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# PERCEIVED STRESS, WORK-FAMILY CONFLICT AND WORK ENGAGEMENT AS CORRELATES OF PSYCHOLOGICAL WELL-BEING OF WORKING NURSING MOTHERS IN IBADAN METROPOLIS

BY

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## Abstract

The study examined the influence of perceived stress, work-family conflict and work engagement on the psychological well-being of working nursing mothers in Ibadan metropolis, Oyo state. Descriptive survey method was employed for this study. A sample of three hundred and fourteen working nursing mothers was randomly selected among the population of working women in five local government areas within Ibadan metropolis. The age of the participants was from 20-45 years with a mean age of 28.80. Four standardized instruments; Ryff Psychological well-being Scale ( $r=0.73$ ), Perceived Stress Scale ( $r=0.77$ ), Work-family Conflict Scale ( $r=0.75$ ) and Utrecht Work Engagement Scale ( $r=0.84$ ) was used. The statistical data analyses utilized are Pearson Product Moment Correlation and multiple regressions. Results indicate that psychological well-being negatively correlates with perceived stress ( $r=-.974, p<0.01$ ), and work family conflict ( $r=-.785, p<0.01$ ), however, positive correlation was recorded with work engagement ( $r=.492, p<0.01$ ). Result further showed a significant combined contribution of perceived stress, work-family conflict, and work engagement on psychological well-being (yielding a coefficient of multiple regressions  $R=0.605$ , multiple  $R^2=0.366$  and adjusted  $R^2=.355$ ). Also, perceived stress, work-family conflict and work engagement are potent predictors of psychological well-being of working nursing mothers. The most potent factor was work engagement ( $\beta=.101, t=7.051, P<0.01$ ) work family conflict ( $\beta=-.074, t=-.2.437, P<0.05$ ) and perceived stress ( $\beta=-.974, t=-47.590, P<0.01$ ). To this end, it is recommended that stress management trainings should be organized regularly to help working nursing mothers attain a balance in work and family life, mediate and reduce stress and ultimately improve the psychological well-being of working nursing mothers. Also, working conditions and organizational policies should also be tailored to encourage employee engagement as this will also boost performance and productivity.

**Keywords:** Perceived stress, Psychological well-being, Work engagement, Work-family conflict, Working nursing mothers

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## Introduction

In recent times, the economic demands of the family have become widened revealing that men's effort to

provide for their families has limited impact which has necessitated the entrant of women into the world of work to augment family needs. Also, the advent of

western civilization has created the avenue for many women to become educated and be gainfully employed in the nation's workforce to attain their own self actualization. Hence, the modern trend of economic development and equal employment opportunities has led to an increasing participation of educated women of childbearing age in the global workforce. Onimode (1998) reported that women engage in policy making and management at all levels of the economy thereby contributing to national development as workers.

To further buttress this, Okiy (2002) revealed that women in Nigeria like their counterparts in other countries of the world are functional in various professions such as legal, medicine, teaching, nursing, banking, engineering and even as members of the parliament. For instance, as part of the political parties' manifestoes during electioneering campaign in Nigeria in 2014, it was proposed that 35% of any appointment by government would be given to women. Therefore, the increased participation of women in labour force over the past few decades have led to increased interest in the effects of employment on women's mental health and well being.

Women employment has been investigated as either beneficial or detrimental to women's psychological well being and psychological functioning. Many studies have shown that combining paid work with family roles fosters better psychological well-being because of the augmentation of the individual's power, prestige, resources and emotional gratification (Maclean, Glynn & Ansara, 2004; Rozario, Morrow-Howell and Hinterlong, 2004; and Salami, 2005). However, Adegoke (2012) reported that

combining professional careers with marriage and child rearing may be stressful for women. This is not farfetched since working is mostly characterized with high level of interpersonal transactions and exposure to emotionally demanding situations which may be accompanied by increasing challenges in managing time, roles and responsibilities (Fine-Davis, Fagnani, Giovannini, Hojgaard, & Clarke, 2004; Marcinkus & Hamilton, 2006). Invariably, balancing work and family responsibilities could be challenging to many working nursing mothers thus creating pressures as effort is made to find meaning in work, at home and in their personal life in the face of competing priorities and career roles.

