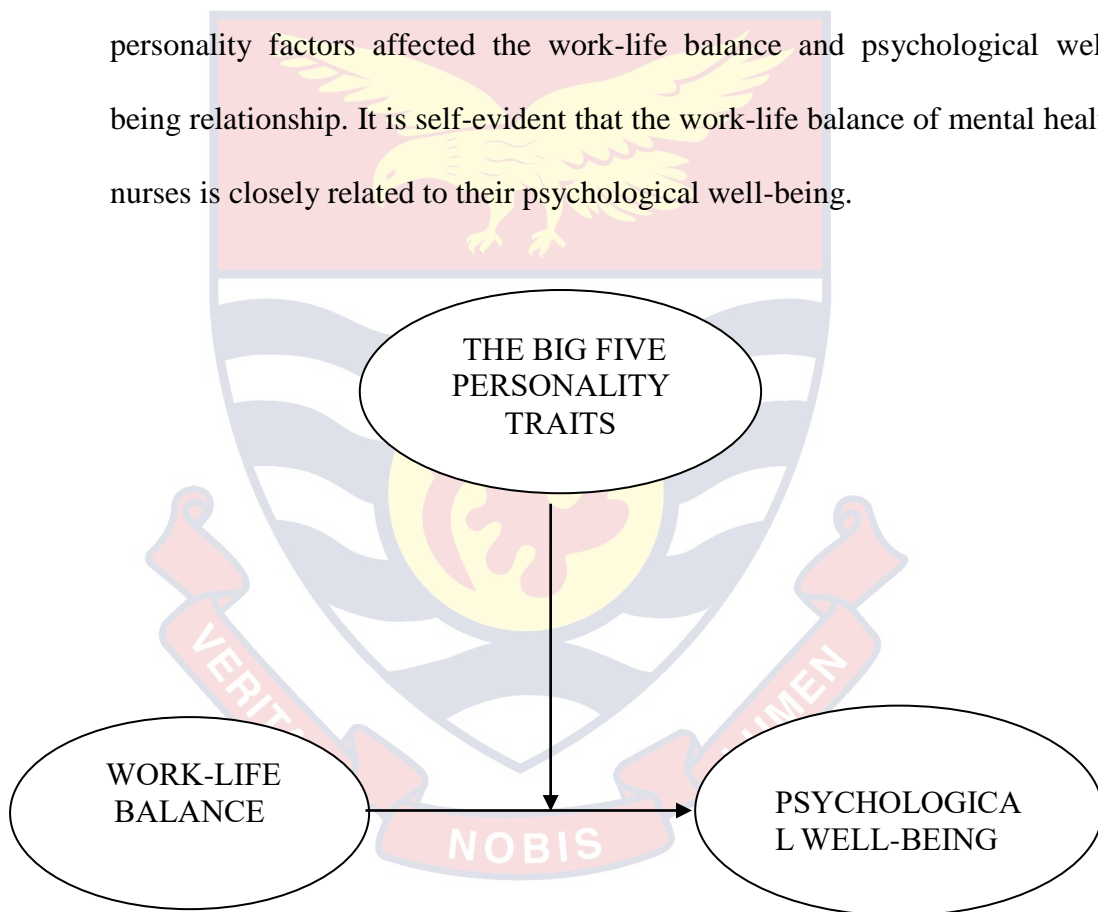
Persons with this specific trait in their intellect tend to be extremely imaginative, creative and spatial. (Howard & Howard, 1995). These persons are open to their inward emotions and can perceive circumstances inversely (Cattell & Mead, 2008). They are interested in understanding secret objects from different angles and being deductive (Mount et al., 2005). On this particular characteristic, ordinary people are on an average scale. Individuals who are deficient of openness to experience appear to be more traditional in



their reasoning pattern and do not attempt to be exploratory in seeking current means to solve specific issues (Burch & Anderson, 2008). They seem to hate diversity and variation and instead of affection, prefer to maintain their ancient rigid habits.

### Conceptual Framework

The variables gathered from the empirical research were used to construct the conceptual structure of this study. The goal was to see if personality factors affected the work-life balance and psychological well-being relationship. It is self-evident that the work-life balance of mental health nurses is closely related to their psychological well-being.



**Figure 1:** Shows Moderating Role of Personality

Figure 1 depicts the moderating role of personality traits in the link between work-life balance and psychological well-being.

### Agreeableness

Agreeableness is a character that helps individuals to be cooperative and supporting (due to their versatile mindset to solve problems by creating win-win situations (Cattell & Mead, 2008). In negotiations in a friendly environment, these individuals are usually highly social and friendly and generous to maintain balance with opponents' concerns (Burch & Anderson, 2008). According to Cattell and Mead these individuals have a propensity for collaboration and social peace to be achieved. Helping others is their built-in feature, which is why they think others are truthful and trustworthy as well. However, people of low scores on this personality trait appear to be arrogant, unfriendly and rough in social relationships, not caring about other issues.

As they are greedy, they feel that others are still working on their personal motivation, so they are more suspicious for that reason. Moreover these people are not worried about others, so they are less possible to support people to compromise their self-interests (Burch & Anderson, 2008).

### Neuroticism

The personality symbols of the individual who are high on this personality trait (Cattell & Mead, 2008) are frustrations, rage, depression, tension and self-blame. This is a vital personality trait that is connected with pessimistic persons who often overreact to trivial mistakes and faults made by them and others. In addition, they are often hopeless and annoyed when voicing their feelings and showing their acts. Holders of this characteristic of personality lack emotional maturity and are simply caught by mental illness and depression that can greatly influence their physical and psychological health (Burch & Anderson, 2008).

## Conscientiousness

A person with conscientiousness trait in every company has a strong effect on the success of a business (Judge, Higgins, Thoresen & Barrick, 1999). Individuals with the characteristic of conscientiousness tend to be very vigilant about their future scheduling and are careful, compact and carefully planned about their environment (Cattell & Mead, 2008). They want to be controlled, choose to be consistent and strive to avoid risk. They may behave in a manner as though they have no defects, where all is set properly and misunderstanding creates mental stress (Burch & Anderson, 2008) they are trying to be neat, clean and want to put things in the right place, Individuals who score low on this trait will be irresponsible about their job. As identified by Burch and Anderson they are less likely to act in a manner that might lead to stressful circumstances. The relationship between work-life balance and psychological well-being is thought to be moderated by personality traits.

## Spill-Over Theory

Spillover theory examines the connections between paid job and family life, as well as the factors that affect workers' emotional moods at work and at home. It was primarily created by researchers that specialize in organizational behavior (Keene & Reynolds, 2005; Mennino, Rubin & Brayfield, 2005). It's been used to figure out what causes positive and negative emotional consequences in the workplace and at home, such as when a weary parent gets grumpy at home due to required overtime, or when a colicky newborn and lack of sleep have a detrimental impact on job performance (Grzywacz & Marks, 2000). The concept of work and family limits is based

on this principle in one domain, the moods, attitudes, emotions, feelings, stress and behaviors produced can leak on the other (Rothbard & Dumas, 2006).

Positive spill-over means circumstances in which happiness, a sense of achievement and well-being are moved to the other area in one region, (e.g work) (e.g family). If by comparison, problems made in one area spillage into the other area, the adverse spillage results in adverse effects. A mental health nurse who has a stressful day at work, for instance, will always be sway by stress during the day. Although this is a sample of a negative experience, it doesn't automatically have to be a negative experience in an environment. Study has shown that practitioners of mental health (for instance, nurses) suffer from a lot of stress in their daily work (Abor, Abekah-Nkrumah & Abor, 2008). If not well curtailed, the above situation for most staff will bring debilitating elements of human experience such as depression, anxiety, frustration, fear, etc., into another aspect of their lives (i.e. family life). However, if the person is in a position to balance work-family life and accomplish it then positive emotions, sense, healthful relationships, environmental mastery, commitment, and self-reacting in the second half of the living (i.e., family life) will be induced.

#### Empirical Review

Previous research on psychological well-being and work-life balance, as well as the relationship between the two systems, are discussed in this section of the text. Scholars have come to differing judgments on the concerns, and this recent study summarizes the issues.

Darko-Asumadu, Sika-Bright, and Osei-Tutu (2018) 115 employees completed questionnaires and seven employees participated in interviews in a descriptive cross-sectional survey among bankers in Accra, Ghana. The goal of the study was to see how employees felt about work-life balance and whether there was a link between it and dedication. The study discovered, among other things, that single employees were better at combining work and family responsibilities than married employees. Women also maintained a better work-life balance than men. Employees were dissatisfied with paternity leave, study leave, and part-time work, indicating a minor positive relationship between devotion and work-life balance.

Turpin-Quaye (2018) explored work-family life balance concerns among Ghanaian banking professionals. The researcher equates the banking experience of two Takoradi banks in western Ghana in detail, as the characteristics that enable them to effectively combine their career and family duties are also significant to the socio-economic context. A qualitative methodology was employed to scrutinize how workers would manage their work and family lives. The data collection methods employed were formal interviews and observation. In demand to keep a successful work-family life balance, the findings showed that bank employees relied on external assistance.

Shivakumar and Pujar (2016) analyzed the organization's Human Resource activities with special regard to employee work-life balance. There were 300 questionnaires given to physicians, nurses, paramedical and administrative personnel who were on the hospital rolls. Two hundred and forty-four (244) workers replied to the survey in total, (61 doctors, 63 nurses,

60 paramedical personnel and 60 administrative staff). Most workers agree that their professional lives and personal lives are seldom balanced.

The impact of work-family conflict, stress, and family supportive supervisor conduct on employee creativity was investigated by Boakye, Moore, Skirboll and Arrigo (2013). Information was gathered from fourteen (14) public sector bank branches in the metropolis of Accra using adapted versions of Work- Family Dispute Scales, Family Support Supervisor Conducts (Hammer, Kossek, Yragui, Bodner & Hanson, 2009), Imagination (Zhou & George, 2001) and Tension (Cohen, Kamarck & Mermelstein, 1983). Findings have shown that work-family conflicts have a detrimental association with employee creativity (behavioural-based, time-based and strain-based conflicts). This association, however, was found to be mediated and moderated, respectively, by stress and family supportive supervisor behaviors (Okotosatrio (2018) In Jakarta, Indonesia's civic zone, the link between work-life balance and employee motivation was also investigated. The study was conducted using a qualitative inductive approach, with 86 Jakarta local government employees functioning as respondents. The data was collected using a self-administered survey questionnaire. Employees' personal life have a major impact on their paid occupations, according to the findings.

Thevanes and Mangaleswaran (2018) investigated how work-life balance affects job performance. The information was gathered mostly from 166 workers of nominated private banks in Sri Lanka's Batticaloa region, and it was analyzed univariate and bivariate approaches. Study findings show that the balance between life and work in general has a good and significant connection to work performance. The importance students place on work-life

balance has been studied by Smith (2008). In the fall of 2008, 100 marketing scholars at one Southwest U.S. University were surveyed. Junior and Senior students were the respondents, findings from their study showed that in making career choices, students found work-life balance problems very significant.

Virick, Lilly and Casper (2007) discussed how work-life balance and life and job fulfillment are connected to layoff survivors' increased work overload, in a high-tech organization, survey methodology was employed to gather information for testing, regression analyses and structural equation modeling from five hundred and ten (510) layoff survivors. The findings of their study revealed that layoff survivors had higher workloads, which has an impact on overall job overload, which has a negative impact on work-life balance. Workloads faced by layoff survivors, according to the findings, contribute to decreased work and life satisfaction via a mediating mechanism of impaired work-life balance.

Ayadurai (2008) The impact of gender on the work-study interface and work-life balance interactions of working online scholars, as well as their felt stress and life satisfaction, was explored. The theoretical structure of this quantitative analysis incorporated social function theory and spillover theory. An online survey was completed by 80 working online scholars (aged 20-60+ years) as part of a convenience research. In both the work-study interface and the work-life balance, working female online academics reported higher levels of felt stress than males, and women in the work-study interface reported lower levels of life satisfaction than men.

Simard (2011) examined the use of workers strategies to handle life and work stress, mainly the usage of employee resources and social support, as well as their perceptions of flexibility. The researcher interviewed eight workers working in the non-profit sector. Narrative analysis was used and qualitative interviews were carried out. What was discovered was that their boss was seeking flexibility, encouragement and understanding from workers. Manor and Desiana (2018) conducted a research on the impact of work-life balance on MSE owners' company success in the Greater Jakarta region. A over-all of 152 micro- and small businesses were polled, and the results were statistically reported using descriptive statistics analysis. The outcome suggest that the MSE's effectiveness is unaffected by work-life balance.

Acheampong (2013) female teachers at Kwame Nkrumah University of Science and Technology (KNUST) were studied to see how their work-life management strategies affect their career advancement. To gather data from respondents, the analysis used both qualitative and quantitative approaches. According to research, KNUST offers a range of work-life balance programs, including part-time and maternity leave. It was also discovered that there was a favorable relationship between work-life balance strategies and career advancement among female academics at KNUST if the policies between work-life balance strategies and career development were in place. were effectively implemented In addition, the support of family members were found to performance vital role in the capacity of women lecturers to cope with work and life requirements and career growth requirements.



Pasay-an, Pangket, Nialla and Laban (2014) discussed nurse educators' work-life balance for value of life. The nursing educators within the Baguio City Nursing Schools and the province of Benguet, Philippines, were the study respondents. In particular, the study used mixed method design, sequential explanatory strategy, it was discovered that nurse educators' work-life balance differs and that nurse educators can maintain their calm in their work with or without interference with personal life or vice versa, given their very complicated roles.

Mulinge (2017) has explored the performance of Kenya nurses based on consequence of work-life balance. A sample of 125 nurses was drawn from the 1950 object populace using stratified random sampling. For data collection, the questionnaire was used and results showed that working hours, workload and work climate have a key effect on the performance of Kenyatta National Hospital (KNH) nurses. Work schedules, according to the study, were not so much a function of work-life balance as they were closely tied to work load, and hence could have an indirect impact on nursing productivity. Browne (2012) investigated Human Resource Manager (HRM) policies and procedures and encouraged nurses' work-life balance. A number of methods were used, using a mixed approach template to collect data on work-life and work- family issues for nurses in Irish hospitals, including documentary analysis, surveys and interviews. A total of participating nurses have reported in this research that they do not recognize anything like Human Resource Manager's policies and procedures that currently promote work-life balance in the organization, and some have reported that they do not exist at all in their workplace. In conclusion, respondents suggested that there are no hospital

policies or procedures that aim to ensure that nurses maintain a reasonable balance between work and life.

Makabe, Takagai, Asanuma, Ohtomo and Kimura (2014) reviewed the state of work-life imbalances with hospital nurses in Japan. At three Japanese acute care hospitals, a cross-sectional analysis of 1,202 nurses (with an 81 percent response rate) was conducted. For work-life balance, respondents were divided into four groups. Many nurses thought that their professional life was more important than their personal lives, and that they had a work-life imbalance. There was no match for the actual WLB compared to the ideal WLB.

