

RESEARCH ARTICLE

Predictors of work-life conflict in working women: A cross-sectional study

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ABSTRACT

Introduction: Work-life conflict has destructive effects on people's lives and the well-being of societies. Considering the greater vulnerability of women to work-life conflict, the present study aimed to explore the predictors of work-life conflict in working women in Birjand, a city in the east of Iran. **Methods:** The present cross-sectional descriptive-analytical was conducted in 2022. The research population were women working at the University of Medical Sciences and Birjand University, evaluated using a two-part questionnaire (demographic, work-family conflict, Carlson). A cluster sampling method was used to select a representative sample from the research population. Besides descriptive statistics, a logistic regression model was used to measure the odds of work-life conflict among working women based on predictive variables. **Results:** The data analysis showed that participants with and without conflict significantly differed in terms of employment type, income, presence of a person needing care at home, physical health, marital status, level of education, type of university, and spouse's job ($p < 0.05$). The odds of work-life conflicts were higher in participants who had someone needing care at home (OR: 4.08) than those who had none. The odds of conflict were also higher among the married (OR = 2.57) than the single, and among those holding a diploma (OR: 0.320) and associate degree (OR: 0.406) than those with a bachelor's degree or higher. Moreover, the odds of work-life conflict were higher in participants whose spouses were self-employed (OR: 3.356). **Discussion:** Considering the important role of women in

ARTICLE INFO

Received: 24 July 2023 | Accepted: 29 August 2023 | Available online: 30 January 2024

CITATION

Rahimi SF, Hosseini Z, Salmani F, et al. Predictors of work-life conflict in working women: A cross-sectional study. *Environment and Social Psychology* 2024; 9(5): 1943. doi: 10.54517/esp.v9i5.1943

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family and society, it is necessary to take effective steps at the individual, familial and organizational levels to minimize the conflict between work and life. Knowing the changeable and controllable factors and carrying out appropriate educational interventions can be helpful. **Take-home message:** Sometimes the causes of some events in life cannot be changed, but they can be managed. The issue of conflict between work and life is the same for women. Such research provides the basis for future research to teach people resilience and manage situations with effective interventions.

Keywords: work-life balance; women; job satisfaction; work-life conflict; family conflict

1. Introduction

In recent years, researchers' attention has shifted from work-family balance to work-life balance. This concept implies that in addition to the family, there are other activities in life that must be balanced to go with one's job. Examples are: studies, sports, volunteer work, hobbies or caring for the elderly and the presence of other people in need of care^[1]. Under these circumstances, striking a balance between work and daily life is a big challenge for employees^[2]. In the meantime, according to the theory of gender roles, considering that even when women work outside the home, the traditional duties of housekeeping and taking care of family members are considered a norm for them, they are more exposed to work and life conflict^[3-5]. By definition, work-life conflict occurs when the pressures of one role make it difficult to conform to the demands of another role^[1].

Work-life conflict can have adverse effects on the family and workplace and can endanger the well-being of societies in general^[3,6]. For example, employees who have a conflict between work and life have less productivity and commitment and have more chances of absenteeism or leaving the organization^[1,6]. Or the conflict between work and life may cause bad mood and misbehavior with spouse and children, the inadequate and inappropriate performance of parental and marital duties, and can ultimately decrease life satisfaction and quality^[6-9]. Approaching the complications of work-life conflict in the individual dimension shows that people who experience conflict between work and life suffer significantly from a decrease in mental well-being and physical health^[1,4,10,11].

According to the existing literature, there are many factors that cause work and life conflict in working women, such as: job position, length of working hours per week, job insecurity and fear of providing a job, education level, age, marriage, having children, the number of children (especially under 6 years old) at home, presence of people and the number of people who should be taken care of at home^[1,3,4,12,13]. However, it seems that the level of work and life conflict in women varies according to different national or regional cultures in different societies, cultural and organizational conditions, as well as women's attitude towards their jobs^[7,14].

If working women can reduce their work-life conflict and strike a proper balance between work and other roles in their lives, they will achieve a healthier and happier life with more success^[6]. Similarly, the role of relevant organizations is crucial to the identification of factors that cause work-life conflict in working women and the adoption of appropriate interventions to resolve the conflict^[15].

Considering the importance of women's role in family and society and the role of cultural and organizational differences in bringing work and life conflict^[7,15], it is essential to unravel the factors affecting the work-life conflict in different societies and organizations. Therefore, the current study aimed to answer questions such as "what are the differences in demographic-social and economic characteristics of working women with and without conflict?" and "what is the effect of each of these features on creating conflict?"