Furthermore, Marcinkus and Hamilton (2006) argue that some nursing mothers even considered opting out of the labour force during child care years as a result of conflicting work demands. Majority of career-minded mothers are confronted at some point with the choice between a challenging job, a promising career and the demands of home life which in itself produces stress. The challenge for working mothers may be on how to facilitate the sharing of roles in a more fair and equitable way to relieve the double burden of employment and domestic duties (Fine-Davis et.al., 2004). It is widely acknowledged that the incompatibility or conflict between these two domains has adverse effects on their health and well-being (Kinnunen, Feldt, Geurts, & Pulkkinen, 2006 & Noor, 2003).

Psychological wellbeing has been a variable of consideration when it comes to determining the efficiency of workers in any organization. Psychological well-



being connote when an individuals' life is perfectly stress free. It is about lives going well. It is the combination of feeling good and functioning effectively. Ryff (1995) defined psychological well-being as positive mental health with two aspects: hedonic (subjective experience of happiness and life satisfaction) and eudaimonic (psychological functioning, good relationships with others, and self realization). According to Deci and Ryan (2008) psychological well-being is conceptualized as some combination of positive affective states such as happiness (the hedonic perspective) and functioning with optimal effectiveness in individual and social life (the eudaimonic perspective). As implied by the definition, people with high psychological well-being report feeling happy, capable, well supported and satisfied with life.

Psychological well-being encompasses a number of factors including autonomy, personal growth, mastery, purpose in life, self-acceptance, efficacy, hope, optimism, and resilience (Ryff, Singer, & Love, 2004). Clearly, this is more than simply the absence of negative states. However, psychological well-being is compromised when negative emotions are extreme or very long lasting and interfere with a person's ability to function in his or her daily life. It is negatively influenced by the universal experience of stress.

A widely adopted view of stress considers it to be the experienced condition or feeling when individuals perceive that the demands of a situation exceed their perceived resources and endanger well-being. According to Weiten (2004) stress can be defined as circumstances that threaten or are perceived to threaten one's

well-being and that thereby tax one's coping abilities.

Stress is as an imbalance between the demands of a situation and the resources available to deal with these demands. This traditional definition seems to have found a consensus of support because it recognizes that stress emerges from the relationship between the person and the environment and it focuses on the process between the two. Stress typically describes a negative condition or a positive condition that can have an impact on a person's psychological well-being. Stress can have many profound effects on the human biological systems.

Gupta and Chandwani (2011) reported that stress is a common phenomenon affecting employee's mental health and well-being. Lee (2002) opined that stress is one of the most significant inevitable consequences of work life influencing both individual and organizational performance. According to Kazmi, Amjad and Khan (2008) stress is the psychological and physical strain that results when the resources of the individual are not sufficient to cope with the demands and pressures of the situation. Particularly, stringent performance measures, unrealistic targets and the inability to balance work and family life were identified as some of the main reason for high levels of stress among working mothers (Gupta & Chandwani, 2011). Working mothers may be overwhelmed by the feeling that they can't accomplish everything they need to do, and, in this way, work stress becomes linked to stressful situations in the home. Studies have shown that the experiences of stress increases negative evaluations and

decrease positive evaluations. It has significant negative influence on psychological well-being, affects various aspects of human functioning; it may directly cause physical illness through changes in autonomic nervous system and/or immunological functioning (Kiecolt-Glaser, McGuire, Robles, & Glaser, 2002).

Work-family conflict is defined as a form of inter-role conflict, in which the demands of work and family roles are incompatible in some respect, so that participation in one role is more difficult because of participation in another role (Greenhaus & Beutell, 1985). In addition, Netemeyer, Boles and McMurrian (1996) described work-family conflict as a form of inter-role conflict in which the general demands of, time devoted to, and strain created by the job interfere with performing family-related responsibilities. Work-family conflict can have an overwhelming impact on the functioning and well-being of individuals, families, organizations, and societies (Hassan, Dollard & Winefield, 2010). Workplace characteristics have been reported to also contribute to higher levels of work-family conflict. Researchers have found that the number of hours worked per week, the amount and frequency of overtime required, an inflexible work schedule, unsupportive supervisor, and an inhospitable organizational culture for balancing work and family all increase the likelihood that women employees will experience conflict between their work and family role and which may negatively impact the well-being, health, and behaviour in both the work- and family domains (Mitchelson, 2009; Streich, Casper & Salvaggio, 2008).