#### Psychological Well-Being of Mental Health Nurses

Sarfo (2019) The impact of safety culture on workplace quality of life was investigated. It further explored how various cultural and safety experiences influenced perception among Mental health Practitioner sampled from Ankaful, Pantang and Accra Psychiatric hospitals in Ghana. 576 Mental health Practitioners were sampled purposively. After using questionnaires as the research instruments, the results were analysed using Factor Analysis of variance, Chi square, Multi Variance analysis and Pathway Analysis. The findings of the research revealed that, working at mental health facility has a positive relationship with work place violence. Positive culture also elicit positive effects on the life of mental health workers.

According to Bonsu and Salifu (2019), after using a sample of 20, made up of 10 mental health professionals and 10 care givers who were interviewed, Stigma associated with mental illness is not only limited to caregivers and the mental patient but also the mental health professionals.

These findings were revealed after a content analysis of the responses from the participant sampled from the phenomenological study of mental patients. This was to find out strategies for coping with bad experiences associated with stigma of mental illness in the Eastern region of Ghana.

Godwin, Suuk and Elorm (2016), in a research to pinpoint the causes of Occupational stress and its management used 73 nurses who were sampled purposively from nursing and midwifery department. Questionnaires were the main instrument used for the study. Inadequate motivation, inadequate staffing, large number of patients handled by a single nurse, nursing challenging patience, and inadequate break in shifts were the primary sources of occupational stress among health workers, according to findings from descriptive and inferential statistics on the data, there was also a strong association between age and the type of stress faced, as well as years of experience, remuneration, and emotional stressors.

Foster, Roche, Giandinoto and Furness (2020), in a paper aimed at describing the mental health nurses' psychological well-being. As part of a descriptive correlational study using closeness sampling, 498 nurses working in mental health positions in Victoria, Australia, completed an online cross-sectional survey. For nurses, psychological well-being was found to be relatively high, but lower, suggesting consumer career-connected stressors as their most challenging challenge. The psychological well-being of nurses in various work settings in Alexandria was examined by Arafa, Nazel, Ibrahim and Attia (2003). Nurses serving in five different health departments served a sum sample of 412 nurses in Alexandria. To gather data from the conveniently sampled nurses, the questionnaire was used. The study findings showed that

21.67% of nurses reported mild to extreme psychological symptoms. Significant predictors of psychological ill health among respondents were found to be less years of experience, adverse backing from family and friends, as well as negative overall job satisfaction.

In Enugu Metropolis, Okeke and Okeke (2018), explored gender as a predictor of nurses' psychological well-being. Two hundred and fifty (250) health nurses were sampled to take part in the study using a descriptive study template. Psychological well-being questionnaire was administered to the nurses. The results showed that gender among nurses did not predict psychological well-being. In terms of their psychological well-being, The distinction between nursing and non-nursing students in Thailand was examined by Ratanasiripong and Wang (2011). This study included four hundred students Out of 700 students, the study used a random sample of 200 non-nursing students and 200 nursing students. Overall, nurse students demonstrated considerable psychological well-being relative to their non-nursing students, which was an indicator of high self-esteem, high living satisfaction and low levels of depression and social difficulties.

Ackerman (2016) explored the association between psychological well-being and work stress. The link between respondents' psychological well-being and self-efficacy was investigated by the researcher. A cross-sectional study was conducted with 300 nurses at the National Health Insurance (NHI) pilot clinics in Klerksdorp. Nurses who were under a lot of stress at work, according to the study, were more likely to have low psychological well-being scores. Nurses who said they had more influence over their work environment were also more likely to say their mental health was better. Furthermore,

higher levels of self-efficacy have been associated to improved mental health. Work-life balance and psychological health are linked in mental health nurses.

Wilkinson (2013) found the link between employee psychological well-being and work-life balance. Participants were recruited from three companies in the Southeast United States, from non-random groups of men and women. Based on the figure of dependent variables, a minimum of 75 participants was decided to be sufficient for the study (Cohen, 1988). The research covers part-time and full staff of three companies in the Southeastern United States. There has been evidence of a substantial link between work-life balance and mental health. Furthermore, the psychological characteristics that influenced women and men who did not have a feeling of work-life balance were discovered to be different.

Yang, Suh, Lee and Son, (2018) explored the association between psychosocial well-being and work-life balance among paying Korean workers. The information from the fourth Korean working conditions survey was used in this research. The study only looked at paid employees, who accounted for 30,649 of the total 50,007 who replied to the survey. The standard of fit between work hours and social duties was used to describe low work-life balance. The WHO-5 World Health Organization ranking was used to determine psychological well-being. Using Poisson regression with stable variances, the projected prevalence ratios (PRs) with confidence intervals were calculated. The findings showed poor link between psychosocial well-being and work-life

Ashtankar (2016), has investigated the effect on the well-being of the Nagpur district police workers of work-life balance. The study uses descriptive survey design to select a sample population selected between single participants and spouses with and without children (e.g. women and men) using a convenient surveys technique. This study has shown that the WLB is critical for the health of employees and the police organization. The inference has been drawn that the more labor and family conflict the police force experiences, the less happy they are with their family lives and work lives, the less psychological pressure they become, the less happy they are.

Soin (2011) Stress, psychological well-being, and work-life balance were investigated in full-time and part-time employed women, as well as the similarities and differences between them. As a result, significant differences between female bankers and public school teachers were revealed when stress levels, psychological well-being, and work-life balance were compared. A total of 90 working women from the Chandigarh, Panchkula, and Mohali tri-city areas were chosen at random, including 45 middle-level bank managers and 45 teachers from public senior secondary schools. Between full-time and part-time working women, there were significant differences in stress ( $t = 5.71$ ,  $p 0.001$ ) and work-life balance ( $t = 3.04$ ,  $p 0.001$ ). Full-time working women, according to the data, are more stressed and have a worse work-life balance than part-time working women. Despite this, no significant variations in psychological well-being were found between part-time and full-time employees. full-time working women were discovered.

Olatunde and Odusanya (2015) investigated the association between nurse satisfaction and mental health. Two hundred and thirty (230) nurses for the research, a systematic random sampling method was adopted. The majority of respondents expressed satisfaction with their job in this survey, many of them have expressed positive emotions. As a result, psychological well-being and job satisfaction had a strong positive association.

Munir et al. (2012) The significance of transformative leadership in bridging the gap between psychological well-being, job satisfaction, and work-life balance was explored. A longitudinal design was used on one hundred and eighty-eight (188) employees, who answered a questionnaire at a normal 18-month follow-up. Transformational leadership, according to the research, can raise employee expectations for work-life balance and well-being.

Ogwuche, Ijiga, Kuruku and Okwoli (2019), In the Makurdi metropolitan, researchers have also looked into work-life balance as a measure of psychological well-being among public employees. In the Makurdi Metropolis, a total of 215 public employees were selected at random. The sample's cross-sectional existence was used in the study. The results showed that work-life balance had a significant impact on public employees' emotional well-being [ $F(1,212) = 12.023, P > .05$ ]. Furthermore, the findings revealed that psychological well-being has a substantial impact on government workers' socioeconomic situation [ $F(1,210) = 6.514, P > .05$ ]. Bataineh (2019) In a study, the relationship between job satisfaction and work-life balance was explored. To validate the aforementioned model, a questionnaire-based survey was built utilizing a dataset of 289 employees from Jordan's Med

Pharmapharmaceutical company. According to the study, job satisfaction and work-life balance have a positive and significant impact on employee contentment.

Personality Moderating the Relationship between Psychological Well-Being  
and Work-Life Balance

Kundnani and Mehta (2014), explored the association between personality traits and work-life among bank professionals in Rajasthan and explored the interrelationship between personality traits, work-life, and stress standard Big-Five personality trait. To collect primary data, two types of structured questionnaires were used. The first set was based on the NEOPI-R, a Big-Five measuring tool for assessing respondents' personality traits. The second data gathering method was a self-developed questionnaire that was given to respondents in order to determine their work-life balance and stress levels. Findings showed that extravert personality was prevalent among the staff bank respondents. In addition, when it comes to balancing work-life with minimum stress, extravert employees were seen as successful. In addition, the study discovered a strong link between work-life balance and personality features. When it comes to stress reduction, this relationship was also important.

Manor and Desiana (2013), examined the effect of micro and small enterprise (MSE) owners' work-life balance and personality in the Greater Jakarta area. A total of One hundred fifty-two (152) micro and small businesses have been surveyed and regression analysis has been used to assess outcomes. Results have shown that work-life balance does not affect MSE effectiveness, while motivation and personality do affect MSE effectiveness.



Jones, Hill and Henn (2015), In the study on the importance of work-related psychological well-being in the relationship between personality and job satisfaction, 207 workers from various South African businesses (females = 58.9%, blacks = 20.3 percent, white = 64.3 percent, Indian = 7.7%, and Colored = 6.8%) participated (females = 58.9%, blacks = 20.3 percent, white = 64.3 percent, Indian = 7.7%, and Colored = 6.8%). Psychological well-being has an impact on personality traits and job happiness, according to the study.

Priyadharshini and Wesley (2014) investigated the frequency of Work-Family Conflict and how individual personality variables influence it. Two hundred and five (205) Information and Technology workers working in Chennai City were sampled who participated in the study using the snowball sampling technique. Using a structural equation modeling (SEM) method, the cross-sectional survey data was analyzed. W-F Conflict was found to be predicted by personality qualities such as openness to experience, conscientiousness, extraversion, and agreeability. However, neuroticism does not predict W-F conflict, according to the study.

From a research by Ganu and Kogutu (2014), Job satisfaction was exposed to be positively correlated with extraversion and neuroticism, whereas organizational commitment was discovered to be positively correlated with conscientiousness, openness, and neuroticism. This was revealed after 252 Kenyan health professionals were randomly chosen using a disproportional stratified random sampling technique and given a closed questionnaire. These findings were sufficient in revealing the study's major purpose, which was to evaluate how the big five personality traits influence work satisfaction and

organizational commitment using data analysis approaches such as multi linear regression and descriptive statistics.

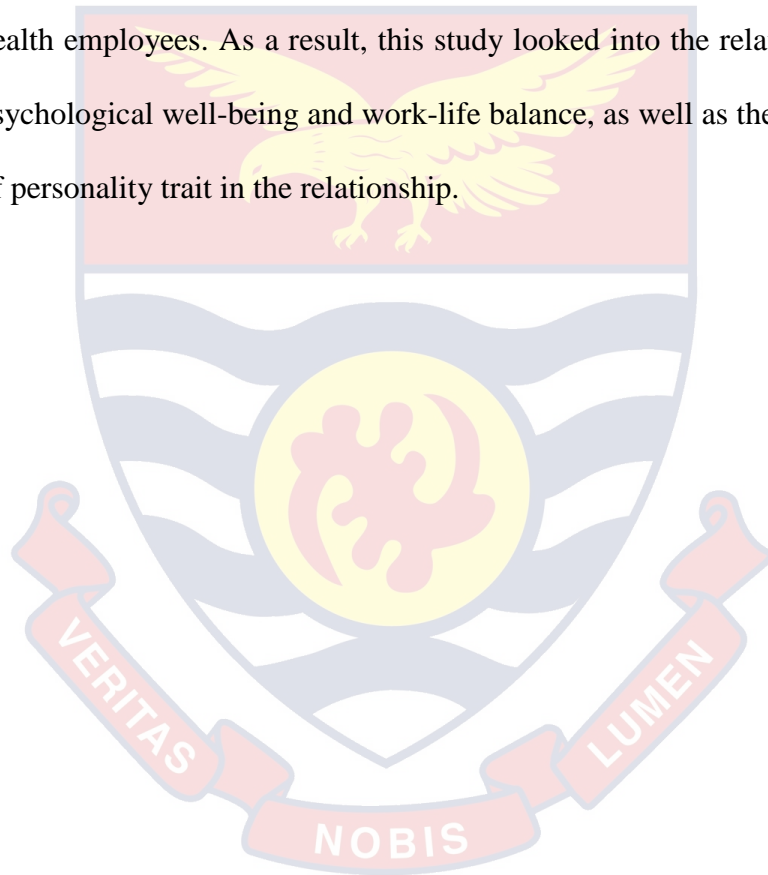
Ryan (2020) Researchers looked into the link between big five personality type indicators and job happiness in a community mental health setting in a paper titled "Job satisfaction as a function of the big five model of personality in the community health care center environment in northern India. A questionnaire was used as the major research technique to do this. Quota sampling was carried to get participants from various departments at Bowen Health Center in Northern Indiana. The results of this cross-sectional study demonstrated a favorable link between agreeableness and job satisfaction utilizing descriptive and correlational analysis. Neuroticism, on the other hand, was discovered to have a adverse link with job satisfaction.

Paulson and Leuty (2016), To investigate the association between disposal qualities and work-family and family-work conflict, researchers recruited 270 cross-cultural volunteers to complete online surveys. According to the study's findings, conscientiousness and extraversion had a positive relationship with emotional focused coping, whereas positive affect had a positive relationship with both issue and emotional focused coping.

#### Summary of the Review

The absence of the crippling parts of human experience—depression, anger, worry, and fear—as well as the existence of positive emotions, life meaning, environmental mastery, healthy relationships, commitment, and self-actualization—were characterized as psychological well-being in the study. Work-life balance has also been employed as a backdrop to psychological well-being in the literature. The Spill-over theory proposed by Pleck (1977),

was used to develop the theoretical foundations of the research. This theory's central tenet was that one side's experiences (e.g., work) could spill over to the other side, which is family, and vice versa. Empirical research reviewed found that several studies have been performed in Ghana on the issue of psychological well-being among several organizations (including mental health institutions). However, it was revealed that there was a gap in the literature about the work-life balance and psychological well-being of mental health employees. As a result, this study looked into the relationship between psychological well-being and work-life balance, as well as the moderating role of personality trait in the relationship.



## CHAPTER THREE

### METHODOLOGY

#### Overview

The methods of analysis used in the study are discussed in this chapter. There are sections on the research design, study area, population, sample and sampling technique, data collection instruments, validity and reliability, and data collection processes. This chapter also goes through the ethical considerations, data processing, and analysis that were used in the study.

#### Research Design

The descriptive survey research method is used in this study. To discover more about people's attitudes toward work-life balance and how it affects their mental health, the researcher used a descriptive survey approach. Furthermore, the researchers wanted to see if respondents' personalities influenced their work-life balance and psychological well-being. The descriptive design survey is a type of design that can be defined as a means of gathering data to answer questions or test hypotheses about the current status of a phenomena.

