Work Family Conflict, Psychological Distress and Job Satisfaction among General Practitioners

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Abstract

Objective. The current investigations were designed to find out the relationship between work family conflicts, psychological distress and job satisfaction among general practitioners

Design. The co-relational research design was employed to assess the hypothesis of the current study.

Place and Duration of Study. This study was conducted Allied hospital Faisalabad. This study took 6 month for completion.

Methods. Survey method was use to collect data for current study. Work family conflict, psychological distress and job satisfaction scales were used to operationalize the work family conflict, psychological distress and job satisfaction

Result. The findings of the study showed that the work family conflict and psychological distress have negatively impact the job satisfaction among general practitioners.

Conclusion. The significant finding in this study is the work family conflict and psychological distress is negative co-relation with job satisfaction in general practitioner who makes up the sampling of the research. Job satisfaction has to do with the positive orientation of an individual towards his or her work. So, when someone is in distress or have any work family conflict than he she perceives his or her job as negatively that effect his job satisfaction.

Key words: work family conflict, psychological distress, job satisfaction

Introduction

Medical field has long been thought as one of the most pious and well fabled profession. In Pakistan too, many students aspires to become doctor since their infantile. (1) But sluggishly medical doctor contentment is threatened by many stressors, through which a physician undergoes during his/her job. According to Albiet and singler stresses at occupation contribute inestimably in diminution of fascination for these erstwhile most favorite careers.

Though there is a common discernment that presently physicians are inadequately satisfied with their works, so far official health professional's investigation over the theme is skimpy all over the sphere. Alike, phenomenon holds right for Pakistan where extreme psychological distress have made general practitioner more susceptible to devalued occupation contentment. In previous couple of decades, too much investigation has been done to appraise the occupation contentment among

different employees of medical field. (2) This matter is needed more concern, because satisfied practitioner is the fulcrum for the provision of health care. (3)

Because, it is conjoint ascertainment that general practitioner's job satisfaction is the fundamental part for providing effective care to patients. But nowadays, general practitioners are facing too many challenges by the interior and exterior environs while giving health-care services to the patients. (4) Moreover, general practitioners practice involves: to handle with numerous source of un-certainty, pooled with a very demanding environs, a blend of situations that seems to be rottenly related with work family conflicts, psychological distress and job satisfaction. Most of the challenges are explored by pervious researches that are work family conflict and psychological distress. So, present study will explore that how work-family conflict and psychological distress will affect the job satisfaction of general practitioner. Pervious researches on psychological distress on doctors showed that the substantial psychological distress have been found ranges from 26.8% to 51%. (5)

Conflict between work and family was weighed to be an imperative concern for a better outcome from work description. (6) In modern investigation, there has been a growing curiosity in the skirmish between domestic existence and work realms, and specific recent investigations acme the conflicts veteran by employees between their roles in the family land at works, which is roofed below the caption called work family conflict. It is pointed out that elongated working hours, duty and hefty work load have undeviating influence on work-family conflict.

(7) So due to many reasons doctors face precarious circumstances between their family life and work life, which frequently yield clash in both roles. (8) Conflict between and work and family life occurs for general practitioners when they perceive burdened from both family and work roles, then this role becomes reciprocally dissenting for them or when participation in one role is affected by the participation in other role. As we all are familiar that both family and work are the two most imperative segments of any individual. Three decades ago, family lives and work demands were taken as two different and autonomous regions. But modern investigations highlights that a mutual association between them exists. (4) In some pervious researches, social scientists investigated the occupation related approach in in domestic and work settings. The variable generally concentrated to investigate work related attitude included occupation fulfillment or job satisfaction. (7) It is a common observation that a satisfied specialist will be effective one and he/she will be happy in the settings if he is contented with his activity. (9) When particular preferences which are experience in a specific occupation are summarized and balanced they shape a state of mind about the job which is known as job satisfaction. Job contentment among general practitioner is important symbols in gauging the enactment and usefulness of health-care services. Thus it is vital to launch an efficacious balance between work and family domains so that several demands in both domains could be met efficiently and obligatory resource could be attained and used easily. (10) So, based on pervious researches researchers hypothesized following hypotheses:

- There is likely to have negative relationship between work-family conflict, psychological distress and job-satisfaction
- Work-family conflicts and psychological distress is likely to be a negative predict the job satisfaction

Method

Research Design: co-relational research design was employed to conduct the present study.

Sample

The convenient sample of the present study (N = 100) comprised of general practitioners of public and private sectors of Lahore, Pakistan.

