



THE RELATIONSHIP BETWEEN QUALITY OF NURSING WORK LIFE AND WORK LIFE BALANCE OF NURSES

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ABSTRACT

Nurses are health workers who contribute the majority in determining the quality of health services in hospitals. Work life balance is a person's ability to balance the role at work and the role in the family that affects the level of satisfaction of the person. This will have an impact on the nursing services provided. Quality of Nursing work life (QNWL) is an effective way to increase someone's satisfaction in balancing the roles. The purpose of this research is to find out the relationship between QNWL and work life balance of nurses. This research is a quantitative research with a cross sectional approach. The number of respondents was 24 nurses. Sampling using the proportional stratified random sampling technique. The research instrument uses the work life balance and QNWL questionnaires that have been tested for validity and reliability by previous researchers. The correlation between the two variables was tested using the Kendall's Tau test. The characteristics of the respondents are known that most of the nurses are female as many as 16 people (67%), they are in the late adult age that is 36 - 45 years old as many as 9 people (38%), the educational level of Diploma III Nursing as many as 10 people (42%), the length of work >10 years as many as 11 people (46%). Quality of Nursing Work Life (QNWL) of the nurse respondents showed a good category of 21 people (87.5%). Work Life Balance (WLB) of the respondents showed a high category of 24 people (100%). There is no statistically significant relationship between Quality of Nursing Work Life (QNWL) and Work Life Balance (WLB) in this study at the 95% confidence level (p-value = 0.127). Although there is a tendency for a positive relationship, that is, when Work Life Balance increases, the Quality of Nursing Worklife can also increase, but this correlation is weak and not significant.

Keywords: nurse; quality of nursing work life; work life balance

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INTRODUCTION

Based on the Nursing and Midwifery Council (NMC) data, the number of nurses and midwives who have registered at NMC UK is 693,618 people as of September 2018. The number has increased by 3,880 (0.6%) since September 2017 (Martí, 2018). While in Indonesia the number of nurses based on BPPSDMK recapitulation data as of December 2016 found that the number of nurses reached 49% (296,876 people), followed by midwives 27% (163,451 people), and specialist doctors 8% (48,367 people) (Kementerian Kesehatan RI, 2017). The nursing profession is more dominated by women because the field of nursing is known as mother instinct or motherly instinct which provides protective instinct and social instinct (Wuryaningsing, 2019).

Based on Nursing and Midwifery Council (NMC) data, the number of nurses in the UK who have registered from 2013-2018 is as much as 89.3% of registrants are female nurses and 10.7% are male nurses (Martí, 2018). In Indonesia, the number of nurses registered in the membership report of the nursing profession organization PPNI, the number of registered nurses up to April 2017 was 359,339 people consisting of 29% (103,013 people) male nurses and 71% (256,326 people) female nurses (Ministry of Health RI, 2017). In addition, the total number of nurses working at RS PKU

Muhammadiyah Karanganyar is 149 nurses consisting of 30.2% (45 male nurses) and 69.8% (104 female nurses).

The data shows that the participation rate of highly educated women in work tends to increase, not only unmarried female workers but also married women and even have children (Ginanjar et al., 2020). If there is a married status, there will be a division of roles with the spouse and children, even housework tends to decrease (Hardani, 2016). Married women have heavier roles and responsibilities compared to single women (Setiawan, 2016). According to Ihromi (2013) increasing the role of women as workers and in fact they also play a role in the family, it can cause a problem from both roles (Parlagutan & Pratama, 2017). Female nurses have a very complex and important role in their lives, namely women as individuals, women as wives, and women as mothers (Maharani, 2019). Female nurses must divide their time and attention in their roles at work and their roles as housewives or family members. This situation sometimes makes it difficult for female nurses to balance time between work and family (Jamaluddin, et al, 2019).