This survey seeks to explain in-depth and objectively an image of a continuing situation in real life (Quartey & Awoyemi, 2002). Koul (1997) surveys were suggested to provide a detailed view of current trends (psychological well-being) in order to use data to clarify current situations, policies and/or smarter schemes for their improvement, in addition to evaluating, understanding and reporting on the position of an issue, the investigator further clarified that (as in the case of mental health nurses work-life balance), descriptive surveys can be used to control the appropriateness of

an action by contrasting outcomes with existing parameters. It also profits from the fact that a number of individuals have provided several answers. This study is relevant because it will examine the work-life balance, personality patterns, and psychological well-being of mental health nurses.

In spite of the strengths associated with descriptive survey design, when investigating a social phenomenon, there are notable challenges associated with it. Marczyk, DeMatteon and Festinger (2005) note that survey designs do not rule out foreign variables, like all non-experimental designs, as the cause of what is being observed, no matter how convincing the data might be. This is due to the fact that descriptive survey designs have no control on the constructs or the context in which the research is conducted. This suggests that factors other than those credited by the investigator have a greater influence on the survey's findings. Survey design flaws, according to Seifert and Hoffgung (1991), increase the danger of producing incorrect results by probing into people's private difficulties.

Also as descriptive survey designs record commonly use questionnaires, illiterate respondents are restricted. However, attempts will be made in this study to mitigate the weaknesses of the nature of the survey. This includes avoiding items from the questionnaire that respondents consider delicate and private. All participants in the concern group were also literate and the scholar used very clear language to make it easy to comprehend and respond to items. Finally, this style is suitable because the flaws are much easier to cope with.

## Study Area

Politically, the Ankaful Psychiatric Hospital is situated in the Municipal Assembly of Komenda, Edina, Eguafo, Abrem, although it still maintains ties and relations with the Municipality of Cape Coast. It is approximately 12.5 km from the Cape Coast and 6 km from Elmina, and the estimated land area is approximately 1.5 square km. It is specifically situated in the village called Ankaful, where its name originates; it shares margins with the south of Ankaful Leprosy/General Hospital and the west of Ankaful Prisons with the village of Tsikweikrom to the north.

The Late Dr. Kwame Nkrumah, first President of the Republic of Ghana, established the Ankaful Psychiatric Hospital in 1965. It was formally earmarked as a 500 bedded hospital but due to imminent hosting by Ghana of the African Union (AU), conference in May 1965, patients on rehabilitation at Adomi near Senchi in the Eastern Region and Accra Psychiatric Hospital were rounded up and quickly dumped into the unfinished structures at Ankaful. This was the modest beginning of the Ankaful Psychiatric Hospital. The hospital's mission is to be a center of excellence in mental health care and training in the African sub-region. The core values of the hospital are: commitment to excellence, professionalism, team work respect and confidentiality.

## Population

The research population consisted of all mental health nurses in close contact with patients at the Ankaful Psychiatric Hospital. According to the Hospital Administration (2020), there were 189 mental health nurses in the hospital. The accessible population was 133 mental health nurses, thus; the

nurses who were available during the survey. This was due to the fact that, 59 of the mental health nurses were not at post as at the time of data collection. Kothari (2004), claimed that the sample is selected for the study from the available population. Due to that the researcher used all the nurses that were at post as at the time of data collection exercise, the accessible population was 133.

### Sampling Procedure

Through purposive sampling procedure, the Ankaful Psychiatric Hospital was selected. The hospital was chosen because of its peculiar role in handling mental health issues in the country. As indicated by Barratt, Ferris and Lenton (2015), purposive sampling was employed when the researcher trusts that the identified respondents have the characteristics of the intent, it is based on this that the Ankarful Psychiatric Hospital where mental health nurses worked was used.

The presumption is that most of the mental health issues are reported in there, so the nurses will have so many tasks to do, hence the need to examine their work-life balance and how it affects their own psychological life. After selecting the hospital, the researcher decided to make use of the entire population (census). That is 133 mental health nurses in the Ankaful Psychiatric Hospital. As stressed by Creswell and Creswell, (2017), the census method is used when the population is relatively small, and the researcher has the ability to obtain data from all the members of the population, since the total number of Ankaful psychiatric hospital was 133 as at the period of the data collection exercise the researcher decided to make use of all of them.

## Data Collection Instruments

The research instruments that were used to collect the data are explained in this section. There were questionnaires for psychological well-being work-life balance and for personality traits. The three set of questionnaire were put together to form sub-dimension of the questionnaire used in the study. A questionnaire was selected because it is efficient to get information from a huge sum of persons in a short time (Amedahe, 2002).

Knowles (as cited in Adane, 2013), suggested that questionnaires are cool to handle, easy to respond and easy to score, so responding to them takes relatively less time. Sidelining the countless advantages of questionnaires, there are numerous setbacks in the use of questionnaires, (Payne & Payne, 2004) the use of questionnaires may sometimes have challenges facilitating research, enabling respondents to provide shallow answers. In reality, respondents may not offer 100% truthfulness to their answers because of privacy and privacy problems, bias about social desirability. This also contributes to the skipping of difficult questions that may impact the study results. Despite this, respondents were assured of their privacy and confidentiality with respect to study attendance.

### Questionnaires Structure

#### Work-Life Balance Scale

Brough et al. (2014), who developed the questionnaire for work-life balance was modified and employed to calculate the work-life balance of respondents. Brough, et al.'s, instrument is a one-dimensional scale that consists of 4 elements that calculate the work-life balance of nurses. The instrument's overall Cronbach Alpha index was 0.84 when it was first created.



It's a five-point Likert scale, with the extremes being strongly agreeing and strongly disapproving. The adaptation focused on changing the statement and phrasing, such as "I currently have a cool balance between the time I spend at work and the time I spend at home," and the scale was originally a five-likert scale with Strongly disagree =, Disagree, Neutral, Agree, and Strongly agree. The researcher converted it to a four-point likert scale (Strongly Agree=4, Agree=3, Strongly Disagree=2, Disagree=1) using a four-point likert scale (Strongly Agree=4, Agree=3, Strongly Disagree=2, Disagree=1).

### Psychological Well-Being Scale

Clarke, Marshall, Victor, Ryff and Wheaton (2001) This scale was created. A multi-dimensional Likert scale with a 6-point scale is used. The sub-scales are life purpose, autonomy, personal advancement, environmental mastery, positive relationships, and self-acceptance. The measure's 18 elements are intended to assess a person's psychological well-being. The Cronbach Alpha index of the instrument was .92. Strongly Agree=6, Agree=5, Slightly Agree=4, Strongly Disagree=3, Disagree=2, and Slightly Disagree=1. The gadget was altered by the researcher. converted to a four-point Likert scale with the following scoring system: Strongly Disagree=1, Disagree=2, Agree=3. Strongly Agree=4.

### Big Five Personality (BFI-10)

This scale was developed by Balgiu (2018). The scale has 10-items across five hypothetical sub-scales which measures personality traits of individuals. The scale takes the form of Goldberg' dimensions, the only difference is that, Goldberg (1993) scale, 44-item has been reduced to 10-items by Balgiu (2018). Extraversion has an alpha of .46, agreeableness has

.46, conscientiousness has .62, neuroticism has .52 and openness also has .52. The overall alpha was .54. The researcher altered the scale from a five-point likert scale with the scoring readings Disagree=1, Strongly Disagree=2, Agree=3, Strongly Agree=4 to a four-point likert scale with the scoring readings Disagree=1, Strongly Disagree=2, Agree=3, Strongly Agree=4.

#### Validity and Reliability of the Data Collection Instrument

Because they were professionals in the field of measurement and assessment, my supervisors from the Departments of Education and Psychology were given the instrument to examine and determine the face and content validity of the instruments. They also double-checked the individual items to ensure that they were understandable to the respondents.

#### Pilot Testing the Questionnaires

The adapted questionnaire was pilot tested using 27 mental health nurses from Accra Psychiatric Hospital, Hertzog (2008), put that 10% to 20% of the sample size can be used for pilot testing in respect of this, 20% of mental health nurses were conveniently sampled for the pilot testing. The questionnaire was administered to the respondent by the researcher herself. The responses given by respondents were used to refine the questionnaire. The pilot testing was necessary because after careful review of the items based on the comments made by respondents on the shortcomings, consistency and uncertainty of all aspects of the questionnaire, it improved the reliability of the instrument and improved questions, format and scales (Leedy & Ormrod, 2005).

In addition, the pilot test provided the chance to evaluate the suitability and practicality of the data collection instrument. The adequacy of the procedures used for the study has also been checked. The pilot test helped to fine-tune the instrument overall (Leedy & Ormrod, 2005).

With the use of a statistical software for social sciences, cronbach Alpha reliability was calculated after pilot testing (SPSS). All items in the altered questionnaire were scored on a four-point likers scale, with Strongly Agree=4, Agree=3, Strongly Disagree=2, and Disagree=1.

**Table 1: Reliability Estimate of Questionnaire**

Questionnaires	Number of items	Cronbach alpha
Work-life balance	4	.692
Psychological well-Being	18	.771
Personality trait	10	.757

Source: Field Survey (2020)

#### Ethical Considerations

Ethical considerations in social research primarily entail informed consent, confidentiality and ethical review board's assistance. Informed consent entails the researcher to give accurate information about the aims of the research to the respondents (Bryman, 2008; Patton, 2002). In this research, the researcher informed the respondents about the topic and purpose, and why the researcher was interested in using them. Further, the researcher asked all respondents whether they could be used for the study or not. Confidentiality, on the other hand, also involves concealing information given. High level of anonymity and confidentiality were both adhered to (Bryman, 2008; Patton,

2002). In this regard, nurses were asked not to write their names on the questionnaires.

Another ethical concern in educational research is that the exercise does not harm the study subjects, regardless of whether they volunteer or not to participate in the study. The concept of harm as used in this regard can be physical, psychological or emotional. In pursuance of this, questions were framed in a way that gave the respondents several alternatives and freedom in selecting the answers that were most appropriate to them.

Furthermore, it is stated that unethical behavior, such as plagiarism, is not tolerated in research. Plagiarism occurs when a researcher falsifies, distorts, or plagiarizes other people's work. To avoid plagiarism in this investigation, I strictly followed the established norm of scientific behavior. Before drafting the research report, I obtained information from the appropriate respondents and submitted it to appropriate analyses. Notably, ideas, works, and writings were properly acknowledged by including relevant references in the in-text and primary referencing styles by the University of Cape Coast.

#### Data Collection Procedures

A letter of introduction was obtained from the University of Cape Coast's Department of Education and Psychology, copies of the introductory letter were made available to Heads of the general administration of the various mental health facilities nominated for the study. Permission was given and the mental health nurses' departmental heads concerned were also told accordingly. Date and time was set for me to meet the nurses. The reasoning for the study and all other ethical concerns included in the study were clarified

to the respondents for ethical reasons. The questionnaires were administered to all of the mental health nurses in their respective wards for a period of five weeks.

#### Data Processing and Analysis

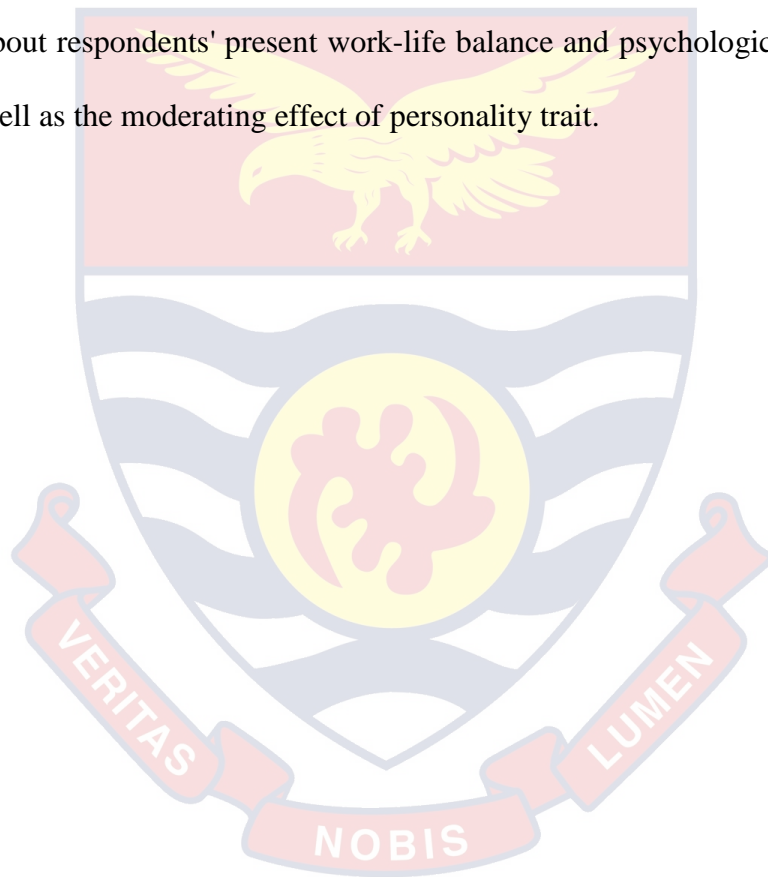
For easy identification, the filled questionnaires were serially numbered and coded for analysis. The completed and returned questionnaires totaled 110 Items on the four-point Likert scale were recorded 4, 3, 2 and 1 with the answer strongly agree, agree, disagree, and strongly disagree, accordingly. Items in the negative were opposite coded.

Data to answer research question 1 and 2 were analysed using mean and standard deviation. This statistical procedure was used because the scholar sought to find the link that exists between respondents' work-life balance and psychological well-being. Finally, hypothesis 2 was tested using Conditional Process Analysis by Andrews Hayes (2013), specifically, moderation analysis. This statistical tool adopted 5000 bootstrap samples approach to estimate the moderating role of personality trait in the association between work-life balance and psychological well-being.

#### Chapter Summary

In Ankafu Psychiatric Hospital, this research viewed the work-life balance and psychological well-being of mental health nurses, as well as the moderating influence of personality trait. The chapter addressed the strategies and methods that were employed to attain the study's objectives. A review of the research design, population and sample, tools for information gathering, procedures for data gathering and analysis, as well as the validity and reliability of the tools were identified. As previously stated, the descriptive

research design with quantitative approach was the best fit for the study. The approach has some downsides, such as bias being introduced into data collection processes. The incapacity of quantitative techniques to give follow-ups on respondents' responses and in-depth descriptions of respondents' experiences, as well as the large sample size required by quantitative research, which in this study was truly limited to only a few persons. Despite the faults in the design, the study was deemed appropriate because it aimed to learn about respondents' present work-life balance and psychological well-being, as well as the moderating effect of personality trait.



## CHAPTER FOUR

### RESULT AND DISCUSSION

#### Overview

The study's purpose was to learn more about the moderating role of personality trait in the work-life balance and psychological well-being of mental health nurses in Ankafu Psychiatric Hospital. A descriptive survey with a quantitative technique met the study's goal. The study used questionnaires to collect data on work-life balance, personality attributes, and psychological well-being. The study's goal was determined to be best served by a descriptive survey with a quantitative methodology.