Measures

Following developed scale with strong psychometrics properties were used to assess the construct of the study:

Work-Family Conflict. Work-to-family conflict was evaluated by scales created by Netemeyer, Boles and McMurrian (1996). (11) The work-to-family conflict scale comprises of 5 items. Utilizing a 7-point Likert scale, participants were requested to demonstrate to what degree they concur with each conflict item. Response extend from 1 (strongly disagree) to 7 (strongly agree). A sample item from the work-to-family conflict scale is: "The requests of my work interfere with my home and family life." Furthermore, in the directions, when gotten some information about family, participants were told to characterize family as the accompanying areas of family life that relate to them: being a parent, being a companion/accomplice, general home-life. In the past investigations, the internal or alpha reliability coefficient for the work-to-family conflict scale was .88. (11)

Psychological Distress Scale. Psychological distress was measured with K-6 non-specific distress scale. A summative 6- item scale, with responses to each item ranging from 0 specifying "no distress", to 4 specifying "distress all the time" yielded a range of scores between 0-24. (12)

Job Satisfaction: Job satisfaction, incorporating fulfillment with the activity itself, the workplace, work rewards, organizational management, and the medical practice condition. Satisfaction with the activity itself, the workplace, and employment rewards are each evaluated by two things. Satisfaction with organizational management and the medicinal practice condition are each assessed by one item. Each item incorporates a six-point Likert scale from 1 (strongly disagree) to 6 (strongly agree). The aggregate score of each measurement is the entirety of scores for all items. For each dimension, a higher score demonstrates a larger amount of job satisfaction. (13)

Procedure

The study was conducted at Allied Hospital Faisalabad. In order to collect the data, general practitioners were individually contacted and then they were briefed about the objective of the study. Before participation, their written informed consent was taken. They were ensured that their privacy and confidently will be maintained. Personal information as taken through self-constructed literature based demographic sheets. Afterwards, scales were given to take response. In the end, research participants were thanked for the valuable co-operation. All the participants were treated accordance with the APA code of ethics. The age of the participants was no more than 60. It was assured that participants have no any physical disabilities.

Collected data were entered in Statistical Procedure for Social Sciences (SPSS) 20th version to test the hypothesis. Firstly, frequencies of the filled data were checked and missing was treated in recode into same variable if missing values were not more than ten precent. Otherwise they were discarded from data. Secondly, we checked the assumptions of normality because all our proposed hypotheses will be checked through parametric tests. Here we have checked the symmetry of the data through skewness, kurtosis, *P-P* plots, *Q-Q* plots and histogram. The skewness, kurtosis, *P-P* plots, *Q-Q* plots and histogram revealed that data did violate the assumptions of normality. The reliability of assessment measures were checked. Then, we were move towards hypotheses' based analyses involving correlation and multiple regressions.

Results

Table 1

Descriptive and Psychometric Properties of Work Family Conflict, Psychological Distress and Job Satisfaction (N = 100)

Variables	*M*	*SD*	*α*	*Sk^a*
WFC	2.80	2.72	.87	3.70
PD	114.28	30.85	.83	-1.85
JS	3.53	2.32	.78	1.93

Note: WFC = Work Family Conflict; PD= Psychological Distress; JS = Job Satisfaction

Table 1 shows standard deviations (SD) and mean (M) of work-family conflict, psychological distress and job-satisfaction among general practitioners. This table also depicts the reliability index (alpha-coefficients) for work-family conflict, psychological distress and job-satisfaction. The results of internal consistency index showed that all scales of the current study were reliable as reliability co-efficient of all scales (work-family conflict, psychological distress and job-satisfaction) were above bench-mark i.e. .70. Although moderate high values of skewness doubted the symmetrical distribution of data. But p-p plots, q-q plots and histograms of scores on these variables did not suggest marked deviation from symmetry. Therefore, it was inferred that distribution of these variables approximate symmetrical

distribution, which justified the use of parametric tests.

Table 2

Pearson Correlation among Work Family Conflict, Psychological Distress and Job Satisfaction (N = 100)

Variables	1	2	3
1. WFC	-	.60[***]	-.27[***]
2. PD	-	-	-.35[***]
3. JS	-	-	-

Note: WFC = Work Family Conflict; PD= Psychological Distress; JS = Job Satisfaction
[***]$p < .001$.

Table 2 shows Pearson correlation among variables of the present study i.e. work family conflict, psychological distress and job satisfaction. Results showed work family conflict is significantly positively correlated with psychological distress, whereas significantly negatively correlated with job ratification. Furthermore, our findings showed that psychological distress is significantly negatively correlated with job ratification.