2. Methods

Participants and setting: The research population consisted of working women in Birjand University of Medical Sciences and Birjand University. Birjand is the capital city of South Khorasan province in eastern Iran

and bordering Afghanistan.

Procedure: The present descriptive-analytical study followed a mixed-method approach to research. This cross-sectional study was conducted between early September and late December 2022 at Birjand University of Medical Sciences and Birjand University. The sample size was determined considering a type I error of 0.05, a test power of 80% and an absolute error of 0.065. Based on the study of Taghizadeh et al., a conflict ratio of 78% was reported in Iranian women^[16].

$$n = \frac{\left(z_{1-\frac{\alpha}{2}} + z_{1-\beta}\right)^2 p(1-p)}{d^2} = \frac{(1.96 + 0.84)^2 0.78(1 - 0.78)}{0.065^2} \approx 319$$

The cluster sampling method was used according to the size of the research population. Different departments of each university were considered as a cluster and each university was divided into 12 clusters. That means a total number of 24 clusters, 20 clusters with 50 female employees each and 4 clusters with 150 female employees. From each cluster of 50, 11 subjects were randomly selected, and from each cluster of 150 subjects, 25 were randomly selected. Random sampling was used in each cluster based on the inclusion criteria.

The data collection instrument consisted of three sections: informed consent, demographic characteristics, and the standard work-life conflict questionnaire developed by Carlson et al.^[17]. There are 18 items in the questionnaire to be rated on a five-point Likert scale ranging from 1 (never) to 5 (always). A higher score indicates greater conflict between work and life. The maximum score that the participants can get is 90 (i.e., the maximum work-life conflict) and the minimum score is 18. The internal consistency of this questionnaire was estimated in the study by Nasrin Alavi et al. and Dargahi et al.^[18] The validity of the questionnaire was also measured through the method of translation and re-translation. All content of the questionnaire was translated into Persian according to Iranian culture and terms, and then another translator translated it again into English. After several stages of translation and re-translation, the Persian version of the instrument was provided to 5 psychology and health education experts and these people confirmed the content validity of the questionnaire.

Inclusion and exclusion criteria: Inclusion criteria were femininity, willingness to participate in the study and complete the questionnaire, at least one year of work experience. Also, the exclusion criteria were rotating shifts, unwillingness to continue completing the questionnaire, and failure to answer at least 30% of the questions in the questionnaire.

The questionnaires were completed in person. They were submitted to individuals who were eligible to enter the study and declared willingness to do so. Thus, they signed a written form of consent to take part in the study.

Data analysis: The data analysis was done in SPSS 27. First, the normality of data distribution was checked using the Kolmogorov-Smirnov test. The data were then analyzed using descriptive statistics such as percentage, mean and standard deviation. Also, a logistic regression analysis was used to estimate the odds of conflict among the participants based on the predictors.

3. Results

A total number of 320 questionnaires were distributed among eligible participants to enter the study. Among them, 316 questionnaires were completed and Based on the exit criteria of the study, and given that 4 participants did not answer at least 30% of the questionnaire content, they were removed from the study. The participants' average age was 38.2 + 8.03 years. 16.5% of the participants ($n = 52$) were single, 79.1% ($n = 250$) were married, and 4.4% ($n = 14$) were divorced or their spouses had died. A comparison of the frequency

of participants' education showed more than half of them (51.9%) held a bachelor's degree. The participants' average work experience was 11.39 + 7.90 years (see **Table 1**). The results showed that the average total conflict score was 43.25 + 11.25.

Table 1 shows the mean and standard deviation of the quantitative variables of study and **Table 2** shows the frequency and percentage of the qualitative variables.

Table 1. Participants' demographic information and quantitative variables.

Variable	Mean	Standard deviation
Age	38.12	2.10
Work experience	11.39	1.09
Work hours per week	43.18	2.11
Overtime work per week	3.68	0.07
Number of children	1.52	0.06
Years of marriage	13.40	1.99

Table 2. Participants' demographic information and qualitative variables.