The well-being of working women have been reported to be affected to a greater extent than that of men, given that working women experience significantly greater levels of work-family conflict than their male counterparts (Greenhaus & Parasuraman, 1999). Some studies have found that married female employees are more likely to experience strain associated with conflicting roles than men and their unmarried counterparts (Poelmans, O'Driscoll & Beham, 2005; Rotondo, Carlson & Kincaid, 2003; Geurts & Demerouti, 2003). Working nursing mothers are also more likely to experience work-family conflict as they progress up the corporate ladder, which suggests that assuming a managerial position may further increase work-family conflict (Brown, 2010). Several negative outcomes, such as stress have been linked to work-family conflict since simultaneously performing the role of an employee, parent, and spouse may result in stress and conflict. In fact, the pressure to meet these diverse role demands makes work-family conflict almost unavoidable.

Contemporary work increasingly involves knowledge work which requires greater engagement of employee's mental and emotional capability. In parallel, employees desire greater meaning and personal development from their work. It suggests that work engagement is a key factor in retaining a job and working to yield optimal performance and productivity. Work engagement is the assumed opposite of burnout. Work engagement is a positive, fulfilling, work-related state of mind that is characterized by vigour, dedication, and absorption (Schaufeli and Bakker, 2004; Schaufeli,

Salanova, Gonza'lez-Roma, & Bakker, 2002). *Rather than a momentary and specific state, engagement refers to a more persistent and pervasive affective-cognitive state that is not focused on any particular object, event, individual, or behavior.* Unlike employees who suffer from burnout, engaged workers have a sense of energetic and effective connection with their work activities and sees themselves as able to deal well with the demands of their job. Schaufeli et al., (2001) reported that engaged employees are highly energetic and self-efficacious individuals who exercise influence over events that affect their lives. As a result of their positive attitude and high activity level, engaged employees create their own positive feedback, in terms of appreciation, recognition, and success (Bakker, 2009). Engaged employees often indicate that their enthusiasm and energy extend outside work, for example in volunteer work. On the contrary though, engaged employees, like every other worker do feel tired after a long day of hard work, however, the tiredness is a rather pleasant state because it is associated with positive accomplishments. Also, engaged employees are not addicted to their work. They enjoy other things outside work and, unlike workaholics, they do not work hard because of a strong and irresistible inner drive, but because for them working is fun (Schaufeli, Taris & Bakker, 2006).

The first dimension of work engagement known as vigour is characterized by high levels of energy and mental resilience while working, the willingness to invest effort in one's work, and persistence also in the face of difficulties. The second is dedication which is characterized by a sense of significance,

enthusiasm, inspiration, pride, and challenge. Vigour and dedication are the direct positive opposites of exhaustion and cynicism, respectively. The third dimension of engagement is called absorption, it is characterized by being fully concentrated and happily engrossed in one's work, whereby time passes quickly and one has difficulties with detaching oneself from work (Schaufeli & Bakker, 2001).

In essence, work engagement is characterized by a high level of energy and strong identification with work. Based on a theoretical analysis, researchers have identified underlying dimensions of work-related well-being, which include; (1) activation, ranging from exhaustion to vigour, and (2) identification, ranging from cynicism to dedication. In essence, work engagement captures how workers experience their work; as stimulating and energetic and something to which they really want to devote time and effort as a significant and meaningful pursuit and as engrossing and interesting (Bakker, 2008). In engagement, fulfillment exists in contrast to the voids of life that leave people feeling empty as it is the case in burnout.

Bakker (2009), in his opinion explained why engaged workers perform better than non-engaged workers. First, engaged employees often experience active, positive emotions, including joy and enthusiasm. These positive emotions seem to broaden people's thought-action repertoire implying that they constantly work on their personal resources. In addition, engaged workers experience better health hence they are able to focus and dedicate all their energy resources to

their work. They create their own job and personal resources. If needed, they ask for performance feedback or they ask colleagues for help. They also transfer their engagement to others in their immediate environment (Bakker & Demerouti, 2009; Bakker & Xanthopoulou, 2009). Since in most organizations performance is the result of collaborative effort, the engagement of one person may transfer to others and indirectly improve team performance and enhance well-being. In essence, working nursing mothers who are engaged are better able to create a balance and enjoy the better of the three worlds of work, family and psychological well-being.

