# Work -Nonwork Boundary Management Preferences and Well - Being Among Nurses: Family-Supportive Supervisor Behavior as a Moderator

[1]Carlina Natalia, [2]Nur Fatihah Abdullah Bandar, [3]Rekaya Vincent Balang, [4]Zaiton Hassan, [5]Dayang Kartini Abang Ibrahim, [6]Rusli Ahamad, [7]Hana Hamidi

*Abstract--The issue of managing the balance between the context of work and life among nurses is an evident fact in Malaysia, which potentially was due to the job nature of nurses and one's own personal commitments. Boundary management is a method in which people use to address their work-life balance condition leading to better wellbeing. Furthermore, family supportive supervisor behavior pose to be a moderator in which helps to support nurses in successfully manging their boundaries. Deriving from the intention to obtain a more concrete finding on whether supportive supervisor behaviour can help nurses attain better boundary management, the aim of the study focuses on examining the moderating effect of family-supportive supervisor behavior on the relationship between work-nonwork boundary management preferences and well-being among nurses. Questionnaires were administered to registered nurses in a private hospital in Kuching, Sarawak with 67 responses collected and the data was being analysed using IBM SPSS 25. Results revealed there is no significant relationship between work-nonwork boundary preferences and well-being. Family-supportive supervisor behavior was positively related to well-being among nurses. The result revealed that family-supportive supervisor behavior moderates the relationship between work-nonwork boundary management preferences and well-being among nurses. Based on our findings, family-supportive supervision is a plausible boundary condition for the relationship between work-nonwork boundary preferences and well-being. This study suggests that, family-supportive supervision is a trainable resource that organizations should facilitate to improve employee well-being in healthcare settings.*

*Keywords--Work-nonwork boundary management preferences, Family-supportive supervisor behavior, Well-being, Nurses*

## I.INTRODUCTION

A total of 63.1% nurses in Malaysia experience poor work-life balance in their career. Work-life balance is described as a degree to which individual need to balance the responsibility between work and family demands. Individuals who are incapable to regulate their responsibilities between work and family are likely to experience work-life conflict. In the context of nurses, continuous conflict between family and work demand has expose them

[1]Senior Lecturer, Faculty of Cognitive Sciences and Human Development, University Malaysia Sarawak, 93400, Kota Samarahan, Sarawak, Malaysia
[2]Senior Lecturer, Faculty of Cognitive Sciences and Human Development, University Malaysia Sarawak, 93400, Kota Samarahan, Sarawak, Malaysia, Email: abnfatihah@unimas.my
[3]Lecturer, Faculty of Medicine and Health Sciences, University Malaysia Sarawak, 93400 Kota Samarahan, Sarawak, Malaysia
[4]Associate Professor, Faculty of Cognitive Sciences and Human Development, University Malaysia Sarawak, 93400, Kota Samarahan, Sarawak, Malaysia
[5]Lecturer, Faculty of Cognitive Sciences and Human Development, University Malaysia Sarawak, 93400, Kota Samarahan, Sarawak, Malaysia
[6]Professor, Faculty of Cognitive Sciences and Human Development, University Malaysia Sarawak, 93400, Kota Samarahan, Sarawak, Malaysia
[7]Lecturer, Faculty of Cognitive Sciences and Human Development, University Malaysia Sarawak, 93400, Kota Samarahan, Sarawak, Malaysia

to problems such as burnout and work stress.

As managing work and family domain has become increasingly a compelling and pressing issues, Clark introduced work/family border theory which explains how individuals manage and negotiate the work and family spheres by setting up borders between them in order to attain balance. A study conducted by Mellner et al. found that managing boundaries between work and family life was able to help individual experience good work-life balance. These boundaries can be analysed along a continuum ranging from integration to segmentation. Segmentation is a degree where work and family matters are physically, emotionally and psychologically separate by the individuals, meanwhile integration is a situation where the individuals merge both work and family matters at the same time.

In the context of nurses, a study by Othman and Nasurdin has revealed that supervisory support is a relevant factor of work engagement among nurses in public hospital within Malaysia. Therefore, the aim of this study is to investigate how family-supportive supervisor behavior acts as a moderator on the relationship between work-nonwork boundary management preferences and well-being among nurses

## II. LITERATURE REVIEW

### Work-Nonwork Boundary Management Preferences and Well-Being

Work-nonwork boundary management preferences is an approach utilised by individuals to limit the barrier between work and family. It focuses on how individuals decide to split their time, behavior and emotion in managing work and family domains. Work-nonwork boundary management preferences practices regardless of whether it is segmentation or integration enable to support individuals whom were eager to seek for work-life balance in their life and the experience well-being.