Using descriptive statistics like means and standard deviations, the work-life balance and psychological well-being of mental health nurses at Ankafu Psychiatric Hospital were explored. The total number of nurses involved in the trial was 133. The percentage of those that responded was 83 percent (110). The chapter presents and examines the conclusions based on data collected from 110 respondents. There are two sections in this section. The first section introduces and discusses the background survey results in light of the respondents. The second section summarizes and discusses the outcome in response to each of the study questions and hypotheses. Tables with Pearson's product Moment Correlation Coefficient, mean and standard deviations, and analysis utilizing Hayes (2013)'s process approach were used.

### Background Information of Respondents

This segment provides the background information of respondents who replied to the questionnaire items. Demographic variables includes the gender and age range of the respondents. The overview of demographic details for respondents is provided in Table 2.

**Table 2: Demographic Variables of Respondents**

Variable	Sub-scale	Frequency	Percentage
Gender	Male	65	59
	Female	45	41
	Total	110	100
Age-range	Below 20	-	-
	20-25	8	7
	26-30	38	35
	31-35	47	43
	36-40	17	16
	41-50	-	-
	51-60	-	-
	Above 60	-	-
	Total	110	100

Source: Field Survey (2020)

Results from Table 2, demonstrates that out of the 110 respondents that took part in the study, majority (n= 65, 59%) were males while their counterpart females were in a minority (n= 45, 41%). This actually implies that the study setting appears to have male nursing workers dominating in terms of their numerical strength. It further amplifies an ancient trend of the



male fraternity dominating the formal or circular job settings and not only mental health facilities. Data from Table 2, also shows that majority (n= 47, 43%) of the participants were around the age-range of 31-35 years. This was followed (n= 38, 35%) respondents who were within the age-range of 26-30 years. Mental health nurses who were within the ages of 36-40 years were also substantial (n= 17, 16%) in number. However, those within the age-range of 20-25 were in a minority (n= 8, 7%).

The data as presented in this report shows that the mental health setting chosen for this study was predominantly made-up of young men and women within the ages of 31-40 years. Such category of individuals may have relatively less things to cater for since they are still at the prime of life trying their best to get something from the world of work. In such instance, it is expected that such individuals perform better in terms of balancing work activities with life duties. The subsequent paragraphs would however, indicate in detail whether the foregoing instance were true of the study sample.

#### Results of Research Questions

The major data findings were presented in response to the study questions. On a questionnaire, participants were asked to reply to questions that were rated as Strongly Agree (SA) =4, Agree (A) =3, Strongly Disagree (SD) =1, and Disagree (D) =2 on a 4-point Likert scale. For the sake of analysis and discussion, the average mean score for all of the responses was 2.5.  $(1+2+3+4/4) = (2.5)$ . As a result, mean scores greater than 2.5 indicate agreement, whereas values less than 2.5 suggest disagreement.

Research Question One: What is the work-life balance experience of mental health nurses at Ankaful psychiatric hospital?

The research question sought to explore the work-life balance of mental health nurses that were chosen for the research. In order to discover the work-life balance experience of mental health nurses of Ankaful Psychiatric Hospital, the overall mean was estimated by SPSS, was used. The overall mean was compared with the standard mean 2.5 (1+2+3+4/4) which showed the work-life balance of the mental health nurses at Ankaful Psychaitric Hospital.

Overall mean value greater than 2.5 means that the nurses had high work-life balance, while overall mean less than 2.5 means that nurses had low work-life balance. Summary of the responses of respondents are presented in Table 3.

**Table 3: Work-life Balance of Mental Health Nurses**

Statements	M	SD
I currently have the ability to manage the time I spend at work and the time I have available for non-work activities.	3.2	.74
I have difficulty managing my work and non-work activities.	1.9	.87
I feel that the balance between my work demands and non-work activities is currently about right.	2.9	.77
Overall, I believe that my work and non-work life are managed.	3.1	.69
Mean of Means/Average SD	2.8	.77

Source: Field Survey (2020)

Results in Table 3 indicate that mental health nurses within Ankaful Psychiatric Hospital trust that they can achieve the time they spend at work also for non-work activities ( $M = 3.2$ ,  $SD = .74$ ). It was followed by a response that, their work and non-work life are managed as expected ( $M = 3.1$ ,  $SD = .69$ ). From table 3, respondents felt that at the moment, the balance between their work demands and non-work activities is right ( $M = 2.9$ ,  $SD = .77$ ). However, respondents are consistent enough to disapprove that they have difficulty managing their work-life and non-work activities ( $M = 1.9$ ,  $SD = .87$ ). The findings suggest that respondents were rated higher on the work-life balance scale, which implies that mental health nurses at the Ankaful Psychiatric Hospital are efficient once it comes to balancing their job tasks with their non-work life activities. It is shown by the mean score of  $2.8(3.2+1.9+2.9+3.1)/4= 2.8$  and an average standard deviation score of  $.77$  which is an indication of uniformity in answers. Most definitely, this has implication for work efficiency and psychological well-being of the mental health workers.

Research Question Two: What is the level of psychological well-being of mental health nurses at Ankaful Psychiatric Hospital?

The goal of this question was to learn about the psychological well-being of the Ankaful Psychiatric Hospital mental health nurses who took part in the survey. The findings are summarized in Table 4:

The purpose of the study was to investigate the psychological well-being of the selected mental health nurses. To assess the psychological well-being of mental health nurses at Ankaful Psychiatric Hospital, SPSS was used to compute the total mean. The aggregate mean was compared to the standard

mean  $(1+2+3+4/4) = 2.5$ , indicating that the mental health nurses at Ankaful Psychiatric Hospital were in good mental health. Overall mean value greater than 2.5 means that the nurses had high psychological well-being while overall mean less than 2.5 means that nurses had low psychological well-being. Overall mean is  $2.5(1+2+3+4/4) = 2.5$ .

**Table 4: Psychological Well-being of Mental Health Nurses**

Statements	M	SD
People who have strong opinions tend to impact me.	2.2	.96
I evaluate myself based on what I believe is significant, not what others believe.	3.1	.89
I am confident in my own judgments, even if they are opposed to popular opinion.	3.0	.92
The demands of daily existence frequently depress me.	2.3	1.1
I'm really good at juggling all of my commitments in my daily life.	3.0	.90
In general, I believe I am in command of the situation I am in.	3.1	.80
In many ways, I am dissatisfied with my life achievements.	2.1	1.1
When I reflect back on my life, I am happy with how things have turned out.	2.9	.87
My personality appeals to me in its whole.	3.2	.81
I believe it is critical to have fresh experiences that challenge my perceptions of life and the world.	3.3	.75
Long ago, I gave up trying to make significant changes in my life.	1.9	1.0
Life has been a never-ending journey of learning, developing, and growing for me.	3.5	.86
Some individuals go through life aimlessly, but I am not one of them.	2.9	1.1
I take each day as it comes, and I try not to think about the future.	2.2	1.0
I sometimes feel as if I've accomplished everything there is to do in life.	2.2	.87
People describe me as a generous person who enjoys sharing my time with others.	3.2	.78
I've never had a warm and trusted relationship with another person.	2.2	.94
It's been challenging and hard to keep a tight friendship..	2.2	1.0
Mean of Means/Average SD	2.7	.93

Source: Field Survey (2020)

Table 4 reveals that majority (M = 3.5, SD = .86) of the respondents agree that life has been a continuous process of learning, changing and growth. This was followed by the respondents' view (M = 3.3, SD = .75) of the fact

that when they have new experiences that challenge their thought about life is important. Again majority ( $M = 3.2$ ,  $SD = .81$ ) of the respondents feel they like most aspect of their personality. A greater percentage of the respondent ( $M = 3.2$ ,  $SD = .78$ ) believe that people describe them as generous and people that share their time with others.

Most of the mental health nurses also agreed ( $M = 3.1$ ,  $SD = .80$ ) that generally, they feel they are in charge of the situation in which they find themselves. On how they see themselves, majority accepted ( $M = 3.1$ ,  $SD = .89$ ) that they (nurses) judge themselves with what is important and not what others think of them. Furthermore, most of the respondents agreed ( $M = 3.0$ ,  $SD = .92$ ) that they have confidence in their own opinion, even if they are contrary to the general consensus. In addition, respondents further indicated ( $M = 2.9$ ,  $SD = 1.1$ ) that some people roam around aimlessly through life, but they are not part of such people.

The mean of means of 2.7 indicates that respondents are high on the psychological well-being scale, implying that at the time of data collection, respondents lacked the impaired features of the human experience; depression, fear, anxiety, and anger, as well as the presence of enabling ones; positive emotions, meaning in life, healthy relationships, environmental mastery, and engagement. This is shown by the mean of means score exceeding the average mean of 2.5. The average standard deviation of .93 also suggest that respondents' responses were homogenous in form. The psychological health of the mental health workers (i.e nurses) has implication for productivity and the entire hospital engagement.

**Hypothesis One:**  $H_0$ : There is no association between work-life balance and psychological well-being.

The hypothesis sought to examine whether a linear relationship exists between work-life balance and psychological well-being of mental health nurses. Summary of the analysis is shown in Table 5.

**Table 5: Relationship between Work-life Balance and Psychological Well-being**

N	Sig.(2-tailed)	Pearson Correlation	Coefficient of Deter.
110	.13	.14	2.0%
P> .05 $r^2 = 02$			

The relationship between work-life balance and psychological well-being was investigated using Pearson's Product Moment Correlation Coefficient. Initial analysis was done to check whether the assumption of normality, linearity and Homoscedasticity was dishonored. However, none of the assumptions were found dishonored and so the test statistic of Pearson's  $r$  was used. Because the researcher is interested in finding association. Work-life balance was connected with psychological well-being, and there was a weak optimistic association between the two constructs ( $r=.14$ ,  $n= 110$ ,  $P>.13$ ). The finding from the results means that, as a person (in this case a mental health nurse) do better in terms of balancing his/her work and private life, he/she probably will experience wholeness psychologically since there was a weak positive relationship between work-life balance and psychological well-being. This could also imply that, because the relationship between the two constructs was non-significant, the positive relationship between work-life balance and psychological well-being was merely coincidental, rather than

necessary, because they were able to balance their mental health nursing work with other life activities. Likewise, the results show 2.0 percent shared variance between the two variables, hence there is fairly weak overlap between the two variables.

### Assumptions for Parametric Test Analysis

#### Normality

The data was checked for Normality assumption. On this, the researcher conducted a preliminary analysis where a histogram graph was inspected to look for the distribution of the data. The output of the histogram graph showed that the data or the scores on the continuous scale were reasonably normally distributed for both work-life balance and psychological well-being.

#### Checking for Outliers

Outliers were also checked for; a Boxplot was inspected with ID number of cases as outliers. The rule of thumb is that if a data points extends beyond 1.5 then it can be defined as an outlier. Concerning the data for this particular study, the data point was below the 1.5 threshold. There were no outliers in the data.

**Hypothesis Two:**  $H_0$ : Personality trait will not moderate the link between work-life balance and psychological well-being of mental health nurses at Ankafu Psychiatric Hospital.

The aim of this research was to test the moderating role of personality traits on work-life balance and psychological well-being of Psychiatric Nurses. As a subsidiary of multiple regression, assumptions were met. The predictor was work-life balance, the moderator was personality trait type (neuroticism

openness, extraversion, agreeableness and conscientiousness) and the criterion was psychological well-being. The predictor criterion and the moderator were all multidimensional but the predictor criterion dimensions were transformed as composite while moderator was examined dimensionally. The performing of moderation was based on bootstrap samples of 5,000. Table 6 presents the results:

**Table 6: Moderating Role of Openness Trait on Work-Life and**

Psychological Well-being						
Variable	Coeff	BootSE	t-value	BLLCI	BULCI	P
	(b)					
Constant	51.5598	.5121	100.6914	50.5446	52.5750	.0000
WLB_S	.4609	.3346	1.3777	-.2024	1.1242	.1712
	.0748	.4973	.1504	-.9112		
OPENNESS					1.0608	.8807
WLB*OPENNESS	-.3258	.3741	-.8708	-.4160	1.0675	.3859

Source: Field Survey (2020)

Model summary:  $R^2 = .1679$ ;  $F(3, 106) = 1.0253$ ,  $p = .3845$

WLB\*OPENNESS:  $R^2 \text{ Change} = .0070$ ;  $F(1, 106) = .7582$ ,  $p = .3859$

Predictor: Work-Life Balance

Criterion: Psychological Well-being

Moderator: Openness

The outcome in Table 6 shows that openness type of personality did not influence the link between work-life balance and psychological well-being,  $b = -.3258$ ,  $t = -.8708$ , CI (-.4160, 1.0675). Figure 2 indicated the graphical representation of the moderation result:







**Table 8: Moderating Role of Extraversion Trait on Work-Life and Psychological Well-being**

Variable	Coeff	BootSE	t-value	BLLCI	BULCI	P
(b)						
Constant	51.4611	.4925	104.4861	50.4846	52.4375	.0000
WLB_S	.7167	.3240	2.2123	.0744	1.3591	.0291
EXTRAVER	-1.0253	.4056	-2.5275	-1.8295	-.2210	.0130
Int_1	.4900	.2356	2.0800	.0229	.9570	.0399
Conditional effect of the focal predictor at the values of the moderator						
Low Extraversion	.2134	.3761	.5675	-.5322	.9590	.5716
Moderate extra	.7034	.3231	2.1767	.0627	1.344	.0317
High Extraversion	1.1933	.4224	2.8254	.3560	2.0307	.0056

Source: Field Survey (2020)

Model summary:  $R^2=.1103$ ;  $F(3, 106) = 4.3783$ ,  $p=.00602.0307$

WLB\*EXTR:  $R^2 Change=.0363$ ;  $F(1, 106) = 4.3263$ ,  $p=.0399$

Predictor: Work-Life Balance

Criterion: Psychological Well-being

Moderator: Extraversion

Extraversion type of personality moderated the association between work-life balance and psychological well-being, according to Table 8,  $b=.4900$ ,  $t=2.8254$ , CI (.0229, .9570). Figure 4 indicated the graphical representation of the moderation result:







The Figure showed that no significant moderation effects were recorded. It can be deduced from the graph, showing no moderation effect.

## Discussion

### Work-Life Balance of Mental Health Nurses

Research question one sought to explore the work-life balance of mental health nurses that were chosen for the study. The finding on this research question revealed that respondents were higher on the work-life balance scale, which actually implied that mental health nurses at the Ankaful Psychiatric Hospital are efficient when it comes to balancing their work tasks with their non-work life activities. The revelation maybe due to the fact that the nurses have come to realize that every part of their lives are important, hence their ability to apportion their times to suit each aspect so that they are not stressed. With such balanced lives, people are able to cope with situations, critical to work ethics and above all, try to prevent irrelevant and unrelated activities from conflicting with either their social lives or work lives corroborates with Shivakumar and Pujar (2017), investigated.