Variable		Frequency	Percentage
Employment type	Permanent	169	52.8
	Permanent-conditional	42	13.1
	Permanent-short term	15	4.7
	Contractual	45	14.1
	Project-based	29	9.1
	Corporation-based	16	5
	Missing	4	1.3
Income	<5 million	18	5.6
	5–10 million	157	49.1
	>10 million	141	44.1
	Missing	4	1.3
Presence of someone needing care at home	Yes	144	45
	No	172	53.8
	Missing	4	1.3
Disease	Yes	24	7.5
	No	292	91.31
	Missing	4	1.3
Marital status	Single	52	16.3
	Married	250	78.1
	Other	14	4.4
	Missing	4	1.3
Level of education	Diploma	21	6.8
	Associate degree	41	12.8
	Bachelor's degree	166	51.9
	Master's degree or higher	88	27.2
	Missing	4	1.3

Table 2. (Continued).

Variable		Frequency	Percentage
Spouse's education	Diploma	43	13.4
	Associate degree	44	13.8
	Bachelor's degree	105	32.8
	Master's degree or higher	66	20.6
	Missing	4	1.3

Participants with and without conflict were significantly different in terms of employment type, income, presence of a person needing care at home, physical health, marital status, level of education, university type and spouse's job ($P < 0.05$) (See **Table 3**).

The results showed that the odds of work-life conflict were higher in women who had someone needing care at home (OR = 4.08 (CI95%: 2.51–6.66)). The odds of work-life conflict were also higher in the married than the single or others (OR = 2.57 CI95% (1.40–4.75)). Similarly, the odds of conflict were higher in those holding a diploma (OR = 0.320 (CI95%: 0.120–0.851)) and associate degree (OR = 0.406 (CI95%: 0.189–0.873)) than those holding a bachelor's degree or higher. The results showed that the odds of work-life conflict were higher in women whose spouses were self-employed (OR = 3.356 (95% CI: 1.239–9.087)) than others (see **Table 3**).

Table 3. Description of demographic variables in two groups with conflict and without conflict.

Variable		Conflict (yes)	Conflict (no)	<i>p</i> -value	OR (CI 95%)
		$\bar{x} \pm SD/n$ (%)	$\bar{x} \pm SD/n$ (%)		
No. of children		1.57 (0.98)	1.51 (1.18)	0.28	1.13 (0.90–1.42)
Years of marriage		12.36 (8.53)	15.10 (9.66)	0.23	0.85(0.74–0.97)
Employment type	Permanent	108 (58.1)	61 (46.9)	0.04	2.95 (1.02–8.514)
	Permanent-conditional	23 (12.4)	19 (14.6)	0.24	2.02 (0.62–6.57)
	Permanent-short term	10 (5.4)	5 (3.8)	0.11	3.33 (0.76–14.57)
	Contractual	19 (10.2)	26 (20)	0.742	1.22 (0.37–3.93)
	Project-based	20 (10.8)	9 (6.9)	0.04	3.704 (1.03–13.34)
	Corporation-based	6 (3.2)	10 (7.7)	-	-
Income	<5 million	7 (3.8)	11 (8.5)	0.04	0.35 (0.13–0.96)
	5–10 million	88 (47.3)	69 (53.1)	0.14	0.70 (0.44–1.19)
	>10 million	91 (48.9)	50 (38.5)	0.07	-
Presence of someone needing care at home	Yes	110 (59.1)	34 (26.2)	<0.001	4.08 (2.51–6.66)
	No	76 (40.9)	96 (73.8)	-	-
History of disease	Yes	6 (4.6)	18 (9.7)	0.10	2.21 (0.854–5.741)
	No	168 (90.3)	124 (95.4)	-	-
Marital status	Single	21 (11.3)	31 (23.8)	-	-
	Married	159 (85.5)	91 (70.0)	0.002	2.57 (1.40–4.75)
	Other	6 (3.2)	8 (6.2)	0.86	1.11 (0.33–3.66)

Table 3. (Continued).

Variable		Conflict (yes)	Conflict (no)	<i>p</i> -value	OR (CI 95%)
		$\bar{x} \pm SD/n$ (%)	$\bar{x} \pm SD/n$ (%)		
Spouse's education	Diploma or lower	24 (14.5)	19 (20.4)	0.856	0.931 (0.429–2.02)
	Associate degree	30 (18.2)	14 (15.1)	0.263	1.579 (0.709–3.516)
	Bachelor's degree	73 (44.2)	32 (34.4)	0.112	1.681 (0.885–3.191)
	Master's degree or higher	38 (23.0)	28 (30.1)	-	-
Education	Diploma	9 (4.8)	12 (9.3)	0.022	0.320 (0.120–0.851)
	Associate degree	20 (10.8)	21 (16.3)	0.021	0.406 (0.189–0.873)
	Bachelor's degree	96 (51.6)	70 (54.3)	0.057	0.585 (0.336–1.016)
	Master's degree or higher	61 (32.8)	26 (20.2)	-	-
Spouse's job	Free-lance (self-employed)	92 (64.8)	47 (54.7)	0.017	3.356 (1.239–9.087)
	Official work	42 (29.6)	26 (30.2)	0.58	2.769 (0.966–7.935)
	Unemployed	1 (7)	1 (1.2)	0.718	1.714 (0.092–31.92)
	Retired	7 (4.9)	12 (14)	-	-