The involvement of a woman in her role as a worker in an organization and her role as a wife, mother and household manager, is often a separate obstacle for women to meet the demands of work and the demands of the family, both of which are often conflicting (Setiawan, 2016). Work family balance is a person's ability to balance the role at work and the role in the family that affects the level of satisfaction of the person. The quality of the best service that is given the opportunity to develop poorly in nurses is influenced by the Quality of Nursing Work Life (QNWL) which is an important element in health services (Brooks and Clarke, 2010). The positive benefits of QNWL include a decrease in absenteeism, a decrease in outgoing and incoming labor turnover, and an increase in job satisfaction. Based on this, the researcher is interested in being able to compile a model of QNWL improvement in nurses at Hospital so that the job satisfaction of nurses increases through improving work family balance. Work family balance is a description of the nurse's job satisfaction, which is a form of the nurse's perception that is reflected in the attitude and is focused on the nurse's behavior towards their work. Nurses with a high level of job satisfaction have positive feelings about their work, while nurses who are not satisfied have negative feelings about the job, causing many problems in the hospital (Curtis, 2007).

A nurse who feels dissatisfied in doing his job will often be absent from work and this level of attendance can cause the workload of other nurses to increase. When the nurse's workload increases, the nurse's work results are not optimal (Kim & Stoner, 2008). Therefore, nurses' views and feelings towards their work must be maintained on the positive side so as not to cause various negative impacts in the hospital. Based on the description above, the researcher will conduct research on efforts to improve the quality of nursing worklife for nurses, ensuring a good work-family balance.

METHOD

This research is a type of quantitative research with a descriptive correlational research design that aims to see the relationship between one variable and another variable, the data of which is in the form of numbers as a measurement result or a convention result (Notoatmodjo, 2018). The approach in this research is cross sectional, which is research that emphasizes the time of data measurement of independent and dependent variables only one Certainly not all research subjects. Research was conducted on 24 nurses. The measurement tool used is the Work Life Balance (WLB) questionnaire with 24 questions and the WHOQOL BREE questionnaire, which is used to measure the Quality of Nursing Worklife (QNWL) with 26 questions. The validity test results for the instruments used in this study showed an r value in the range of 0.462–0.966. This value indicates that the questions in this research questionnaire are valid. The data analysis used is univariate in the form of frequency distribution to display age, gender, education level, length of work, quality of nursing work life and work life balance. To show the relationship between the two variables, using Kendall's Tau statistical test.

RESULT

Table 1 above, it can be seen that most of the respondents are women as many as 16 people with a percentage of 67% while men as many as 8 people with a percentage of 33%.

Table 1.

Frequency Distribution of Respondent Characteristics Based on Gender (n=24)

Characteristic	f	%
Female	8	33
Male	16	67

Table 2.

Frequency Distribution of Respondent Characteristics Based on Age (n=24)

Age	f	%
24 - 35 Years	8	33
36 - 45 Years	9	38
46 - 55 Years	6	25
56 - 67 Years	1	4

Table 2, it can be seen that most of the respondents are between the ages of 36 - 45 years old, that is 9 people (38%) are late adults. While the respondents with the age of 24-35 years (early adulthood) as many as 8 people (33%).

Table 3.

Frequency Distribution of Respondent Characteristics Based on Education Level (n=24)

Latest Education	f	%
Ners	8	33
Bachelor of Nursing	6	25
Diploma III of Nursing	10	42

Table 3, it can be seen that the majority of respondents' last education is Diploma III Nursing (D3 Nursing) as many as 10 people (52%), Nurses as many as 8 people (33%) and Bachelor of Nursing as many as 6 people (25%).

Table 4.

Frequency Distribution of Respondent Characteristics Based on Length of Work (n = 24)

Length of Work	f	%
< 6 years	6	25
6 -10 years	7	29
> 10 years	11	46

Table 4, it can be seen that 11 people (46%) have worked for more than 10 years. The average working time of nurses is 12 years.

Table 5.

Frequency Distribution of Quality of Nursing Worklife (QNWL) in Nurses (n=24)

Quality of Nursing Worklife	f	%
Good	21	87,5 %
Enough	3	12,5 %
Less	0	0%

Table 5, it can be seen that most of the respondents have Quality of Nursing Worklife (QNWL) with good category as many as 21 people (87.5%) and Quality of Nursing Worklife (QNWL) category as many as 3 people (12.5%).

Table 6.