Turpin-Quaye (2018), study reveals, matters connected to work-family life balance among banking professionals in Ghana and discovered a work-life balance among the workers. In another field of work, Acheampong (2013) investigated work-life balance activities at KNUST and how it influence career progression of female professors. The study discovered a healthy work-life balance among the female lecturers. Furthermore, in a related health setting, Pasay-an et al. (2014) explored the work life balance among nurse educators and discovered that they had a positive balance of life with their work schedules. Clearly, studies conducted in different field also showed

efficient work-life balance of workers. It can be significant to state that mental health nurses used in this study probably were able to balance their work-life with their personal life because of family support (Acheampong, 2013) and minimal work load (Makabe et al., 2014).

### Psychological Well-Being of Mental Health Nurses

Research question two sought to examine the psychological well-being of mental health nurses at Ankaful Psychiatric Hospital. This was done by administering the psychological well-being scale to the mental health nurse workers. Findings from the survey indicated that respondents were high on the psychological well-being scale, suggesting that at the time of data collection, respondents lack crippling features of the human experience sadness, nervousness, fear, wrath, and the existence of enabling ones positive emotions, meaning, healthy relationships, environmental mastery and engagement. This finding of a positive psychological well-being measure among the mental health nurses is not surprising because of their previous high rate in balancing their work duties well with life duties. Ideally, people with appreciable levels of psychological well-being are likely to think positively, approach with enthusiasm and have less issues bother of, hence catapulting their work or lives. This revelation of high levels of psychological well-being could be as result of refresher courses that is geared towards managing psychological problems involved in treating mental patients and as well, nurses' personal efforts in discarding troubling work thoughts that could hamper their proper thinking and reasoning. This revelation supports that of Foster, Roche, Giandinoto and Furness (2020), who found high levels of psychological well-being among mental nurses in Australia. In this study, it was further revealed



that other health workers possessed moderate levels of psychological well-being. The study further confirms Ackerman's (2016) study results, where nurses were found to have less job strain and high levels of psychological well-being.

#### Relationship between Work-Life Balance and the Psychological Well-Being of Mental Health Nurses

Hypothesis one sought to test the link between psychological well-being and work-life balance of mental health nurses at Ankaful Psychiatric Hospital. The data on the respondents' psychological well-being were taken with psychological well-being scale. Discoveries from the analysis of the data exposed that mental health nurses at Ankaful Psychiatric Hospital's work-life balance positively correlate with their psychological well-being. The positive relationship (even though weak) suggests that as nurses balance their work and personal life well, their psychological health is also more likely to improve. The finding implies that as mental health nurses are able to balance their work, there is a possibility of improving their psychological possessions in terms of managing emotions, positive thoughts and feeling of satisfaction. Looking at the tedious nature of mental health, a good work-life balance is required and as well, psychological stability is a demand. Corroboratively, the current study finding agrees with Ackerman's (2016) study reveals that nurses reporting high levels of balance in their work equally reported high levels in psychological well-being. Furthermore, the finding is in line with Wilkinson (2013) and Ashtankar (2016) study revelations, which found work-life balance relating positively with psychological well-being of employees. In this, it is alleged that once workers are able to balance their work life with that of

family or personal life, they become better psychologically, which in turn reflect on one's work output (Bataineh, 2019).

#### Personality Trait Moderating the Relationship between Work-Life Balance and Psychological Well-Being of Mental Health Nurses

The second hypothesis examined the statistical impact of personality trait on the relationship between work-life balance and mental health nurses' psychological well-being. Among the five (5) components (openness, neuroticism, extraversion, agreeableness and conscientiousness) of personality traits, only extraversion moderated the association between psychological well-being and work-life balance. This implies that mental health nurses who were the outgoing type may not have issues in balancing their work and psychological well-being. With such people, they are likely to encounter important figures in their lives, who may share with them their experiences, where they could equally learn from to manage theirs. It is possible with this that mental health nurses are assertive, emotionally stable, and exhibit less impulsivity in line with performing their work and social duties.

From my findings, it was only extraversion personality trait that moderated the relationship, which implied that extraversion personality enhanced the relationship. As the degree of extraversion rises, the strength of work-life balance effect on the psychological well-being increases. The other sub-dimensions of the personality trait that is openness, conscientiousness, agreeableness and neuroticism personality did not have any effect on the connection between work life and psychological well-being of mental health nurses at Ankafu psychiatric hospital.

## Extraversion

Extraversion moderated the relationship between psychological well-being and work-life balance, this therefore means that significant moderation effects were recorded. In this sense, Psychiatric Nurses with the extraverted type of personality will have an increased work-life balance, which will in turn increase their psychological well-being. This current research supports previous findings, the relationship between extraversion and work balance is positive (Wille, De Fruyt & Feys, 2013; Rantanen, Pulkkinen Kinnunen, 2005). While theoretically, researchers have tried to explain a positive relationship between these two constructs, there is a substantial relationship between these studies (Wille et al.; Rantanen et al.).

## Neuroticism

Neuroticism is clearly linked to work-family conflict in terms of important repercussions (Smoot, 2005; Wayne, Musisca & Fleeson, 2004). Another study discovered a link between mental resilience (low neuroticism) and how people perceive interpersonal stress (Dijkstra, Van Dierendonck, Evers & De Dreu, 2005). Furthermore, unfavorable affectivity (a neurotic attribute) has been revealed to have a considerable impact on work-family conflict (Bruck & Allen, 2003). According to Van den Berg and Feij (2003) emotional stability (low neuroticism) has a role in the interaction between job characteristics (demands and resources) and work behavior. According to current research, neuroticism appears to have no effect on the relationship between work-life balance and psychological well-being.

## Conscientiousness

Conscientiousness has been demonstrated to be a predictor of happiness and health outcomes in numerous research (Smoot, 2005; Bruck & Allen, 2003; and Wayne et al., 2004). Other research has demonstrated a negative link between conscientiousness and work-family conflict (Allen & Bruck, 2003), leading researchers to assume that conscientious persons are less likely to engage in work-family conflict due to their readiness and collaborative capacity. Conscientiousness, according to Halbesleben, Harvey, and Bolino (2009), acts as a buffer to reduce the association between work interference with family and workplace commitment in terms of interaction effects. According to Witt and Carlson (2006), conscientiousness has an association impact, with higher levels of family-work conflict being connected to poor job performance for people with high levels of conscientiousness. In this study, however, there was no evidence that conscientiousness has a moderating effect on the work-life balance or psychological well-being.

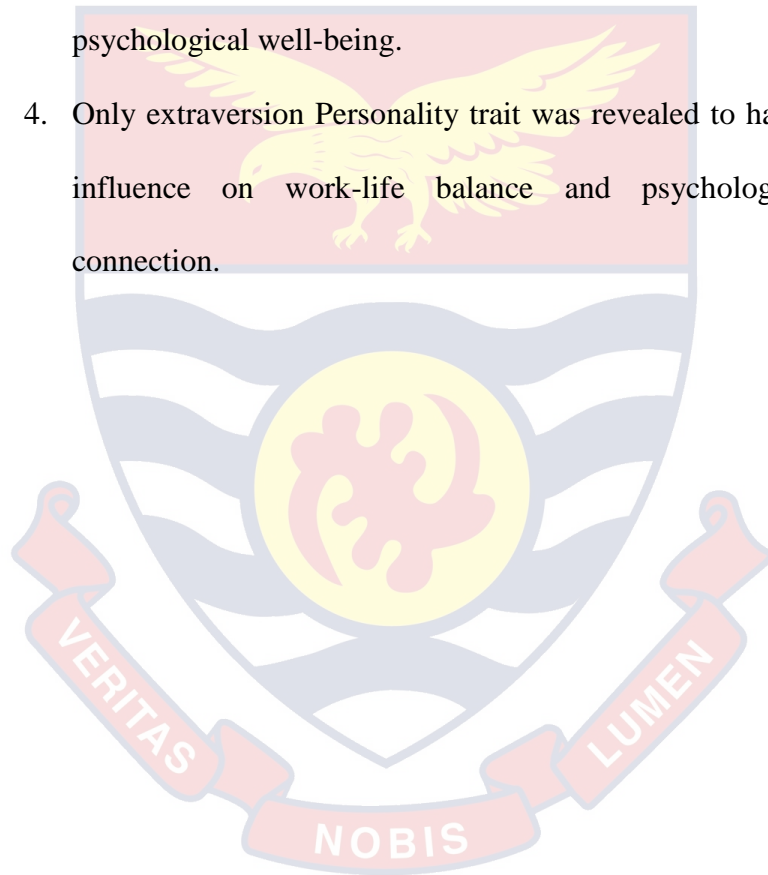
## Agreeableness

People who are more agreeable are healthier than those who are less agreeable, according to previous studies into work-family harmony (Bruck & Allen, 2003; & Wayne et al., 2004). According to Michel, Clark, and Jaramillo (2011), agreeability and work-life balance spillover, which is linked to work-life conflict, have a positive association. According to this new study, agreeability has no bearing on the association between psychological well-being and work-life balance.

## Summary

After analyzing the data with descriptive (percentages and frequencies, mean and standard deviation, Pearson's product moment correlation) and inferential statistics, Hayes (2013) summarized the findings:

1. Respondents had a good work-life balance.
2. Respondents had high psychological well-being.
3. There was a weak positive relationship between work-life balance and psychological well-being.
4. Only extraversion Personality trait was revealed to have a moderating influence on work-life balance and psychological well-being connection.



## CHAPTER FIVE

### SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

#### Overview of Research Problem and Research Methods

The researchers wanted to see if personality traits influenced the association between work-life balance and mental health in mental health nurses at the Ankaful Psychiatric Hospital. The research used a descriptive survey design. All of the mental health nurses in the above hospital were recruited as study respondents using the census method, for data collection, adapted questionnaire on psychological well-being, work-life balance, and personality attribute were adapted and employed. Percentages and frequencies, Pearson's product Moment Correlation Coefficient, means and standard deviations, and process procedure by Hayes (2013), were used in the analysis of the data.

#### Summary of Key Findings

Survey results revealed respondents who were mental health nurses of Ankaful Psychiatric Hospital had good work-life balance. Workplace duties and related stress were not reported to spill-over respondents' family/personal life. This is to say that respondents were efficient managers of work and family/personal life related issues. Findings revealed that respondents rated high on the psychological well-being scale. This implies that mental health nurses of Ankaful Psychiatric Hospital had positive emotions devoid of anxiety, depression, fear and all the negative human experience related issues.

Moreover, findings from the study showed that mental health nurses at Ankaful Psychiatric Hospital's work-life balance positively correlate with their psychological well-being. The positive relationship (even though weak)

suggests that as nurses balance their work and personal life well, their psychological health is also more likely to improve.

Finally, the study found that only extraversion personality trait was proven to be a significant moderator between mental health nurses' psychological well-being and work-life balance. Only nurses with the extraversion personality characteristic had an impact on the relationship in terms of lowering or raising the association index between work-life balance and psychological well-being in this study. The remaining dimensions, on the other hand, had no effect on the relationship in terms of increasing or diminishing it.

#### Conclusions

According to the findings, mental health nurses at Ankaful Psychiatric Hospital are more likely to report happiness and well- functioning at work and at home, with less duty conflict. This is most likely due to their ability to balance work and personal obligations.

It can be concluded based on the findings, that mental health nurses at Ankaful Psychiatric Hospital have a better chance of utilizing their emotional, intellectual, physical, spiritual, and social dimensions, thereby increasing their potential for effective living and employment, as well as substantial contributions to mankind.

The study can conclude that having work-family life balance may also mean having a higher measure of psychological well-being. This is so because the two variables (i.e. psychological well-being and work-life balance) relates.

Finally, the research concludes that striking a balance between one's work and family life has a higher probability of setting a person up for high

psychological well-being for personality traits irrespective of the personality trait type of the individual except for individuals with extraversion personality type. Extraversion personality enhanced the relationship. As the degree of extraversion rises, the strength of work-life balance effect on the psychological well-being increases.

### Recommendations

Based on the results of the research, the following recommendations are offered for policy and practice:

1. Work-related counselling should be intensified especially on issues about work and family life in the Ankaful Psychiatric facility to sustain the positive work balance of mental health workers.
2. Management of Ankarful Psychiatric Hospital and other related health institutions can decrease work-life imbalance introducing flexi-time and compressed working week creativities to their staffs to further sustain their positive work-life balance.
3. Work-based strategies such as work-conflict management strategies should be put in place to sustain the higher psychological well-being of mental health nurses.

Suggestions for Future Research

The following are advocated for future research:

1. Replicate this study in different mental health institutions in Ghana to increase the generalizability of the outcomes in this study report.
2. Examine how work-life balance and resilience develop over time among psychiatric health workers.



## REFERENCES

- Abor, P. A., Abekah-Nkrumah, G., & Abor, J. (2008). An examination of hospital governance in Ghana. *Leadership in Health Services*.
- Acheampong Frimpomaa, A. (2013). *An investigation into work-life balance practices and its effect on career progression; A case study of female lecturers on KNUST Campus* (Doctoral dissertation).
- Ackerman, D. M. (2016). *The association between job strain and psychological well-being in national health insurance pilot clinics* (Doctoral dissertation).
- Adane, L. O. (2013). *Factors affecting low academic achievement of pupils in Kemp Methodist Junior High School in Aburi, Eastern region* (Doctoral dissertation, University of Ghana).
- Adnan Bataineh, K. (2019). Impact of work-life balance, happiness at work, on employee performance. *International Business Research*, 12(2), 99-112.
- Alkire, S., & Sumner, A. (2013). Multidimensional poverty and the post-2015 MDGs. *Development*, 56(1), 46-51.
- Allen, T. D. (2001). Family-supportive work environments: The role of organizational perceptions. *Journal of vocational behavior*, 58(3), 414-435.
- Allis, P., & O'Driscoll, M. (2008). Positive effects of nonwork-to-work facilitation on well-being in work, family and personal domains. *Journal of Managerial Psychology*.
- Allport, G.W. (1961). *Pattern and growth in personality*. New York: Holt, Rinehart and Winston.