Based on the results of the stepwise logistic regression analysis, the variables of age, marital status, number of children, spouse's education, overtime work hours, length of work hours per week, years of marriage, education level, history of disease, presence of a person needing care at home, income, employment type and work position were included in the regression model. Finally, the estimation of the parameters of the final model is presented in **Table 4**. As it can be seen, the odds of work-life conflict (CI95%: 0.599–0.925) decreases by 0.745 times for each unit of increase in years of marriage. Having a disease increases the odds of work-life conflict (CI95%: 0.941–9.135) 2.93 times. The presence of a person needing care at home, such as a child or an adult needing care, or the presence of a disabled person at home can increase the odds of conflict (CI95%: 1.983–6.311) to increase 3.53 times. The odds of conflict are related to the number of children, and for each unit of increase in the number of children, the odds of conflict (CI95%: 0.990–2.015) increase for 1.41 times (see **Table 4**).

Table 4. Logistic regression analysis of the predictors of work-life conflict in working women.

Step	B	S.E.	<i>P</i> -value	OR	95% CI for EXP (B)	
					Lower	Upper
Number of children	0.345	0.181	0.057	1.412	0.990	2.015
Years of marriage	-0.295	0.111	0.008	0.745	0.599	0.925
Having or not having a disease	1.076	0.580	0.063	2.932	0.941	9.135
Presence of someone needing care at home	1.264	0.295	<0.001	3.538	1.983	6.311

4. Discussion

The present study explored the predictors of work and life conflict in working women at Birjand University of Medical Sciences and Birjand University. The data analysis showed that employment type, income, presence of a person needing care at home, physical health, marital status, education level, university type and spouse's job are related to the presence or absence of work-life conflict in working women's life. The odds of conflict among working women increase with having more children, shorter length of married life,

having a history of disease, and the presence of someone needing care at home (a child or adult).

All remaining factors in the model output as predictors of work-life conflict in working women are almost unchangeable. Factors such as the length of marriage, number of children or having someone needing care at home. The question is raised, when a factor cannot be changed, what can be done to influence the final variable, i.e., the work and life conflict between? According to the existing literature, there are 4 categories of general factors that cause conflict: individual, interpersonal, cultural and organizational^[6]. In the individual dimension, training and improving individual capabilities such as time management skills, communication skills, using prioritization methods in managing tasks such as drawing the Eisenhower matrix, the power of delegation and reducing perfectionism in doing tasks can help. Spending more time during the day can help with conflict management. The support of important people in one's life, especially the husband, plays a critical role in managing domestic chore, especially care-taking of children. The cultures that govern societies can also play an important role in evoking or resolving these conflicts. In some societies, including Iran, the domestic chore and care-taking of children are mainly on women's shoulders. This can put a lot of mental and physical pressure on women.

A body of research, including the study of Moshura et al. in Ukraine proved that satisfaction with work-life balance is negatively correlated with the number of children at home, length of working hours, and high-level work positions (e.g., management)^[12]. In Schmidt's study in America, the presence of children under 6 years old at home was a strong predictor of conflict. In this study, caring for the elderly was also introduced as another predictor of conflict^[3]. The results of these studies were consistent with the present findings.

Caring for the elderly or other family members needing care for reasons such as the patient can disturb the work and life balance^[3]. It seems that these conditions have a greater effect on the conflict between work and life among working women. In Amazue et al.'s study of bank employees in Nigeria, no statistically significant relationship was found between marital status and work-life conflict^[1]. Also, Devi and Nagini found that marital status does not affect work-life balance^[2]. In Schmidt's study, no statistically significant relationship was found between marital status and work and life conflict^[3]. The results of these studies were inconsistent with the results of the present study. These divergent findings can be due to different cultures of research populations, different attitudes towards women's duties at home or other family members' expected responsibility of a wife, different facilities provided by organizations to women or flexibility of working hours.