Table 3

Multiple Regression Analyses for Work Family Conflict, Psychological Distress and Job Satisfaction (N = 100).

Variables	β	ΔR^2
Step I		.005
Gender	-.07	
Age	.06	
Step II		.45[***]
WFC	-.27[***]	
PD	-.43[***]	
Total ΔR^2		.46

Note: WFC = Work Family Conflict; PD= Psychological Distress; JS = Job Satisfaction
[*]$p < .05$. [***]$p < .001$.

Findings revealed that overall model explained 46% of variance job satisfaction with $F_{(2, 94)} = 4.27$, $p<.001$ which revealed that following model job satisfaction significantly. When demographic factors i.e. age and gender in the step I as control variables, the model did not explain significant variance in job satisfaction.

When predictor variables work family conflict and psychological distress were added in Step II the model explained the 45% variance

with ΔF (4, 92) = 29.52, $p<.00$. In which work family conflict and psychological distress predicted negatively to job satisfaction which revealed that as work family conflict and psychological distress increase the level of job satisfaction decrease.

Discussion

The present study was intended to find out the association among work-family conflicts, psychological distress and job satisfaction among general practitioner. When the related literature is considered, research concerning work family conflict is observed to be made in various fields mainly in Western European countries and North America. (14) (15). So the current study has been made with general practitioner employed in national hospitals that that have overpowering work load, sporadic work routine and troublesome workplace.

Our findings elucidated that psychological distress work family conflict are important predictors of job satisfaction, all the proposed hypothesis of the current study were supported. The first hypothesis suggesting that work family conflict and psychological distress have negative relationship job satisfaction. The second hypothesis suggesting that work family conflict and psychological distress is negatively predictors of job satisfaction.

Collectivitism and individualism are social measurements that assist to understand the connection between family and work, influencing one's attitude and behavior in the direction of work will influence the work and family life with relevant to the social or cultural dimensions It is noticed that much lower levels

of family-work conflict is experienced about many individualistic societies on the planet contrasted with collectivist societies. (16) It isn't astounding that in Pakistani culture, being a collectivist society, similar discoveries were found: In collectivist culture, children live together with the family. All family members rely upon each other, each having the duty of supporting others both monetarily and emotional. In collectivist social orders, each family offers genuine support to each other in order to balance work-family conflicts. (15)

The significant finding in this study is the work family conflict is negative co-relation with job satisfaction general practitioner who makes up the sampling of the research, which is partially consistent with the previous studies in the literature related to health employees. (17) Our findings showed that psychological distress is negatively co-related with job satisfaction. Job satisfaction has to do with the positive orientation of an individual towards his or her work. So, when someone is in distress than he she perceive his or her job as negatively that effect his job satisfaction.

Conclusion

This investigations is basic as in it gives general data about the connection between work family conflicts, psychological distress and job satisfaction in a collectivist society.

In addition, the current study findings are expected to endow the pervious literature associated with work family conflicts, psychological distress and job satisfaction regarding general practitioners. This finding also suggests various inferences for the administrators

of medical institution, who have to concentrate on work family conflict and psychological distress in order to give the necessities to their employees.

Medical insinuations should be cognizant about the cost of work family conflict and psychological distress on them, and giving careful consideration to of work family conflict and psychological distress; they should try to decrease it. In view of the current findings of this study, medical field authorities, administrators and the legislature that regulate the police for hospitals can assess the results of augmented work-family conflict and psychological distress and absence of job satisfaction. Medical field employees, can know about the way that work-family conflicts, psychological distress that they encounter is effective on their absence of occupation satisfaction. In a nutshell, remedies can be created to keep away from the negative impacts on work.

Suggestions and Limitations

Some points must be considered during the generalizability of current findings, because self-reported measures were used in these explorations. As, perspectives of practitioner's mates have not been taken into consideration. Secondly, male practitioners were more in frequency as compared to female practitioners: males were more in practice than females. In additionally considers, it is beneficial to do a comparable report with a sample made up of equivalent number of females and males to examine the effect of gender orientation, as well.

It will be more significant in future studies to focus on the association between psychological distresses, work-family conflicts and job satisfaction with relevant to cultural context

By carrying out parallel studies specifically in culture with individualistic belief and camping the results with collectivistic culture would be contribute incredibly with the interrelated literature. Scholars in future studies, try to focus on cultural belief, norms and values while studying work-family conflict. These factors seemed to be more linked with family and work matters. It is likewise beneficial to focus on the relationship between the conflict and such as administrative citizenship behavior and organizational commitment.

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