

Job Demands and Strain-Based Conflict among Nurses of Public Hospitals in Nigeria

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Abstract

Nurses of public hospitals in Nigeria, while carrying out their role functions are consistently faced with high job demands placing great claim on nurse's energy and time. In the course of carrying out a role function, nurses experience interference of demands on another role function, hence resulting to strain-based conflict. The study explores the degree of relationship between job demands and strain-based conflict. Job demands focused in this study includes work hour, work overload, work schedule and overtime work. Data were obtained from 291 registered nurses in public hospitals in Rivers State. The purposive sampling technique which is based on the researcher's subjective judgment and the cross sectional design which takes a cross section of the population at one time where employed in this study. Hypotheses was tested with a non-parametric statistical technique of Spearman Rank Correlation analysis calculated with the use of Statistical Package for Social Science (SPSS) version 21.0 Revealed from the findings is the existence of a of a relationship between to job demands and strain-based conflict. Work overload is found to be the major influence of strain-based conflict. Hence to reduce job demands and strain-based conflict, there is need for the provision of standard work hour, a measurable control over work schedules, development of organizational skills and reduction and monitoring of daily work load. The study concentrated only on four notable public hospitals, this however cannot be generalized effectively to other public hospitals. The possibility of job demands to result to strain-based conflict thus cannot be undermined and should be taken into cognizance by organization.

Keywords: Work hours, work schedule, work overload, overtime work, flexible work schedule, role overload, double shift

1. Introduction

Nurses in the public hospitals struggle with balancing their work and personal life due to the intense nature of their work which is highly demanding. The changes in work systems evident in technology changes, high competitive industry and improved service delivery coupled with meeting of family needs necessitate high demands. Notably in Nigeria, Public hospitals is known for its increasing work intensity carried out by nurses doing a full time job or shift time job that lead to job stress. Nurse's job entails that they consistently work every minute of the hour placing great demand on nurse's energy. Job demand is the rate at which nurses' view and experience job as challenging. It refer to any part of the job requiring both physical and cognitive effort bagged with a cost (Demerouti, Bakker, Nachreiner & Schaufeli 2001). Job demand is majorly known to be facilitated by role overload, work hours, work schedule and overtime work (Trépanier, Fernet, & Austin 2013, Yildirim & Aycan, 2008) and are considered as some of the factors associated to stress (Mojoyinola 2008). This job demands at long run affects nurse's psychological and physical health thereby prompting a negative attitude to work and the inability to attend to family roles. With the consistent interference of job demands, nurses

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experience strain-based conflict. The conflict derived from these interference seriously influence number of outcomes and has the tendency to “undermine nurses stability to provide high quality care” (Baghban, Malekiha, & Fatehizadeh, 2010). Strain based conflict manifest when the demands in a role causes an intense exertion and as such intrude or interfere some other role. For instance, been exhausted from work prevents one from meeting up with home demands and making one irritant with family members. This conflict is mostly found particularly with women than with men (Sabil, & Marican 2011). Hospital management are introducing the use of flexible working arrangement/schedules such as part time, double shift etc. to address the issue of strain-based conflict. Yet Nurses known to take on shift work and part time work are found to be affected by them with the consequent problems of strain symptoms such as eruption of stress and tension, depression, sleeplessness fatigue as well as imbalance in their family lives, disruption in their food schedules (Moradi, Farahnaki, Akbarzadeh, Gharagozlou, Pournajaf, Abbasi, & Karchani, 2014).

This study is important as hospitals management is concerned on how work and family roles can be place on a balance. The research study was conducted to investigate and to contribute to existing literature the relationship between job demand (work hour, work schedule, work overload and overtime work) and strain-based conflict among nurses as well as the theoretical and practical implications of the research study for hospital management to acknowledge the degree of influence of job demands to cause strain-based conflict among nurses. The study is restricted to nurses of public hospitals in Nigeria exempting doctors and other workers. The findings will indicate if there is any existing relationship between job demands and strain-based conflict. Thus it aims at finding answers to the research questions:

1. What relationship exists between work hour and strain based conflict among nurses of public hospitals in Portharcourt Rivers State?
2. What relationship exists between work schedule and strain based conflict among nurses of public hospitals in Portharcourt Rivers State?
3. What relationship exists between work overload and strain based conflict among nurses of public hospitals in Portharcourt Rivers State?
4. What relationship exists between overtime work and strain based conflict among nurses of public hospitals in Portharcourt Rivers State?