- Alzayyat, A. (2016). Perceived stress and coping strategies among jordanian nursing students during clinical practice in psychiatric/mental health courses. *European Psychiatry*, (33), S190.
- Amedahe, F. K. (2002). *Fundamentals of educational research methods*. Mimeograph, UCC, Cape Coast.
- Anglim, J., & Grant, S. (2016). Predicting psychological and subjective well-being from personality: Incremental prediction from 30 facets over the Big 5. *Journal of Happiness studies*, 17(1), 59-80.
- Antonovsky, A. (1987). *Unraveling the mystery of health: How people manage stress and stay well*. Jossey-bass.
- Antwi-Bekoe, T., & Mensah, E. (2009). Financing Mental Health Care in Ghana. Basic Needs.
- Arafa, M. A., Nazel, M. W. A., Ibrahim, N. K., & Attia, A. (2003). Predictors of psychological well-being of nurses in Alexandria, Egypt. *International Journal of Nursing Practice*, 9(5), 313-320.
- Aryee, S., Srinivas, E. S., & Tan, H. H. (2005). Rhythms of life: antecedents and outcomes of work-family balance in employed parents. *Journal of Applied Psychology*, 90(1), 132.
- Ashtankar, O. M. (2016). Analysis of the impact of work life balance on wellbeing of police department employees of Nagpur district. *International Journal of Applied Research*, 2(5), 380-383.
- Ayadurai, V. K. (2018). *Work-Life Balance, Work-Study Interface, Gender, Stress, and Satisfaction of Online Students*.

- Balgiu, B. A. (2018). *The psychometric properties of the Big Five inventory-10 (BFI-10) including correlations with subjective and psychological.*
- Barker-Benfield, G. J. (1996). *The culture of sensibility: Sex and society in eighteenth-century Britain.* University of Chicago Press.
- Barnett, R. C., & Hyde, J. S. (2001). Women, men, work, and family: An expansionist theory. *American psychologist*, 56(10), 781.
- Barratt, M. J., Ferris, J. A., & Lenton, S. (2015). Hidden populations, online purposive sampling, and external validity: Taking off the blindfold. *Field methods*, 27(1), 3-21.
- Behery, M., Paton, R. A., & Hussain, R. (2012). Psychological contract and organizational commitment: The mediating effect of transformational leadership. *Competitiveness Review: An International Business Journal.*
- Berger, A. (2001). *Resistin: A new hormone that links obesity with type 2 diabetes.*
- Boakye, M., Moore, R., Kong, M., Skirboll, S. L., & Arrigo, R. T. (2013). Health-related quality-of-life status in Veterans with spinal disorders. *Quality of Life Research*, 22(1), 45-52.
- Boeree, C. G. (2006). *Personality theories: An introduction.* Psychology Department. Retrieved from <http://www.ship.edu/%7Ecgboree/perscontents.html>
- Bonsu, A. S., & Salifu, Y. J. (2019). Community-based mental health care: stigma and coping strategies among professionals and family

- caregivers in the eastern region of Ghana. *Issues in Mental Health Nursing*, 40(5), 444-451.
- Bratton, M., Mattes, R., & Gyimah-Boadi, E. (2005). *Public opinion, democracy, and market reform in Africa*. Cambridge University Press.
- Breaugh, J. A., & Frye, N. K. (2007). An examination of the antecedents and consequences of the use of family-friendly benefits. *Journal of Managerial Issues*, 35-52.
- Brough, P., Timms, C., O'Driscoll, M. P., Kalliath, T., Siu, O. L., Sit, C., & Lo, D. (2014). Work-life balance: A longitudinal evaluation of a new measure across Australia and New Zealand workers. *The International Journal of Human Resource Management*, 25(19), 2724-2744.
- Brown, K. W., Ryan, R. M., & Creswell, J. D. (2007). Mindfulness: Theoretical foundations and evidence for its salutary effects. *Psychological Inquiry*, 18(4), 211-237.
- Browne, P. (2012). *An investigation of nurse's work-life balance in public sector hospitals in Ireland*. The 11th World Congress of the International Federation of Scholarly Associations of Management.
- Bruck, C. S., & Allen, T. D. (2003). The relationship between big five personality traits, negative affectivity, type A behavior, and work-family conflict. *Journal of Vocational Behavior*, 63(3), 457-472.
- Bryman. (2008). *Social research methods* (5<sup>th</sup> ed.). United Kingdom, Oxford University Press.
- Burch, G. S. J., & Anderson, N. (2008). Personality as a predictor of work-related behavior and performance: Recent advances and directions for

- future research. In G. P. Hodgkinson & J. K. Ford (Eds.), *International Review of Industrial and Organizational Psychology*, 23, 261-270
- Burke, R. (2000). Do managerial men benefit from organizational values supporting work-personal life balance? *Women in Management Review*.
- Burke, R. J., Koyuncu, M., & Fiksenbaum, L. (2008). Work experiences, satisfactions and psychological well-being of female and male managers in the hospitality sector in Turkey. *Equal Opportunities International*.
- Burton, J., & World Health Organization. (2010). *WHO Healthy workplace framework and model: Background and supporting literature and practices*. World Health Organization.
- Carlson, D. S., Kacmar, K. M., Wayne, J. H., & Grzywacz, J. G. (2006). Measuring the positive side of the work-family interface: Development and validation of a work-family enrichment scale. *Journal of vocational behavior*, 68(1), 131-164.
- Casper, W. J., Eby, L. T., Bordeaux, C., Lockwood, A., & Lambert, D. (2007). A review of research methods in IO/OB work-family research. *Journal of Applied Psychology*, 92(1), 28.
- Cattell, H. E. P., & Mead, A. D. (2008). *The Sixteen Personality Factor Questionnaire (16PF)*. In G. J. Boyle, G. Matthews, & D. H. Saklofske (Eds.), *The SAGE handbook of personality theory and assessment, Vol. 2. Personality measurement and testing* (p. 135–159). Sage Publications, Inc.

- Chavez, L. R., Campos, B., Corona, K., Sanchez, D., & Ruiz, C. B. (2019). Words hurt: Political rhetoric, emotions/affect, and psychological well-being among Mexican-origin youth. *Social Science & Medicine*, 228, 240-251.
- Clarck, S. (2000). Work/family border theory: A new theory of work/family balance. *Human Relations*, 53(6), 747-770.
- Clark, S., & Farmer, P. M. K. (1998). Living in two different worlds: Measuring cultural and value differences between work and home, and their effect on border-crossing.
- Clarke, M. C., Koch, L. C., & Hill, E. J. (2004). The work-family interface: differentiating balance and fit. *Family and Consumer Sciences Research Journal*, 33(2), 121-140.
- Clarke, P. J., Marshall, V. W., Ryff, C. D., & Wheaton, B. (2001). Measuring psychological well-being in the Canadian study of health and aging. *International Psychogeriatrics*, 13(S1), 79-90.
- Clarke, V., & Kitzinger, C. (2004). Lesbian and gay parents on talk shows: resistance or collusion in heterosexism? *Qualitative Research in Psychology*, 1(3), 195-217.
- Cohen, S., Kamarck T., & Mermelstein R. (1983) A global measure of perceived stress. *Journal of Health and Social Behavior*, 24, 385–396.
- Cohen, P. A., & Benson, B. A. (1988). Workload and student course ratings in dental school. *Journal of Dental Education*, 52(2), 98-101.
- Cohen, S. (1988). *The chemical brain: The neurochemistry of addictive disorders*. Compcare Publications.

- Conway, C., & MacLeod, A. (2002). Well-being: Its importance in clinical practice. *Clinical Psychology, 16*, 26–29.
- Cooper, G. (1990). Cognitive load theory as an aid for instructional design. *Australasian Journal of Educational Technology, 6*(2).
- Creswell, J. W., & Creswell, J. D. (2017). *Research design: Qualitative, quantitative, and mixed methods approaches*. Sage Publications
- Darko-Asumadu, D. A., Sika-Bright, S., & Osei-Tutu, B. (2018). The influence of work-life balance on employees' commitment among bankers in Accra, Ghana. *African Journal of Social Work, 8*(1), 47-55.
- Day, A., & Randell, K. D. (2014). *Building a foundation for psychologically healthy workplaces and well-being*. SAGE.
- Di Domenico, S. I., & Fournier, M. A. (2014). Socioeconomic status, income inequality, and health complaints: A basic psychological needs perspective. *Social Indicators Research, 119*(3), 1679-1697.
- Diener, E., & Oishi, S. (2005). The nonobvious social psychology of happiness. *Psychological Inquiry, 16*(4), 162-167.
- Diener, E., Inglehart, R., & Tay, L. (2013). Theory and validity of life satisfaction scales. *Social Indicators Research, 112*(3), 497-527.
- Dijkstra, M. T., van Dierendonck, D., Evers, A., & De Dreu, C. K. (2005). Conflict and well-being at work: The moderating role of personality. *Journal of Managerial Psychology*.
- Dixon, J. R., Selvaraj, S., Yue, F., Kim, A., Li, Y., Shen, Y., & Ren, B. (2012). Topological domains in mammalian genomes identified by analysis of chromatin interactions. *Nature, 485*(7398), 376-380.

- Edward, K. L. (2005). Resilience: A protector from depression. *Journal of the American Psychiatric Nurses Association, 11*(4), 241-243.
- Edwards, J. R., & Rothbard, N. P. (2000). Mechanisms linking work and family: Clarifying the relationship between work and family constructs. *Academy Of Management Review, 25*(1), 178-199.
- Emmanuel, O. B., & Odusanya, O. (2015). Job satisfaction and psychological well-being among mental health nurses. *International Journal of Translation & Community Medicine, 3*(3), 64-70.
- Emslie, C., & Hunt, K. (2009). 'Live to work' or 'work to live'? A qualitative study of gender and work-life balance among men and women in mid-life. *Gender, Work & Organization, 16*(1), 151-172.
- Fava, G. A., & Ruini, C. (2003). Development and characteristics of a well-being enhancing psychotherapeutic strategy: Well-being therapy. *Journal of Behavior Therapy and Experimental Psychiatry, 34*(1), 45-63.
- Fine-Davis, M., Fagnani, J., Giovannini, D., Højgaard, L., & Clarke, H. (2004). *Fathers and Mothers: dilemmas of the work-life balance: A comparative study in four European countries* (Vol. 21). Springer Science & Business Media.
- Fine-Davis, M., McCarthy, M., Edge, G., & O'Dwyer, C. (2005). *Work-life balance and Social Inclusion in Ireland: Results of a nationwide survey*. Dublin, National Flexiwork Partnership (TCD, IBEC, ICTU, FAS, Age Action Ireland, Aware),
- Foster, K., Roche, M., Giandinoto, J. A., & Furness, T. (2020). Workplace stressors, psychological well-being, resilience, and caring behaviours of



- mental health nurses: A descriptive correlational study. *International Journal of Mental Health Nursing*, 29(1), 56-68.
- Frone, M. R. (2003). Work-family balance. *Journal of Applied Psychology*, 85, 888-895.
- Frone, M. R., Russell, M., & Cooper, M. L. (1992). Prevalence of work-family conflict: Are work and family boundaries asymmetrically permeable? *Journal of Organizational Behavior*, 13(7), 723-729.
- Ganu, D., & Kogutu, C. N. (2014). Effect of the big five personality traits on job satisfaction and organizational commitment in the healthcare industry: The case of Kenya. *American Journal of Health Sciences (AJHS)*, 5(2), 145-154.
- Gobena, L. B., & Van Dijke, M. (2016). Power, justice, and trust: A moderated mediation analysis of tax compliance among Ethiopian business owners. *Journal of Economic Psychology*, 52, 24-37.
- Godwin, A., Suuk, L. A., & Selorm, F. H. (2016). Occupational stress and its management among nurses at St. Dominic Hospital, Akwatia, Ghana. *Health Science Journal*, 10(6), 1.
- Goldberg, L. R. (1992). The development of markers for the Big-Five factor structure. *Psychological assessment*, 4(1), 26.
- Grady, G., McCarthy, A., Darcy, C., & Kirrane, M. (2008). *Work life balance policies and initiatives in Irish organisations: A best practice management*. Cork, Oak Tree Press.
- Grant, S., Langan-Fox, J., & Anglim, J. (2009). The big five traits as predictors of subjective and psychological well-being. *Psychological Reports*, 105(1), 205-231.

- Greenhaus, J. H., & Beutell, N. J. (1985). Sources of conflict between work and family roles. *Academy of Management Review*, *10*(1), 76-88.
- Greenhaus, J. H., & Parasuraman, S. (1999). Research on work, family, and gender: Current status and future directions.
- Greenhaus, J. H., & Powell, G. N. (2006). When work and family are allies: A theory of work-family enrichment. *Academy of Management Review*, *31*(1), 72-92.
- Greenhaus, J. H., Collins, K. M., & Shaw, J. D. (2003). The relation between work-family balance and quality of life. *Journal of Vocational Behavior*, *63*(3), 510-531.
- Grossi, E., Groth, N., Mosconi, P., Cerutti, R., Pace, F., Compare, A., & Apolone, G. (2006). Development and validation of the short version of the Psychological General Well-Being Index (PGWB-S). *Health and Quality of Life Outcomes*, *4*(1), 1-8.
- Grzywacz, J. G., & Bass, B. L. (2003). Work, family, and mental health: Testing different models of work-family fit. *Journal of Marriage and Family*, *65*(1), 248-261.
- Grzywacz, J. G., & Carlson, D. S. (2007). Conceptualizing work-family balance: Implications for practice and research. *Advances in Developing Human Resources*, *9*(4), 455-471.
- Grzywacz, J. G., & Marks, N. F. (2000). Reconceptualizing the work-family interface: an ecological perspective on the correlates of positive and negative spillover between work and family. *Journal of Occupational Health Psychology*, *5*(1), 111-26.

- Grzywacz, J. G., Almeida, D. M., & McDonald, D. A. (2002). Work–family spillover and daily reports of work and family stress in the adult labor force. *Family Relations*, *51*(1), 28-36.
- Guion, R. M., & Gottier, R. F. (1965). Validity of personality measures in personnel selection. *Personnel psychology*, *2*(3) 25-34.
- Guthrie, J. P., Coate, C. J., & Schwoerer, C. E. (1998). Career management strategies: the role of personality. *Journal of Managerial Psychology*, *31*(4), 40-56.
- Halbesleben, J. R., Harvey, J., & Bolino, M. C. (2009). Too engaged? A conservation of resources view of the relationship between work engagement and work interference with family. *Journal of Applied Psychology*, *94*(6), 1452.
- Hallberg, L. M., Ringdahl, A., Holmes, A., & Carver, C. (2005). Psychological general well-being (quality of life) in patients with cochlear implants: Importance of social environment and age: Bienestar psicológico general (calidad de vida) en pacientes con implantes cocleares: importancia del ambiente social y de la edad. *International Journal of Audiology*, *44*(12), 706-711.
- Hammer, L. B., Kossek, E. E., Yragui, N. L., Bodner, T. E., & Hanson, G. C. (2009). Development and validation of a multidimensional measure of family supportive supervisor behaviors (FSSB). *Journal of Management*, *35*(4), 837-856.
- Hanson, G. C., Hammer, L. B., & Colton, C. L. (2006). Development and validation of a multidimensional scale of perceived work-family

positive spillover. *Journal of Occupational Health Psychology*, 11(3), 249.