### Family-Supportive Supervisor as a Moderator

In addition to the practice of family-friendly policy, the use of informal support which is more flexible and accessible is a way which enable to enhance individuals' well-being. A study by Matthews et al. found that family-supportive supervisor behavior positively influenced individuals subjective well-being. Similarly, Achour et al. indicated that supervisory support is directly related to well-being. The study proves that management and supervisory support that meet individuals need will affect their subjective well-being (Figure 1).

The following hypotheses have been developed:

Ha1. There is a positive relationship between work-nonwork boundary management preferences (segmentation) and well-being among nurses.

Ha2. There is a positive relationship between work-nonwork boundary management preferences (integration) and well-being among nurses.

Ha3. There is a positive relationship between family-supportive supervisor behavior and well-being among nurses.

Ha4. Family-supportive supervisor behavior will moderate the relationship between work-nonwork boundary management preferences and well-being among nurses.
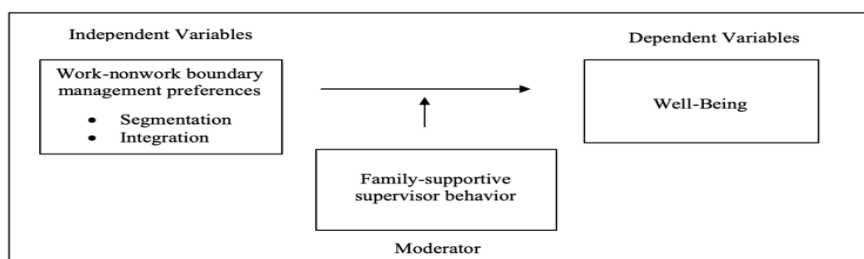
**Figure 1. Hypotheses Model**

## III. MATERIALS

### Participants and Procedure

This study was conducted among registered nurses in a private hospital at Kuching, Sarawak. Questionnaires were distributed among registered nurses within a selected private hospital in Kuching, Sarawak. A total of 67 completed questionnaires were returned. Majority of the respondents were of age of less than 30 years and 97.0% of them were female. About 50.7% were single with 44.8% who has total employment experience less than 5 years.

The first part of the questionnaire focuses on demographic variables (e.g., age, gender, total employment experience). Work-nonwork boundary management was assessed using 30-items based on qualitative studies on boundary management by Wepfer et al. and Ammon which has been modified. The questionnaires were divided into two parts into segmentation and integration accordingly.

Family-supportive supervisor behavior was assessed using 13-items out of 18-items of multidimensional measure of family-supportive supervisor behavior by Hammer. The items represents each of the four dimension specifically: emotional support, instrumental support, role modelling behavior and creative work-family management

The overall perception of well-being was measured using three major components of well-being which includes job satisfaction, family satisfaction and life satisfaction. Job satisfaction was measured using five-items out of ten-items develop by Macdonald and MacIntyre. Meanwhile, family satisfaction was measured using five-items out of ten-items developed by Olson. Lastly, life satisfaction was measured using five-items adopted from Diener.

### Data Analysis

Data were analysed using IBM Statistical Package for Social Sciences (SPSS) 25. Correlation analysis was conducted to test the Ha1, Ha2 and Ha3, meanwhile Ha4, the moderation effect of family-supportive supervisor behavior on the relationship between work-nonwork boundary management preferences and well-being among nurses were tested using Hierarchical Multiple Regression.

## IV. RESULTS

As shown in Table 1, work-non work boundary management preferences (segmentation) was not signifcant and negatively related ($r$ = -.025, $p$>.05) with well-being. Work-nonwork boundary management preferences (integration) also found was not significant and positively related ($r$ = .221, $p$ > 0.05) to well-being among nurses. However, family-supportive supervisor behaviour was significant and positively related ($r$ = .453, $p$ < 0.05) with well-being among nurses.

To test the moderating effects of family-supportive supervisor on the relationship between work-nonwork boundary management preferences and well-being among nurses, a hierarchical regression analysis was conducted in this study as shown in Table 2. The first step, two variables were included which is work-nonwork boundary management preferences and family-supportive supervisor behavior. These two variables were found to have a significant amount of variance in well-being among nurses, $R^2$ = .240, $F$ (2,64) = 10.107, $p$=.000 < 0.05. In second step, the interaction term between work-nonwork boundary management preferences and family-supportive supervisor behavior were included. The interactions terms obtained by multiplying the moderating variables (family-supportive supervisor behavior) and predictor variables (work-nonwork boundary management preferences) were added to the regression model, and it was found that the predictor and moderator are significant with the interaction term added $R^2$ = .288, $F$ (1,63) = 4.275, $p$=.043 < 0.05. Results revealed that family-supportive supervisor behavior strengthens the relationship between work-nonwork boundary management preferences and well-being among nurses.