### **Statement of the Problem**

Motherhood places the responsibility of raising a child in addition to building a successful career on working mothers. This unique life situation of motherhood and employment among women who are now a visible part of the workforce in almost all professions has the tendency to change the way a working nursing mother is perceived in the society and at her workplace. Many working women start their families while they are working and majority need to return to work sooner than expected in the postpartum period. It is important to understand that both roles are extremely demanding, and the ability to juggle both without neglecting the other is a formidable task and can be stressful to the point of affecting the psychological well-being. Hence, a working nursing mother, especially one who has the good fortune to be able to balance her home and work, enjoys the stimulation that a job or career provides and relishes the satisfaction as an engaged

employee while maintaining a healthy psychological well-being. Previous studies on working women had focused on other variables bothering on job security, absenteeism and women generally leading to a gap on working nursing mothers. Therefore, this study aimed at investigating the relationship that exist among perceived stress, work-family conflict, work engagement and psychological well-being of working nursing mothers in Ibadan metropolis.

### **Research Questions**

1. Are there any significant relationship among perceived stress, work family conflict and work engagement on the psychological well-being of working nursing mothers?
2. What is the joint contribution of perceived stress, work family conflict and work engagement on the psychological well-being of working nursing mothers?
3. What is the relative contribution of perceived stress, work family conflict and work engagement on the psychological well-being of working nursing mothers?

### **Methodology**

#### **Research Design**

The study adopted the descriptive survey research design of the *ex-post facto* type. This design is appropriate because the researcher does not have control over the concomitant variables as their manipulation had already occurred.

### **Population and Sample**

The sample for this study comprised of three hundred and fourteen (314) working nursing mothers randomly selected from the population of employed women in Ibadan metropolis. Ibadan metropolis comprises of five local government areas (Ibadan South East, Ibadan North, Ibadan South West, Ibadan North West and Ibadan North East). Purposive sampling procedure was used in selecting participants. To be eligible to participate, respondents must be married and employed. The respondents must be nursing a child who is not more than three years old.

### **Instruments**

**Psychological well-being Scale:** This scale was developed by (Ryff, 1995). It is designed to measure psychological well-being through six sub-categories. This eighteen item scale was adopted for this study to elicit individual psychological functioning. Participants were asked to rate themselves on a 1 to 6 response options (1=strongly disagree to 6= strongly agree). Those who score high on the scale were rated as having high psychological well-being while those who score low connotes low psychological well-being. The reliability coefficient of 0.73 was recorded for the instrument using Cronbach alpha reliability.

### **Perceived Stress Scale (PSS)**

The scale consisting of ten items was developed by Cohen, Kamarck, & Mermelstein (1983). It was developed to measure the degree to which situations in an individual's life are appraised as stressful. Participants rated their perceived stress on a 5-point Likert scale (0 = *Never* to 4 =

*Always/Every day*). Higher scores depict participant high experience of stress. Examples of items in the scale include "In the past month, how often have you been upset because of something that happened unexpectedly?" and "In the past month, how often have you felt that you were on top of things"? The Cronbach alpha coefficient was 0.77 for the present sample.

### **Work-family Conflict Scale**

This scale was developed by Netemeyer, Boles and McMurrian, (1996). The 10 item scale was adapted to measure workers ability to manage demands from work and family simultaneously. Individual were asked to rate themselves on a 1 to 4 scale ranging from 1=strongly disagree to 4= strongly agree. Participants who scored high on the scale indicate high work family conflict while those who score low have low work family conflict. It recorded a reliability coefficient of 0.75 using Cronbach alpha.

### **Utrecht Work Engagement Scale (UWES-9) (Schaufeli et al., 2002)**

Work engagement was measured using the nine-item version of the Utrecht Work Engagement Scale. The nine-item version of UWES (UWES-9) measures the three dimensions of work engagement, namely vigour (VI), dedication (DE), and absorption (AB), using three items for each dimension (Bakker & Demerouti, 2008). This study utilized a single score of work engagement. Each item was rated using a seven-point options with 0= *no, that is not correct* and 7= *yes, that is correct*. Sample items include: 'At my work, I feel bursting with energy' (VI), 'My job inspires me'

(DE), and 'I am immersed in my work' (AB). This scale recorded a reliability coefficient of 0.84 when pilot tested using Cronbach alpha.

### **Procedure**

A letter of introduction from the Department of Guidance and Counselling in the University of Ibadan was taken to organizations within the metropolis to seek for their approval to administer the questionnaire. In organizations whose employees agreed to partake in the study, the participants were assured of confidentiality of their responses and adequately briefed on the essence of the

research which is mainly for academic purposes and the need to cooperate with the researcher. A total of three hundred and fifty (350) questionnaires were administered to the participants in various organizations. However, a total of three hundred and fourteen (314) questionnaires were properly filled and retrieved from participants for further analysis.