Recently, certain days of the week have been dedicated to remote work in some organizations in the country to reduce working women's work-life conflict, especially women with children under 6 years of age. However, as the consequences of such decisions are open to controversy, more detailed evaluation and research is needed in this regard. For example, in their study, Mušura et al. found that individuals who had the possibility to work remotely at home experienced a statistically higher level of conflict. They admitted that bringing work home created more stress^[12,19].

Researchers found that work-life conflict is a product of work and home stress. Yet, stress in the workplace has a greater impact on the conflict between work and life than stress at home^[1]. It is necessary for the relevant organizations to have an active approach to reduce workplace stress^[15] and take effective measures such as arranging for flexible work shifts or working hours, increasing the number of days off for women, especially mothers with children under 6 years, increasing the number of workers to reduce work load and pressure^[3,12,15,20].

Women's level of education affected the level of conflict between their work and life. This result was consistent with the finding of Fan et al.'s study on Chinese working women. These researchers acknowledged that education is related to the effect of stress management on work-life conflict^[21].

Research shows that people who have more important protective factors against stress, such as self-control, self-esteem and high self-confidence, and positive thinking, are less prone to role conflict between work and life^[1,12]. Therefore, an effective measure that organizations should take to reduce the work and life conflict is to strengthen mental health and improve ways to deal with stress through training sessions for employees, especially women.

5. Ethical considerations

This study has been approved by the Research Ethics Committee of Hormozgan University of Medical Sciences (#IR.HUMS.REC.1400.214) as be viewed on the website of the National System of Ethics in Biomedical Research. Also, in the current research, the subjects' participation was voluntary and they were assured of the confidentiality of the information they provided. There was an emphasis on the anonymity of the questionnaires and the coding. Participants could withdraw from the study if they wanted.

6. Limitations and future research

Among the limitations of this study, mention can be made of the cross-sectional nature of study and the consequent lower understanding of all predictors of work-life conflict in working women. Another limitation is the statistical population of study (only working women in universities of Birjand) and the sample size. Therefore, due to these limitations, it is suggested to use qualitative methods with in-depth interviews in addition to the descriptive-analytical method in future studies. Also, similar studies should be conducted in other cities of the country with a larger sample size and the results of studies should be compared with each other.

7. Conclusions

Based on the results of the present study, the type of employment, amount of income, presence of a person in need of care at home, physical health, marital status, level of education, type of university, husband's job are predictors of work-life conflict in working women; therefore, to modify the aforementioned changeable factors, measures can be taken at individual level (e.g., teaching life skills, stress coping skills, increasing health literacy and self-care, following a healthy lifestyle), familial (e.g., teaching the importance of daily planning and division of labor in working couples) and organizational level (e.g., planning to minimize pressure and work stress, improving the ergonomics of the workplace).

Author contributions

Conceptualization, SFR and ZH; methodology, FS; software, SFR and FS; validation, MM, TA and RD; formal analysis, FS; investigation, SFR; resources, MY; data curation, SFR; writing—original draft preparation, SFR; writing—review and editing, SFR, ZH, FS, TA, MRM, RD and MY; supervision, ZH; project administration, ZH; funding acquisition, TA. All authors have read and agreed to the published version of the manuscript

Funding

This study was supported by Hormozgan University of Medical Sciences Deputy of Research with project number 4000154. The sponsoring institution had no role in study design, data collection, data analysis and interpretation, and manuscript preparation.

Acknowledgments

All participants in this study are appreciated.

Conflict of interest

The authors declare no conflict of interest.