Thus, Ha4 is accepted. The results indicated that a family-supportive supervisor behavior moderate the relationship between work-nonwork boundary management preferences and well-being among nurses.

**Table 1** Pearson Correlation Matrix

| | Sources | 1 | 2 | 3 | 4 |
|---|---|---|---|---|---|
| 1 | Work-nonwork boundary management preferences (Segmentation) | 1 | - | - | -.025 |
| 2 | Work-nonwork boundary management preferences (Integration) | - | 1 | - | .221 |
| 3 | Family-Supportive supervisor behaviour | - | - | 1 | .453 |
| 4 | Well-being | -.025 | .221 | .453 | 1 |

**Table 2** Result of Hierarchical Multiple Regression

| Model | R | R Square | R Square Change | Change Statistics | | | Sig. F Change |
|---|---|---|---|---|---|---|---|
| | | | | F Change | df1 | df2 | |
| 1 | .490[a] | .240 | .240 | 10.107 | 2 | 64 | .000 |
| 2 | .537[b] | .288 | .048 | 4.275 | 1 | 63 | .043 |

a. Predictors. (Constant), FSSB, BMP

b. Predictors. (Constant) FSSB, BMP, Interatction

Notes: FSSB = Family-suportive supervisor beahvior, BMP = work-nonwork boundary management preferences

## V. DISCUSSION

The study showed that there is no credible evidence that work-nonwork boundary management preferences affect well-being among nurses. It is interesting to note that the result revealed a non-significant trend in the predicted direction which mean researchers were unable to support that either segmentation or integration seem to be related to nurses' well-being. Nurses who applied the concept of segmentation were predicted to experience more well-being than other, however the finding of the study indicate that nurses' well-being is not affected by both work-nonwork boundary management preferences and it is assumed that it may be influence by any other factors.

In line with researcher prediction, the result of the study demonstrates that family-supportive supervisor behavior was positively related to well-being among nurses. Thus, family-friendly benefits such as family-supportive supervisor behavior is vital as nurses need emotionally and instrumental support in term of both family and work life to meet both domain demands.

The result revealed that family-supportive supervisor behavior moderates the relationship between work-nonwork boundary management preferences and well-being among nurses. The finding of current study was in line with previous research by Yragui as the study found that family-supportive supervisor as a moderator that predict individuals' well-being. Therefore, it is crucial to implement family-supportive supervisor behaviour as one of the informal organizational support towards nurses in healthcare industry to enhance their well-being.

## VI. CONCLUSION

The findings showed the effect of family-supportive supervisor behaviour on nurses' well-being. At the same time, family-supportive supervisor behaviour also moderate the relationship between work-nonwork boundary management preferences and well-being among nurses. This indicates that family-supportive supervisor behaviour is plays a particularly important role on nurses' well-being. This study suggests that, family-supportive supervision is a trainable resource that organizations should facilitate to improve employee well-being in healthcare settings.

**Conflict of interest:** Authors declared no conflict of interest

**Source of Funding:** Funding is self-sourced

**Ethical clearance:** Obtained ethical clearance from research committee

## REFERENCES

1. Nurumal MS, Makabe S, Che Jamaludin FI, Fahmi Mohd Yusof H, Aung KT, Kowitlawakul Y. Work-life balance among teaching hospital nurses in Malaysia. Glob J Health Sci [Internet]. 2017 Jul 10;9(9):81. Available from: http://www.ccsenet.org/journal/index.php/gjhs/article/view/66632
2. Syed J. Managing diversity and inclusion: An international perspective. London: Sage Publications Ltd; 2015. 291–314 p.
3. Balang RV. Concise literature review on burnout and work-stress among mental health nurses in Malaysia. Malaysian J Nurs. 2010;2(1):14–28. Available from: http://ejournal.lucp.net/index.php/mjn/article/view/627

4.  Clark SC. Work/family border theory: A new theory of work/family balance. Hum Relations [Internet]. 2000 Jun 22;53(6):747–70. Available from: http://journals.sagepub.com/doi/10.1177/0018726700536001

5.  Mellner C, Aronsson G, Kecklund G. Boundary management preferences, boundary control, and work-life balance among full-time employed professionals in knowledge-intensive,flexible work. Nord J Work Life Stud [Internet]. 2015 Jan 1;4(4):7. Available from: https://tidsskrift.dk/njwls/article/view/26623