Harnois, G., Gabriel, P., & World Health Organization. (2000). *Mental health and work: Impact, issues and good practices*. World Health Organization.

Hayes, A. F. (2013). Introduction to mediation, moderation, and conditional process analysis: Methodology in the Social Sciences. *Kindle Edition*, 193.

Heinström, J. (2014). The emotional valence of information experience: relation to personality and approach to studying. *Information experience: approaches to theory and practice*, 9, 275-293.

Hertzog, M. A. (2008). Considerations in determining sample size for pilot studies. *Research in nursing and health*, 31(2), 180-191.

Hill, E. J. (2005). Work-family facilitation and conflict, working fathers and mothers, work-family stressors and support. *Journal of Family Issues*, 26, 793-819.

Hilliard, R. E. (2007). The effects of Orff-based music therapy and social work groups on childhood grief symptoms and behaviors. *Journal of Music Therapy*, 44(2), 123-138.

Hochschild, A. R. (1997). *The time bind: When home becomes work and work becomes home*. New York: Henry Holt and Co.

Howard, P. J., & Howard, J. M. (1995). *The Big Five Quickstart: An introduction to the five-factor model of personality for human resource professionals*. Pearson Education.

- Huppert, F. A., & So, T. T. (2013). Flourishing across Europe: Application of a new conceptual framework for defining well-being. *Social indicators research, 110*(3), 837-861.
- John, O. P., & Srivastava, S. (1999). The Big Five trait taxonomy: History, measurement, and theoretical perspectives. *Handbook of personality: Theory and research, 2*(1999), 102-138.
- Jones, N., Hill, C., & Henn, C. (2015). Personality and job satisfaction: Their role in work-related psychological well-being. *Journal of Psychology in Africa, 25*(4), 297-304.
- Judge, T. A., Higgins, C. A., Thoresen, C. J., & Barrick, M. R. (1999). The big five personality traits, general mental ability, and career success across the life span. *Personnel psychology, 52*(3), 621-652.
- Kalliath, T., & Brough, P. (2008). Work-life balance: A review of the meaning of the balance construct. *Journal of Management & Organization, 14*(3), 323-327.
- Kalliath, T., & Monroe, M. (2009, June). Work-life balance: A structural evaluation of its antecedents across five Anglo and Asian samples. In *8th Australian Industrial and Organizational Psychology Conference Sydney, Australia.*
- Keene, J. R., & Reynolds, J. R. (2005). The job costs of family demands: Gender differences in negative family-to-work spillover. *Journal of Family Issues, 26*(3), 275-299.
- Kirchmeyer, C. (1992). Perceptions of nonwork-to-work spillover: Challenging the common view of conflict-ridden domain relationships. *Basic and Applied Social Psychology, 13*(2), 231-249.

- Kostaman, T. (2015). *The role of communication on employees' psychological well-being* (Master's thesis).
- Kothari, C. R. (2004). *Research methodology: Methods and techniques*. New Delhi: New Age International.
- Koul, R. (1997). *Contextualized science? An Indian experience*. The Pennsylvania State University.
- Kristof, A. L. (1996). Person-organization fit: An integrative review of its conceptualizations, measurement, and implications. *Personnel psychology, 49*(1), 1-49.
- Kundnani, N., & Mehta, P. (2014). Role of personality traits in balancing work-life. *International Journal of Management Research and Reviews, 4*(7), 722.
- Larsen, R. J., Buss, D. M., Wismeijer, A., & Song, J. (2005). *Personality psychology: Domains of knowledge about human nature*. McGraw Hill Education.
- Leedy, P. D., & Ormrod, J. E. (2005). *Practical research*. Pearson Custom. Prentice Hall, Upper Saddle River, NJ.
- Makabe, S., Takagai, J., Asanuma, Y., Ohtomo, K., & Kimura, Y. (2014). Impact of work-life imbalance on job satisfaction and quality of life among hospital nurses in Japan. *Industrial health, 32*(2), 12-34.
- Malik, M. I., Saleem, F., & Ahmad, M. (2010). Work-life balance and job satisfaction among doctors in Pakistan. *South Asian Journal of Management, 17*(2), 112.

- Manor, U., & Desiana, P. M. (2018). Work-Life Balance, Motivation and Personality of MSE Owners on Firm Performance in Greater Jakarta. *Pertanika J. Soc. Sci. & Hum.*, 26(S), 127 – 138.
- Marczyk, G. D., & DeMatteo, D. D., & Festinger, D. (2005). *Essentials of research design and methodology*. Boston: Sage.
- McAdams, D. P. (1994). *The person: An introduction to personality psychology*. Harcourt Brace: Harcourt Brace College Publishers.
- McCarthy, M. I., Abecasis, G. R., Cardon, L. R., Goldstein, D. B., Little, J., Ioannidis, J. P., & Hirschhorn, J. N. (2008). Genome-wide association studies for complex traits: consensus, uncertainty and challenges. *Nature reviews genetics*, 9(5), 356-369.
- McCrae, R. R., & Costa, P. T. (2003). *Personality in adulthood: A five-factor theory perspective*. Guilford Press.
- McCrae, R. R., & John, O. P. (1992). An introduction to the five-factor model and its applications. *Journal of personality*, 60(2), 175-215.
- McDaid, D., Curran, C., & Knapp, M. (2005). Promoting mental well-being in the workplace: A European policy perspective. *International review of psychiatry*, 17(5), 365-373.
- Mennino, S. F., Rubin, B. A., & Brayfield, A. (2005). Home-to-job and job-to-home spillover: The impact of company policies and workplace culture. *The Sociological Quarterly*, 46(1), 107-135.
- Michel, J. S., Clark, M. A., & Jaramillo, D. (2011). The role of the Five Factor Model of personality in the perceptions of negative and positive forms of work–nonwork spillover: A meta-analytic review. *Journal of Vocational Behavior*, 79(1), 191-203.

- Mount, M. K., Barrick, M. R., Scullen, S. M., & Rounds, J. (2005). Higher-order dimensions of the big five personality traits and the big six vocational interest types. *Personnel psychology*, *58*(2), 447-478.
- Mulinge, E. E. S. (2017). Effects of work life balance on performance of nurses in Kenya: A case of the Kenyatta National Hospital. *International Journal of Novel Research in Humanity and Social Sciences*, *4*(5), 25-35.
- Munir, F., Nielsen, K., Garde, A. H., Albertsen, K., & Carneiro, I. G. (2012). Mediating the effects of work–life conflict between transformational leadership and health-care workers’ job satisfaction and psychological wellbeing. *Journal of Nursing Management*, *20*(4), 512-521.
- Musek, J. (2007). A general factor of personality: Evidence for the Big One in the five-factor model. *Journal of Research in Personality*, *41*(6), 1213-1233.
- Myers, D. G. (1992). *The pursuit of happiness: What makes a person happy-and why*. New York: William Morrow & Company.
- Naruse, T., Taguchi, A., Kuwahara, Y., Nagata, S., Watai, I., Murashima, S. (2012). Relationship between perceived time pressure during visits and burnout among home visiting nurses in Japan. *Japan Journal of Nursing Science*, *9*(2), 185-194.
- Netemeyer, R. G., Boles, J. S., & McMurrian, R. (1996). Development and validation of work–family conflict and family–work conflict scales. *Journal of Applied Psychology*, *81*(4), 400.
- O’Driscoll, M. P., Brough, P., Timms, C., & Sawang, S. (2010). Engagement with information and communication technology and psychological



well-being. In *New developments in theoretical and conceptual approaches to job stress*. Emerald Group Publishing Limited.

Oguz, A., 2013. Developing a Scale for Learner Autonomy Support. *Educational Sciences: Theory and Practice*, 13(4), 2187-2194.

Ogwuche, C. H., Ijiga, J., & Okwoli, E. K. J. (2003). *Work-Life balance and socio-economic status as predictors of psychological wellbeing among civil servants in Makurdi Metropolis*. (Unpublished thesis).

Okeke, O. J., & Okeke, C. P. (2018). Effect of gender on the psychological wellbeing of nurses in Enugu Metropolis. *International Journal of Academic Research in Psychology*, 5(11), 15-23.

Oktosatrio, S. (2018). Investigating the relationship between work-life-balance and motivation of the employees: Evidences from the Local Government of Jakarta. *International Journal of Academic Research in Business and Social Sciences*, 8(2).

Parkes, L. P., & Langford, P. H. (2008). Work-life balance or work-life alignment? A test of the importance of work-life balance for employee engagement and intention to stay in organisations. *Journal of Management & Organization*, 14(3), 267-284.

Pasay-an, E., Pangket, P., Nialla, J., & Laban, L. (2014). Work life balance among nurse educators towards quality life: A mixed method study. *International Journal of Sciences: Basic and Applied Research (IJSBAR)*, 18(1), 386-401.

Passer, M. W., & Smith, R. E. (2004). *Psychology: The science of mind and behavior*. New York: McGraw-Hill.

- Paton, D., Jackson, D., & Johnston, P. (2003). *Work attitudes and values*. New York: Sage.
- Patton, M. Q. (2002). Two decades of developments in qualitative inquiry: A personal, experiential perspective. *Qualitative social work, 1*(3), 261-283.
- Paulson, D., & Leuty, M. E. (2016). Dispositional coping, personality traits, and affective style relating to conflict between work and family domains. *Journal of Family and Economic Issues, 37*(4), 519-539.
- Payne, G., & Payne, J. (2004). *Key concepts in social research*. Sage.
- Pleck, J. H. (1977). The work-family role system. *Social problems, 24*(4), 417-427.
- Poelmans, S. A., Kalliath, T., & Brough, P. (2008). Achieving work-life balance: Current theoretical and practice issues. *Journal of Management & Organization, 14*(3), 227-238.
- Powell, G. N., & Greenhaus, J. H. (2010). Sex, gender, and the work-to-family interface: Exploring negative and positive interdependencies. *Academy of Management Journal, 53*(3), 513-534.
- Priyadharshini, R. A., & Wesley, R. J. (2014). Personality as a determinant of work-family conflict. *Journal of Industrial Engineering and Management (JIEM), 7*(5), 1037-1060.
- Quaicoe, N. (2018). *Essays on Taxation and Fiscal Policy*. Southern Illinois University at Carbondale.
- Quartey, S. M., & Awoyemi, M. O. (2002). *Research methodology in education*. Ghana: K “N: AB Ltd.

- Raja, M. K., Mahadevan, S., Rao, B. P. C., Behera, S. P., Jayakumar, T., & Raj, B. (2010). Influence of crack length on crack depth measurement by an alternating current potential drop technique. *Measurement Science and Technology*, *21*(10), 105702.
- Rantanen, J., Pulkkinen, L., & Kinnunen, U. (2005). The Big Five personality dimensions, work-family conflict, and psychological distress: A longitudinal view. *Journal of Individual Differences*, *26*(3), 155-166.
- Ratanasiripong, P., & Wang, C. C. D. (2011). Psychological well-being of Thai nursing students. *Nurse Education Today*, *31*(4), 412-416.
- Riley, E. D., Neilands, T. B., Moore, K., Cohen, J., Bangsberg, D. Havlir, D. (2012). Social, structural and behavioral determinants of overall health status in a cohort of homeless and unstably housed HIV-infected men. *PloS one*, *7*(4), e35207.
- Robins, R. W., Trzesniewski, K. H., Tracy, J. L., Gosling, S. D., & Potter, J. (2002). Global self-esteem across the life span. *Psychology and aging*, *17*(3), 423.
- Rothbard, N. P., & Dumas, T. L. (2006). Research perspectives: Managing the work-home interface. *Work-life balance: A psychological perspective*, 71-89.
- Rotondo, D. M., & Kincaid, J. F. (2008). Conflict, facilitation, and individual coping styles across the work and family domains. *Journal of Managerial Psychology*.
- Ryan, A. M., & Kossek, E. E. (2008). Work-life policy implementation: Breaking down or creating barriers to inclusiveness? *The University of*

*Michigan and in alliance with the Society of Human Resources Management, 47(2), 295-310.*

Ryan, R. (2020). *Job Satisfaction as a Function of the Five Factor Model of Personality in the Community Mental Health Center Environment of Northern Indiana* (Doctoral dissertation, Andrews University).

Ryan, R. M., & Deci, E. L. (2001). On happiness and human potentials: A review of research on hedonic and eudaimonic well-being. *Annual review of psychology, 52(1), 141-166.*

Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of personality and social psychology, 57(6), 1069.*

Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of personality and social psychology, 69(4), 719.*

Sarfo, J. O. (2019). *Influence of safety culture on quality-of-work-life of mental health workers in Ghana* (Doctoral dissertation, University of Cape Coast).

Saucier, G., & Goldberg, L. R. (1998). What is beyond the Big Five? *Journal of personality, 66, 495-524.*

Schutte, P. S., & Ryff, C. D. (1997). Personality and well-being: re-examining methods and meanings. *Journal of personality and social psychology, 73(3), 549.*

Seligman, M. E. (2002). Positive psychology, positive prevention, and positive therapy. *Handbook of positive psychology, 2(2002), 3-12.*

- Seligman, M. E. (2011). Flourish: a visionary new understanding of happiness and well-being. *Policy*, 27(3), 60-1.
- Seligman, M. E. P., & Csikszentmihalyi, M. (2000). Positive psychology [Special issue]. *American Psychologist*, 55(1), 5-14.
- Senge, P. M., Scharmer, C. O., Jaworski, J., & Flowers, B. S. (2005). *Presence: An exploration of profound change in people, organizations, and society*. Currency.
- Shivakumar, K., & Pujar, V. (2016). Work life balance in the health care sector. *Amity Journal of Healthcare Management*, 1(2), 45-54.
- Simard, M. (2012). *Employee's perceptions of work-life balance* (Master's thesis, University of Waterloo).
- Smith, S. D. (2008). The global workforce shortages and the migration of medical professions: the Australian policy response. *Australia and New Zealand Health Policy*, 5(1).
- Smoot, S. (2005). *The mediational role of coping in the relationship between personality and work-family conflict* (Doctoral dissertation).
- Soin, D. (2011). Stress, well-being and work/life balance among full-time and part-time working women. *Global Journal of Business Management*, 5(2), 9-15.
- Sparks, K., Cooper, C., Fried, Y., & Shirom, A. (1997). The effects of hours of work on health: A meta-analytic review. *Journal of occupational and organizational psychology*, 70(4), 391-408.
- Stoddard, M., & Madsen, S. R. (2007). Toward an understanding of the link between work-family enrichment and individual health. *Journal of Behavioral and Applied Management*, 9(1), 2-15.