References

1. Amazue LO, Onyishi IE. Stress coping strategies, perceived organizational support and marital status as predictors of work-life balance among Nigerian bank employees. *Social Indicators Research* 2016; 128: 147–159. doi: 10.1007/s11205-015-1023-5
2. Rama Devi V, Nagini A. Work-life balance and burnout as predictors of job satisfaction in private banking sector. *Skyline Business Journal* 2014; 9(1): 50–53.
3. Schmidt S, Delgado EA. Work-life conflict: Factors associated with negative spillover from home to work. *UW-L Journal of Undergraduate Research* 2011; 14: 1–14.
4. Fein EC, Skinner N. Clarifying the effect of work hours on health through work-life conflict. *Asia Pacific Journal of Human Resources* 2015; 53(4): 448–470. doi: 10.1111/1744-7941.12065
5. Lebni JY, Gharehghani MAM, Soofizad G, Irandoost SF. Challenges and opportunities confronting female-headed households in Iran: A qualitative study. *BMC Women's Health* 2020; 20: 183. doi: 110.1186/s12905-12020-01046-x
6. Hosseini Z, Yarelahi M, Rahimi SF, Salmani F. Investigating the factors related to work-family conflicts experienced by working women: A systematic review. *Health Scope* 2023; 12(1): e129738. doi: 10.5812/jhealthscope-129738
7. Dargahi H, Alipanah M, Nourizadeh Tehrani P. Comparison of work-family conflict between medical and non-medical staff groups in hospitals affiliated to tehran university of medical sciences. *Journal of Inflammatory Diseases* 2019; 23(2): 140–151. doi: 10.32598/JQUMS.23.2.140
8. Ziapour A, Kianipour N. Health-related quality of life among university students: The role of demographic variables. *Journal of Clinical and Diagnostic Research* 2018; 12(3): JC01–JC04. doi: 10.7860/JCDR/2018/29161.11258
9. Nazari B, Bakhshi S, Kaboudi M, et al. A Comparison of quality of life, anxiety and depression in children with cancer and healthy children, Kermanshah-Iran. *International Journal of Pediatrics* 2017; 5(7): 5305–5314. doi: 10.22038/ijp.22017.23540.21978
10. Kaboudi M, Dehghan F, Ziapour A. The effect of acceptance and commitment therapy on the mental health of women patients with type II diabetes. *Annals of Tropical Medicine and Public Health* 2017; 10(6): 1709–1713. doi: 10.4103/ATMPH.ATMPH_1607_1717
11. Ziapour A, Khatony A, Jafari F, Kianipour N. Prediction of the dimensions of the spiritual well-being of students at Kermanshah University of Medical Sciences, Iran: The roles of demographic variables. *Journal of Clinical and Diagnostic Research* 2017; 11(7): VC05–VC09. doi: 10.7860/JCDR/2017/25114.10314
12. Mušura A, Koričan M, Krajnović S. Work-life and life-work conflicting Croatian companies: Some perspectives. *International Journal of Organization Theory & Behavior* 2013; 16(1): 42–67. doi: 10.1108/IJOTB-16-01-2013-B003
13. Denson N, Szelényi K, Bresonis K. Correlates of work-life balance for faculty across racial/ethnic groups. *Research in Higher Education* 2018; 59: 226–247. doi: 10.1007/s11162-017-9464-0
14. Ziapour A, Zokaei A, Kahrizy F. A theoretical study of the standing of social investment in the health sector. *The Social Sciences* 2016; 11(15): 3682–3687. doi: 10.3923/sscience.2016.3682.3687
15. Duong MT, Hussain IA, Subramaniam A. Job stress, co-worker support, role expectation conflict and work-life balance among working women: A quantitative study on multinational companies in Vietnam. *Test Engineering and Management* 2020; 82(1–2): 744–749.
16. Taghizadeh Z, Ebadi A, Keshavarz S, et al. Why Iranian women experience work-family conflict? *Current Women's Health Reviews* 2021; 17(2): 136–149. doi: 10.2174/1573404816999200918114602
17. Carlson DS, Kacmar KM, Williams LJ. Construction and initial validation of a multidimensional measure of work-family conflict. *Journal of Vocational Behavior* 2000; 56(2): 249–276. doi: 10.1006/jvbe.1999.1713
18. Nasrin Alavi A, Zahra K, Mohammad Ali H, Poria R. Effect of stress management on job stress and work-family conflict among nurses. *Journal of Hayat* 2012; 18(4): 81–91.
19. Mohammadi M, Ziapoor A, Mahboubi M, et al. Performance evaluation of hospitals under supervision of Kermanshah medical sciences using pabonlasoty diagram of a five-year period (2008–2012). *Life Science Journal* 2014; 11(1): 77–81.
20. Malone EK, Issa RRA. Work-life balance and organizational commitment of women in the US construction industry. *Journal of Professional Issues in Engineering Education and Practice* 2013; 139(2): 87–98. doi:

10.1061/(ASCE)EI.1943-5541.0000140

21. Fan W, Feng Y, Wu L. The stressors in professional women's work-family conflict: A Chinese study. *Canadian Social Science* 2009; 5(3): 62. doi: 10.3968/j.css.1923669720090503.008