Frequency Distribution of Work Life Balance for Nurses (n = 24)

Work Life Balance	f	%
High	24	100
Low	0	0

Table 6, it can be seen that all respondents have work life balance with a high category as many as 24 people (100%). Table 7 related to the results of the statistical test of the relationship between Quality of Nursing Work Life and Work Life Balance of Nurses at RSUD Simo using the Kendall's Tau test obtained Correlation Coefficient: The value of Kendall's tau-b correlation coefficient between Work Life Balance and Quality of Nursing Worklife is 0.231. This shows a weak positive correlation between the two variables. That is, there is a tendency that the better the Work Life

Balance, the better the Quality of Nursing Worklife, but this relationship is not too strong. Significance (Sig. 2-tailed): The significance value or p-value is 0.127. With a confidence level of 95% or $\alpha = 0.05$, this p-value is greater than 0.05, which means that this correlation is not statistically significant. This shows that we cannot conclude that there is a significant relationship between Work Life Balance and Quality of Nursing Worklife based on this data.

Table 7.

Relationship between Quality of Nursing Work Life and Work Life Balance of Nurses (n=24)

		Quality of Nursing Worklife	Wor Life Balance
Kendall's tau_b	Quality of Nursing Worklife	Correlation Coefficient	1,000
		Sig. (2-tailed)	,231
		N	,127
	Work Life Balance	Correlation Coefficient	24
		Sig. (2-tailed)	,231
		N	,127

DISCUSSION

Respondent characteristics based on gender

The phenomenon of Quality of Nursing Work Life (QNWL) or the quality of nurses' work lives is closely related to women, as the majority of the nursing workforce is female. The quality of nurses' work lives affects nurse well-being, job satisfaction, productivity, and retention. Several aspects that need to be considered in this relationship include workload, social support, career development opportunities, work-life balance, and physical and psychological working conditions. Female nurses often face high workloads, which can lead to stress and burnout. This excessive workload can negatively impact nurses' quality of work life and mental health. Support from colleagues, management, and family is crucial for the well-being of female nurses. Adequate social support can help reduce stress and increase job satisfaction. Opportunities to develop skills and careers are crucial for female nurses. Limited access to training and professional development can hinder career advancement and affect their quality of work life. Female nurses often face challenges in balancing work responsibilities and personal life, especially those with children or other family members. A good work-life balance is essential for optimal quality of work life.

Respondent Characteristics Based on Age

The relationship between nurses' quality of nursing work life (QNWL) and age has been the subject of significant research in the healthcare sector. This can be seen in work experience and comfort levels. Older nurses typically have more experience and often feel more comfortable in their roles than younger nurses. This experience can increase their job satisfaction and, indirectly, improve their QNWL. Stress and Workload: Younger nurses may feel more stressed and burdened by job demands due to their lack of experience. High stress and workload can lower their QNWL. Work-life balance: Older nurses often have greater family responsibilities, such as caring for children or the elderly. Challenges in balancing work and family responsibilities can impact their QNWL. Physical health: Age can affect nurses' physical health. Older nurses may face more physical health issues, which can impact their ability to work effectively and lower their QNWL. Finally, career development can also be affected. Younger nurses are typically more focused on career development and further education, which can enhance their QNWL by providing a sense of accomplishment and advancement.

Respondent Characteristics Based on Education

Education has a significant relationship with the quality of nursing worklife. Some of the main links are: Knowledge and Skills: Good education provides the knowledge and skills necessary to perform tasks efficiently and effectively. Better-trained nurses can handle clinical situations better, reducing stress and increasing job satisfaction. Career Development: Education provides opportunities for career development. Nurses with higher qualifications have greater opportunities for promotion and

greater responsibility, which can increase job satisfaction and motivation. Leadership and Management: Education in leadership and management helps nurses take on leadership roles, which can increase their sense of ownership and control over their work environment. Work-Life Balance: Education in time management and coping strategies can help nurses manage stress and achieve a balance between work and personal life, which contributes to a better quality of work life. Patient and Coworker Satisfaction: Better-educated nurses tend to provide better care, which increases patient and coworker satisfaction. This positive work environment can improve the quality of nursing work life.

Respondent Characteristics Based on Length of Work

Quality of Nursing Work Life (QNWL) is a concept that encompasses various aspects of a nurse's work environment that influence their well-being and performance. This phenomenon is particularly relevant to a nurse's tenure in several ways: experience and expertise. It is known that nurses with longer tenure typically have more experience and expertise, which can improve the quality of their work. Longer experience can also mean they are better able to cope with work pressure, thus increasing their QNWL. Job Satisfaction, meaning that a long tenure is often associated with a higher level of job satisfaction, because nurses may feel more stable in their careers and have better working relationships with coworkers and superiors.