- Strümpfer, D. J. W. (1995). The origins of health and strength: From 'salutogenesis' to 'fortigenesis'. *South African Journal of Psychology*, 25(2), 81-89.
- Suganthi, L. (2018). Multi expert and multi criteria evaluation of sectoral investments for sustainable development: An integrated fuzzy AHP, VIKOR/DEA methodology. *Sustainable cities and society*, 43, 144-156.
- Sun, J., Kaufman, S. B., & Smillie, L. D. (2018). Unique associations between big five personality aspects and multiple dimensions of well-being. *Journal of personality*, 86(2), 158-172.
- Taris, T. W. (2006). Bricks without clay: On urban myths in occupational health psychology. *Work & Stress*, 20(2), 99-104.
- Taris, T. W., Beckers, D. G., Verhoeven, L. C., Geurts, S. A., Kompier, M. A., & van der Linden, D. (2006). Recovery opportunities, work-home interference, and well-being among managers. *European Journal of Work and Organizational Psychology*, 15(2), 139-157.
- Tennant, G. P., & Sperry, L. (2003). Work-family balance: Counseling strategies to optimize health. *The Family Journal*, 11(4), 404-408.
- Tetrick, L. E., & Buffardi, L. C. (2006). *Measurement issues in research on the work-home interface*.
- Thevanes, N., & Mangaleswaran, T. (2018). Relationship between work life balance and job performance of employees. *IOSR Journal of Business and Management (IOSR-JBM)*, 20(5), 11-16.

- Turkyilmaz, A., Akman, G., Ozkan, C., & Pastuszak, Z. (2011). Empirical study of public sector employee loyalty and satisfaction. *Industrial Management & Data Systems*.
- Turpin-Quaye, C. (2018). *Exploring work-family life balance in two banks in Takoradi* (Doctoral dissertation).
- Van Den Berg, P. T., & Feij, J. A. (2003). Complex relationships among personality traits, job characteristics, and work behaviors. *International Journal of Selection and assessment*, 11(4), 326-339.
- Virick, M., Lilly, J. D., & Casper, W. J. (2007). Doing more with less: An analysis of work life balance among layoff survivors. *The Career Development International*, 12(5), 463–480.
- Voydanoff, P. (2001). Incorporating community into work and family research: A review of basic relationships. *Human Relations*, 54(12), 1609-1637.
- Wang, C., Bannuru, R., Ramel, J., Kupelnick, B., Scott, T., & Schmid, C. H. (2010). Tai Chi on psychological well-being: systematic review and meta-analysis. *BMC complementary and alternative medicine*, 10(1), 23.
- Wayne, J. H., Grzywacz, J. G., Carlson, D. S., & Kacmar, K. M. (2007). Work–family facilitation: A theoretical explanation and model of primary antecedents and consequences. *Human resource management review*, 17(1), 63-76.
- Wayne, J. H., Musisca, N., & Fleeson, W. (2004). Considering the role of personality in the work–family experience: Relationships of the big

five to work–family conflict and facilitation. *Journal of vocational behavior*, 64(1), 108-130.

Weinberg, R., & Gould, D. (2007). Psychological foundations in sport and exercise.

Weston, R., Gray, M., Qu, L., & Stanton, D. (2004). Long work hours and the wellbeing of fathers and their families. *Research paper*, (35).

Wilkinson, M. (2013). *Work life balance and psychological well-being in men and women* (Doctoral dissertation).

Wille, B., De Fruyt, F., & Feys, M. (2013). Big five traits and intrinsic success in the new career era: A 15-Year longitudinal study on employability and Work–Family conflict. *Applied Psychology*, 62(1), 124-156.

Witt, L. A., & Carlson, D. S. (2006). The work-family interface and job performance: Moderating effects of conscientiousness and perceived organizational support. *Journal of occupational health psychology*, 11(4), 343.

World Health Organization. (2001). *The World Health Report 2001: Mental health: new understanding, new hope*. World Health Organization.

World Health Organization. (2007). *International travel and health: Situation as on 1 January 2007*. World Health Organization.

Yang, J. W., Suh, C., Lee, C. K., & Son, B. C. (2018). The work–life balance and psychosocial well-being of South Korean workers. *Annals of occupational and environmental medicine*, 30(1), 1-7.

Yang, N. (2005). Individualism–collectivism and work-family interfaces: A Sino-US comparison. *Work and family: An international research perspective*, 3, 287-318.



Zhou, J., & George, J. M. (2001). When job dissatisfaction leads to creativity:  
Encouraging the expression of voice. *Academy of Management  
Journal*, 44(4), 682-696.



APPENDICES

APPENDIX A

UNIVERSITY OF CAPE COAST

COLLEGE OF EDUCATION STUDIES

DEPARTMENT OF EDUCATION AND PSYCHOLOGY

THESIS TOPIC

EFFECTS OF WORK-LIFE BALANCE ON THE PSYCHOLOGICAL

WELL-BEING OF MENTAL HEALTH NURSES: THE  
MODERATING ROLE OF PERSONALITY TRAITS

QUESTIONNAIRE

Dear Respondent,

This questionnaire aims to collect data that will help the researchers to find out the **effects of work-life balance on the psychological well-being of mental health nurses**. Which is a chosen area of study? The exercise is for academic purpose only. Whatever information you give will be kept confidential. The questionnaire measures your perception regarding the phenomenon under study. Instructions to fill out the questionnaire are given at the top of each section. Thank you very much for your cooperation.

Questionnaire Number: **NOBIS**..... Date:.....

**SECTION A**

**BACKGROUND DATA OF RESPONDENT**

Please Tick (√) or provide the appropriate response.

1. Gender
  - a. Male [ ]
  - b. Female [ ]
  
2. Age range
  - a. 20 – 25 [ ]
  - b. 26 -30 [ ]
  - c. 31 – 35 [ ]
  - d. 36 -40 [ ]
  
3. Psychiatric Hospital
  - a. Accra psychiatric hospital [ ]
  - b. Ankaful psychiatric hospital [ ]

**SECTION B: WORK-LIFE BALANCE**

For each of the statements, indicate by ticking (√) the extent to which you agree to them, use the following scale: strongly agree (SA), agree (A), disagree (D), strongly disagree (SD).

NS	Statements	SA	A	SD	D
4	I currently have the ability to manage the time I spend at work and the time I have available for non-work activities.				
5	I have difficulty managing my work and non-work activities.				
6	I feel that the balance between my work demands and non-work activities is currently about right.				
7	Overall, I believe that my work and non-work life are managed.				

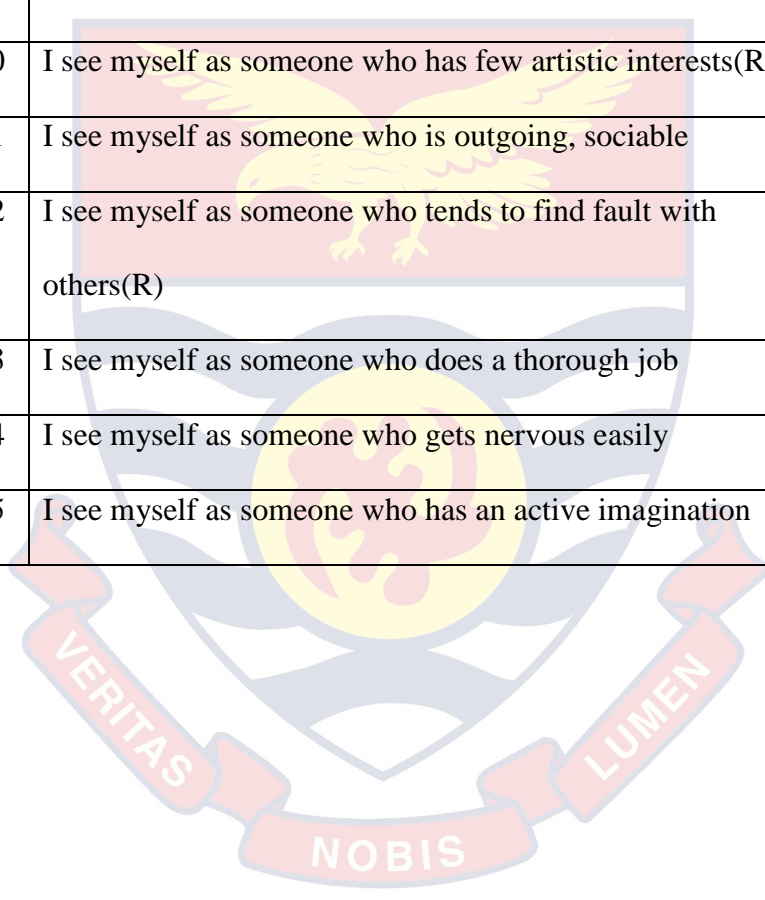
SECTION C: PSYCHOLOGICAL WELL-BEING

NS	Statements	SA	A	SD	D
	<b>AUTONOMY</b>				
8	I tend to be influenced by people with strong opinions.				
9	I judge myself by what I think is important, not by what others think.				
10	I have confidence in my own opinion, even if they are contrary to the general consensus.				
	<b>ENVIRONMENTAL MASTERY</b>				
11	The requirement of everyday life often gets me down.				
12	I am quite good at managing the responsibilities of my daily life.				
13	In general, I feel I am in charge of the situation in which I find myself.				
	<b>SELF ACCEPTANCE</b>				
14	In many ways I feel disappointed about my achievements in life.				
15	When I look at the story of my life, I am pleased with how things have occurred.				
16	I like most aspect of my personality.				
	<b>PERSONAL GROWTH</b>				
17	I think it is important to have new experiences that challenge how I think about life and world.				

18	I gave up trying to bring big improvement in my life a long time ago.				
19	For me, life has been a continuous process of learning, changing and growth.				
	PURPOSE IN LIFE				
20	Some people roam around aimlessly through life, but am not one of them.				
21	I live my life one day at a time and do not really think about the future				
22	I sometimes feel as if I have done all that is needed in life				
	PERSONAL RELATIONSHIP				
23	People would describe me as giving person, willing to share my time with others.				
24	I have not experienced warm and trusting relationship with others				
25	Maintaining close relationship has been difficult and frustrating				

SECTION D: PERSONALITY TRAITS

NS	Statements	SA	A	SD	D
26	I see myself as someone who is reserved				
27	I see myself as someone who is generally trusting				
28	I see myself as someone who tends to be lazy (R)				
29	I see myself as someone who is relaxed, handles stress well				
30	I see myself as someone who has few artistic interests(R)				
31	I see myself as someone who is outgoing, sociable				
32	I see myself as someone who tends to find fault with others(R)				
33	I see myself as someone who does a thorough job				
34	I see myself as someone who gets nervous easily				
35	I see myself as someone who has an active imagination				





APPENDIX C

INTRODUCTORY LETTER

**UNIVERSITY OF CAPE COAST**  
**COLLEGE OF EDUCATION STUDIES**  
**FACULTY OF EDUCATIONAL FOUNDATIONS**

**DEPARTMENT OF EDUCATION AND PSYCHOLOGY**

Telephone: 233-3321-32440/4 & 32480/3  
Direct: 033 20 91697  
Fax: 03321-30184  
Telex: 2552, UCC, GH.  
Telegram & Cables: University, Cape Coast  
Email: [edufound@ucc.edu.gh](mailto:edufound@ucc.edu.gh)



UNIVERSITY POST OFFICE  
CAPE COAST, GHANA  
15<sup>th</sup> October, 2019

Our Ref:

Your Ref:

**TO WHOM IT MAY CONCERN**

Dear Sir/Madam,

**THESIS WORK**  
**LETTER OF INTRODUCTION**  
**MS. MUMUNI RUBABATU**

We introduce to you Ms. Rubabatu, a student from the Department of Education and Psychology, University of Cape Coast. She is pursuing Master of Philosophy degree in Clinical Health Psychology and she is currently at the thesis stage.

Ms. Rubabatu is researching on the topic:

**"EFFECTS OF WORK-LIFE BALANCE ON THE PSYCHOLOGICAL-WELL-BEING OF MENTAL HEALTH NURSES: THE MODERATING ROLE OF PERSONALITY TRAITS."**

She has opted to gather/collect data at your institution/establishment for her thesis work. We would be most grateful if you could provide her the opportunity and assistance for the study.

Any information provided would be treated strictly as confidential. We sincerely appreciate your co-operation and assistance in this direction.

Thank you.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Theophilus A. Fiadzomor'.

Theophilus A. Fiadzomor  
*Principal Administrative Assistant*  
For: **HEAD**



APPENDIX D

APPROVAL OF ETHICAL REQUIREMENTS FOR STUDY PROTOCOL

**ANKAFUL PSYCHIATRIC HOSPITAL**

**OUR CORE VALUES**

Respect and Dignity  
Confidentiality  
Professionalism  
Compassion  
Equal Treatment  
Teamwork

In case of reply the number and the date of this letter should be quoted.

Our Ref. No. APH/ADM/197/339

Your Ref. No.....



POST OFFICE BOX 412  
CAPE COAST  
GHANA

Tel: +233 50 1490550  
+233 50 1490531

Web: [www.ankafulpsychiatrichospital.org](http://www.ankafulpsychiatrichospital.org)

Email: [info@ankafulpsychiatrichospital.org](mailto:info@ankafulpsychiatrichospital.org)

GPS Address: CK-0552-6233

8<sup>th</sup> July, 2020

Ms. Mumuni Rubabatu  
Department of Education and Psychology  
University of Cape Coast

**APPROVAL OF ETHICAL REQUIREMENTS FOR STUDY PROTOCOL**

The Ankaful Psychiatric Hospital Research Ethics Review Committee (RERC) has reviewed your request for the conduct of a research study on the topic:

***“EFFECTS OF WORK-LIFE BALANCE ON THE PSYCHOLOGICAL-WELL-BEING OF MENTAL HEALTH NURSES: THE MODERATING ROLE OF PERSONALITY TRAITS”***

Approval is hereby granted on the condition that you cannot interfere with the nurses' normal duties and therefore can access them before or after their shifts.

Also, no member of the hospital's administration shall be actively involved in your study beyond granting approval to contact the nurses and the provision of information.

It is in view of the above that approval is granted to proceed with your research work. This approval is valid for one year, starting 8<sup>th</sup> July 2020 to 7<sup>th</sup> July 2021 when it expires. In the event of the research lasting more than twelve (12) months, researcher(s) will be required to apply for a renewal.

The following conditions must be closely adhered to maintain the validity of the approval.

- Report of all adverse events related to this research to the RERC within 24hours verbally and three days in writing.
- Inform RERC if the study cannot be implemented or is discontinued and the why.
- Submission of a final report after completion of the study.

- Inform the RERC and your sponsor (where applicable) before any publication of the research findings.
- The researcher(s) shall not in any way make modification(s) to the study without prior approval from the RERC. Any such amendments will be considered invalid.

Thank you.



**DR. KWADWO MARFO OBENG**  
AnPH-RERC CHAIRPERSON

**Cc: All AnPH Research Ethics Review Committee (RERC) Members**