### **Method of Data Analysis**

The data were analyzed using Pearson's product moment correlation and multiple linear regression analysis at 0.05 significant level.

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**Results**

**Research Question 1**

Are there any significant relationship among perceived stress, work family conflict and work engagement on the psychological well-being of working nursing mothers?

**Table 1:** Zero order correlation of variables under study

Variables	Mean	Std.Dev	1	2	3	4	5	6
Psychological well-being	51.4799	13.54856	1.000					
Work-family conflict	35.3456	8.28966	-.785**	1.000				
perceived stress	55.2953	10.87641	-.974**	.806**	1.000			
work engagement	34.1544	6.30613	.492**	.535**	.431**	1.000		

\*Correlation is significant at 0.05(2-tailed)

\*\*Correlation is significant\*at 0.01(2-tailed)

Table 1 shows the relationship of each of the independent variables (work-family conflict, perceived stress and work engagement) with the dependent variable (psychological well-being); Psychological well-being negatively correlates with perceived stress ( $r = -.974$ ,  $p < 0.01$ ), and work-family conflict ( $r = -.785$ ,  $p < 0.01$ ). But it had a positive correlation with work engagement ( $r = .492$ ,  $p < 0.01$ ). This implies that an increase in the perception of stress and work-family conflict will reduce the likelihood of healthy, positive or high psychological well-being of working nursing mothers. On the other hand, high work engagement will increase the psychological well-being of working nursing mothers.

**Research Question 2:**

What is the combined contribution of perceived stress, work-family conflict and work-engagement to the prediction of psychological well-being of working nursing mothers in Ibadan metropolis?

**Table 2:** Summary of regression of joint contributions of independent variables to the prediction of the dependent variable (psychological well-being)

R =.605					
R Square =.366					
Adjusted R square =.355					
Std. Error =5.748					
Model	Sum of	Df	Mean	F	Sig.

*Perceived Stress, Work-family Conflict and Work Engagement as Correlates of Psychological Well-being of Working Nursing Mothers in Ibadan Metropolis*

		Squares		Square		
1	Regression	12880.387	3	4293.462	34.014	.000 <sup>a</sup>
	Residual	290.813	310	5.702		
	Total	13171.200	313			

Table 2 reveals a significant combined contribution of the independent variables (perceived stress, work-family conflict and work engagement) to the prediction of psychological well-being. The result yielded a coefficient of multiple regressions  $R = 0.605$ , multiple  $R^2 = 0.366$  and Adjusted  $R^2 = .355$ . This suggests that the three independent variables when combined accounted for 35.5% ( $Adj.R^2 = .355$ ) variation in the prediction of psychological well-being of working nursing mothers. The other variables accounting for the remaining 64.5% are beyond the scope of this study. The ANOVA result from the regression analysis shows that there was a significant joint effect of the independent variables on psychological well-being of working nursing mothers ( $F_{(3,310)} = 34.014, P < 0.01$ ).

### Research Question 3

What is the relative contribution of work family conflict, perceived stress and work engagement to the prediction of psychological well-being of working nursing mothers in Ibadan metropolis?

Table 3: Summary of regression for the relative contribution of the independent variables to the prediction of psychological well-being of working nursing mothers

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	$\beta$	T	Sig.
1	(Constant)	.059	1.048		.056	.955
	Work family conflict	-.187	.036	-.074	-2.437	.015
	Perceived stress	-1.213	.025	-.974	-47.590	.000
	Work engagement	.217	.031	.101	7.051	.000

Table 3 shows that the three predictor variables (perceived stress, work-family conflict and work engagement) are potent predictors of psychological well-being of working nursing mothers. The most potent factor was work engagement ( $\beta = .101, t = 7.051, P < 0.01$ ). Followed by work family conflict ( $\beta = -.074, t = -2.437, P < 0.05$ ) and perceived stress ( $\beta = -.974, t = -47.590, P < 0.01$ ). This implies that there is high likelihood that reduced psychological well-being



of nursing mothers is an evidence of increased perceived stress, and work family conflict. While increased psychological well-being is an evidence of work engagement.