6.  Ammons SK. Work-family boundary strategies: Stability and alignment between preferred and enacted boundaries. J Vocat Behav [Internet]. 2013 Feb;82(1):49–58. Available from: https://linkinghub.elsevier.com/retrieve/pii/S000187911200142X

7.  Othaman N, Nasurdin AM. Social support and work engagement: a study of Malaysian nurses. J Nurs Manag [Internet]. 2013 Nov;21(8):1083–90. Available from: http://doi.wiley.com/10.1111/j.1365-2834.2012.01448.x

8.  Kossek EE, Lautsch BA. Work–family boundary management styles in organizations. Organ Psychol Rev [Internet]. 2012 May 25;2(2):152–71. Available from: http://journals.sagepub.com/doi/10.1177/2041386611436264

9.  Kossek EE, Lautsch BA, Eaton SC. Telecommuting, control, and boundary management: Correlates of policy use and practice, job control, and work–family effectiveness. J Vocat Behav [Internet]. 2006 Apr;68(2):347–67. Available from: https://linkinghub.elsevier.com/retrieve/pii/S0001879105000898

10. Matthews RA, Mills MJ, Trout RC, English L. Family-supportive supervisor behaviors, work engagement, and subjective well-being: A contextually dependent mediated process. J Occup Health Psychol [Internet]. 2014;19(2):168–81. Available from: http://doi.apa.org/getdoi.cfm?doi=10.1037/a0036012

11. Achour M, Shahidra AK, Bahiyah A, Mohd RMN, Mohd YZMY. Management and supervisory support as a moderator of work–family demands and women's well-being. Humanomics [Internet]. 2017 Aug 14;33(3):335–56. Available from: http://www.emeraldinsight.com/doi/10.1108/H-02-2017-0024

12. Wepfer AG, Allen TD, Brauchli R, Jenny GJ, Bauer GF. Work-life boundaries and well-being: Does work-to-life integration impair well-being through lack of recovery? J Bus Psychol [Internet]. 2018 Dec 12;33(6):727–40. Available from: http://link.springer.com/10.1007/s10869-017-9520-y

13. Hammer LB, Kossek EE, Yragui NL, Bodner TE, Hanson GC. Development and validation of a multidimensional measure of Family Supportive Supervisor Behaviors (FSSB). J Manage [Internet]. 2009 Aug 22;35(4):837–56. Available from: http://journals.sagepub.com/doi/10.1177/0149206308328510

14. Macdonald S, MacIntyre P. The generic job satisfaction scale. Empl Assist Q [Internet]. 1997 May 30;13(2):1–16. Available from: http://www.tandfonline.com/doi/abs/10.1300/J022v13n02_01

15. Olson DH. Family satisfaction scale (FSS). Minneapolis: Life Innovations [Internet]. 2004. Available from: http://www.vfh.laviecounseling.org/wp-content/vfh/vfhasm/FACESIV.FamilySatisfactionScale.pdf

16. Diener E, Emmons RA, Larsen RJ, Griffin S. The satisfaction with life scale. J Pers Assess [Internet]. 1985 Feb 10;49(1):71–5. Available from: http://www.tandfonline.com/doi/abs/10.1207/s15327752jpa4901_13

17. Aamir A, Hamid ABA, Haider M, Akhtar CS. Work-life balance, job satisfaction and nurses retention: moderating role of work volition. Int J Bus Excell [Internet]. 2016;10(4):488. Available from: http://www.inderscience.com/link.php?id=79257

18. Yragui NL, Demsky CA, Hammer LB, Van Dyck S, Neradilek MB. Linking workplace aggression to employee well-being and work: The moderating role of Family-Supportive Supervisor Behaviors (FSSB). J Bus Psychol [Internet]. 2017 Apr 21;32(2):179–96. Available from: http://link.springer.com/10.1007/s10869-016-9443-z

19. Gidado, Abubakar, Korawinwich Boonpisuttinant, Suthamas Kanjanawongwanich, and . "Anti-cancer and Anti-Oxidative Activities of Nigerian Traditional Medicinal Plants/Recipes." Journal of Complementary Medicine Research 10 (2019), 200-211. doi:10.5455/jcmr.20190731050619

20. Arora, S., Atreya, A.R., Penumetsa, S.C., Hiser, W.L.Cardio-embolic stroke following remote blunt chest trauma(2013) Journal of Cardiovascular Disease Research, 4 (1), pp. 61-64. DOI: 10.1016/j.jcdr.2013.02.007