Quality of Nursing Worklife (QNWL) in Nurses

The "good" category in the QNWL indicates that nurses feel a high level of well-being and are satisfied with various aspects of their work. The following are some explanations and phenomena related to QNWL category good seen from several factors, namely a supportive work environment such as Work Safety and Health: Nurses feel safe from the risk of accidents and work-related illnesses, Physical Conditions: Adequate facilities, such as clean workspaces and complete and well-maintained medical equipment, Work Life Balance: Policies and practices that support the balance between work and personal life, such as work schedule flexibility. Phenomena that Occur with QNWL in this Good Category include Performance Improvement: Nurses with good QNWL tend to show higher performance, including efficiency and effectiveness in their work, Decreased Turnover Level: High job satisfaction reduces the desire of nurses to change jobs, thus reducing the turnover rate, Better Quality of Care: Patients receive better care because nurses are more motivated and focus on service quality, Improved Nurse Well-being: Nurses feel happier and healthier, both physically and mentally, which has a positive impact on personal life and their professionals (Bahari et al, 2022). Phenomena that occur with this Good QNWL category include: Improved Performance: Nurses wi

Work Life Balance for Nurses

The phenomenon of work-life balance (work-life balance) in the high category among nurses is an issue that is getting more and more attention. Work-life balance refers to a person's ability to balance work demands with personal and family life. Some factors that affect the work-life balance of nurses with a high category include: Flexible Working Hours: Nurses who have a flexible work schedule or shifts that can be adjusted according to personal needs tend to have a better work-life balance. Moral and professional support from superiors and colleagues can help nurses feel more valued and less stressed, which contributes to a better work-life balance. Supporting Organizational Policies: Policies such as adequate sick leave, maternity leave, and employee welfare programs can greatly help nurses in managing the demands of work and personal life. which simplifies daily tasks can reduce the workload and provide more free time for nurses, Work Task Balance: A fair division of tasks and the absence of excessive workload can help nurses maintain a balance between work and personal life. A good work-life balance is important to maintain the mental and physical health of nurses, increase job satisfaction, and reduce the level of fatigue (burnout) that often occurs in this profession. Attention to this issue can help create a more productive and harmonious work environment, which will ultimately improve the quality of health services provided to patients.

Relationship between Quality of Nursing Work Life and Work Life Balance of Nurses

Nurses who have good work quality are more likely to have time and energy to participate in personal and family activities. They are also better able to manage work stress, which in turn improves their work-life balance. Positive Correlation: Research shows that when nurses have high QNW, they also report better levels of WLB. This means that an improvement in one aspect (for example, better working conditions) tends to be followed by an improvement in another aspect (for example, the balance between work and personal life). A person's performance can be influenced by individual factors, psychological factors and organizational factors (Nursalam, 2017). Nursing care documentation behavior of a nurse can be influenced by internal factors of the nurse herself. These internal factors can be caused by the nurse's attitude, habits or behavior during work. Any external factors that exist can be caused by the number of equipment/facilities, the comparison of nursing staff and patients, and the existence of supervision and guidance in the form of supervision (Wirawan, *et al*, 2013). The researcher believes that the high or low quality of nursing work life of nurses does not make the work life balance in implementing the performance of nurses to be less good. The quality of nursing work life is good and the work life balance is high because nurses realize that they have responsibility in their work as nurses which is used as evidence in the provision of nursing services and the existence of coaching and the conducibility of the work environment which affects the performance of nurses.

CONCLUSION

It is known that most of the nurses in RSUD Simo are female as many as 16 people (67%), they are in late adulthood, that is the age of 36 - 45 years as many as 9 people (38%), the level of education Diploma III Nursing as many as 10 people (42%), the length of work >10 years as many as 11 people (46%). Quality of Nursing Work Life (QNW) from nurse respondents showed a good category of 21 people (87.5%). Work Life Balance (WLB) of the respondents showed a high category of 24 people (100%). There is no statistically significant relationship between Quality of Nursing Work Life (QNW) and Work Life Balance (WLB) in this study at the 95% confidence level ($p\text{-value} = 0.127$). Although there is a positive relationship tendency, that is when Work Life Balance increases, the Quality of Nursing Work life can also increase, but this correlation is weak and not significant.

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