### **Discussion**

The results of this study showed that psychological well-being is negatively correlated with perceived stress and work family conflict. But it had a positive correlation with work engagement. This implies that an increased influence of perceived stress and work-family conflict will reduce the likelihood for healthy psychological well-being of working nursing mothers. The result from this study corroborates the findings (Adegoke, 2012; Alarape & Afolabi 2001; Salami, 2005) that conflicting roles are detrimental to well being of working mothers. The possible explanation for this is that the psychological well-being of working nursing mothers is affected as a result of the number of activities they are expected to juggle together on a daily basis i.e. the complexities in trying to create a balance between multiple demands; the demands of the babies, spousal responsibility and household chores if not well managed could result in psychological breakdown in the form of tension, anxiety and even depression. Stress and conflicting work and family roles can hinder the sense of autonomy and also the sense of personal control of the working mothers to mention just a few. This result has justified that a healthy psychological well-being will not be able to accommodate perceived stress and work family conflict.

On the other hand, work engagement had positive relationship with

psychological well-being. This implies that work engagement will increase the tendency of experiencing healthy psychological well-being among working nursing mothers. This result is in support of some studies (Schaufeli, Taris, & Van Rhenen, 2009; Sonnetag, 2003) who reported that engaged employees are better able to handle job demands and as well maintain healthy well-being. Also, that a positive association exist between work engagement, perceived positive relationships, personal initiative, learning, health, and well-being. This is an indication that good psychological well-being can still be maintained when employees are engaged and there is no iota of stress and work-family conflict.

Furthermore, the result shows that there was a significant combined and relative contribution of the independent variables (work-family conflict, perceived stress and work engagement) on psychological well-being. This result is in agreement with the work of Rees (2003) who found that women encounter more stress as compared to men. The main reason is attributed to the fact that work-family conflicts occurs as women strive to balance their responsibilities as employees towards their work and their roles in the family as mothers to their children and wives to their spouses. De Janasz and Behson (2007) found that the conflict of work and family may lower job satisfaction and it may decrease the organizational commitment and work engagement.

The results further showed that work engagement was the most potent contributor to working nursing mother's psychological well-being. The outcome of

this study is in line with the findings (Bakker & Demerouti, 2008; De Braine & Roodt, 2011) that engaged employees experience high energy levels, feelings of being engrossed in their work, enthusiasm, commitment, dedication, and total concentration and hence experience healthy psychological well-being. Also engaged employees are both cognitively and emotionally connected to their work and their workplace. The plausible explanation is that individuals experiencing conflict as a result of incompatible demands in their work and family lives may be less engaged in their work. From the results of the current study, it can be deduced that the perceived stress resulting from work-family conflict may hinder optimal concentration of working nursing mothers to their work task which will affect dedicating the necessary time and energy to their work roles and ultimately results in low performance and poor psychological well-being. Essentially, work-family conflict is likely to reduce the extent to which an individual is engaged in his or her work and the stress resulting from the evaluations the individual make about his or her ability to cope with the challenges.

### **Conclusion**

This study investigated perceived stress, work-family conflict and work engagement as predictors of psychological wellbeing. The study found that the three variables jointly predicted psychological wellbeing. This is an indication that working nursing mothers psychological wellbeing can only be managed when the perceived stress and work-family conflict is reduced. However their psychological wellbeing can be improved when they have high work engagement which automatically

connote that some other factors beyond this study are put in place.

### **Implication and Recommendation**

Although nursing working mothers have to juggle multiple roles which results in role conflict, they can be successful as wives, mothers and paid employees if they are supported with family friendly policies and structures. Supportive networks such as spouses, extended family members and friends, governmental and non-governmental organizations will go a long way in enhancing nursing working mothers' psychological well-being. Specifically, if working mothers are offered flexible work schedules, affordable childcare services and assistance with household chores they will be healthy and can contribute effectively to the development of their families, communities and nations. Therefore, in order for women to contribute to economic development, peace-building, stability and national integration through active participation in the global workforce and still maintain their psychological well-being; it is recommended that:

- Employers of labour should beyond ordinary lip service put in place policies that will help nursing mothers cope with the demands of work and family roles. In addition, organizations have a responsibility to provide nursing working mothers with adequate support to ensure that work-family conflict does not adversely impact their levels of work engagement.
- Organizations should play significant roles in reducing stress

and making life better for working nursing mothers especially by putting in place stress management trainings for with the aim of reducing stress among working nursing mothers.

- The organizations as part of their corporate social responsibility in the community where they are situated should establish community day-care and child support centers and crèches for their employees who are nursing mothers to reduce the stress of not having their babies within reach to help them concentrate better on their work.
- Counselling programmes such as stress reduction and emotional intelligence training should be held annually for both nursing and non-nursing working mothers to help them manage work, career and family.

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