2. Literature Review

• Job Demands Conflict

Job demand refers to any work related elements of the job either psychological, physical, organizational or social that causes strain to employees which is useful in ‘predicting occupational wellbeing’ and ‘indirectly influence performance’ (Demerouti, Bakker, Nachreiner & Schaufeli 2001). Thirapatsakun, Kuntontbutr, Mechinda (2014) defined job demand as ‘task requirement involved with a particular job’; Regarded as ‘stimulus’ which could take a pattern either intellectually, technically, financially, socially or physically that emanate from the resultant effects of one or the environment wielded the power to command an employee reaction. Job demand originates from stress literature and is viewed as work related stress. Opie, Dollard, Lenthall, Wakerman, Dun, Knight, Macleod (2010) view stress to results from Job demand when the employee put in much conscious effort. Stress from work occurs when workers find themselves not having adequate knowledge and ability to handle work demands and its pressures (King 2009). High job demand is linked to work related stress and strain which affect cognitive and physical functioning and disability in old age (Carlson, Grzywacz, Ferguson, Hunter, Clinch & Arcury 2011). Job demand includes quantitative demands (high volume workloads, conflicting roles: role ambiguity, role conflict, role overload, time pressure, work schedules, work hour, and other ill working conditions) (Trepanier, Fernet, Austin 2013, Shimazu, Bakker, Demerouti, & Peeters, 2010). It also includes qualitative demands (ability, skills, knowledge) according to Bakker, Demourouti & Verbeke (2004). In order words there must be an inclination to do harm either psychologically or physically. A job described as psychologically demanding entail mental alertness, cognitive arousal, organizational constraints and mental work (Thirapatsakun, Kuntontbutr & Mechinda 2014). Apart from the

negative effects job demand has on the employee, it could be turn out to be positive as the employee is able improve in quality of life in another role as a result of experiences obtained (Lingard, Valeria & Turner 2015). However, they could become job stressors when a work requires increase demand.

Job demand is facilitated by work overload, work hours, work schedule and overtime work (Trépanier, Fernet, & Austin 2013, Yildirim & Aycan, 2008). In spite of the qualification obtained, nurses work extra hours due to much work load. Time demands (work hour and overtime work) are found to relate positively and directly to work-family conflict (Baracharach 1991). Long working hours indicate little time and too few resources to carry out high demands at one's place of work; hence resulting to physical strain (Virtanen 2012). Working long hours could cause a strain as the employee comes home tired and exhausted and deliberately or un-deliberately spill over strain on family members. It is seen as a strategic tool in coping with uncompleted task (Kuschel 2015). Working long hours according to Lingard, Valeria, & Turner (2015) creates a need for recovering activities aside the day's work giving the opportunity for workers to meet up with task at home. Their analysis showed a positive relationship between work hour and strain-based conflict for either salaried or wages workers. Other studies assessed association of work hours on health outcomes indicating a positive relationship as well (Virtanen, Ferrie, Singh-Manoux, Shipley, Stansfeld, Marmot, & Kivimäki 2011, Virtanen, 2012). Statistical analysis from past studies showed high work time demand and low work time control (high strain) to influence strain based conflict (Lingard, Valeria, & Turner 2015). Work overload is when one work is too much and too difficult to carry out. Most often the work is too much to meet up when there is insufficient time and few resources are given. Work overload is defined as 'demands that exceed what an employee can reasonably accomplish in a given time' (Thirapatsakun, Kuntunbutr & Mechinda 2014). Work Overload culminates from two perspectives: as a perception of the individual thought or view towards work and as the inadequate provision of resources and time to carry on a task. (Fatima 2014). Factors that create work overload include working overtime, lesser breaks, few resources and cumbersome working hours. Work overload are of two types: qualitative (difficulty experience in carrying out work task) and quantitative (amount of work task to be done) working load (King 2009). Malik, Ghafoor & Iqbal (2013), stated that work overload brings about a state of ambiguity for employees which make them to be nervous compelling them to put in much efforts and irritant with their jobs. Greehaus & Beutell (1985) noted work overload as a stressor linked with interrole conflict. Other studies revealed same relationship (Ilies, Schwind, Wagner, Johnson, DeRue, & Ilgen 2007, Demerouti, Bakker, Nachreiner, & Schaufeli 2001). Work schedule is seen as 'alternate work schedule' (Tausing & Fenwick 2001). It is a planned time, days or weeks allotted to an employee to work which could take the form of shifts work, rotating shift, compressed work weeks, part time, job share, annualized hours, flexi time etc. (Possenriede & Plantenga 2011). Work schedules in hospitals compared to other industries are found to be 'countercyclical' (Magnini 2009). Work schedule flexibility as suggested by other researches involving long or few shifts, paid or unpaid leaves could potentially reduce strain-based conflict (Magnini 2009, Malik, Ghafoor & Iqbal 2013). Much research has not been conducted; linking work schedules to other variables other than strain-based conflict Malik, Ghafoor & Iqbal (2013) study showing a strong positive impact on job satisfaction posits that a flexible working schedule, will amount to a reasonable control, independence and minimize strain. This is in contrast to the view of Beutell (2010) who insisted on the adoption of employee sustainable control over work schedule than flexible work schedule. Overtime time work is when employees exceed the normal time permitted to work. The idea of working overtime insinuates insufficient time to finish up work required, which may be valued or not valued based on the personality traits of the individual (Proto & Rustichini 2015). "Overtime work indicate hours that exceed the contracted work hour" which is found to be more prevalent in men than in women (Virtanen 2012). It is also has the tendency to create 'total life overload' (King 2009). Employee work overtime either paid or unpaid so as to meet up with work demands. Generally overtime work leads to nurses expending more energy and having less recovery time after work. This results to intense fatigue which could at the long run cause severe strain. Contrarily to this, Beckers, van der Linden, Smulders, Kompier, van Veldhoven, & van Yperen, (2004) found no link of overtime work with fatigue which may be due to "variation in overtime work"

- **Strain-Based Conflict**

Conflict is bound to exist in a work-place environment. Conflict can be healthy as it fosters creativity or can cause undue physical and psychological strain to employees. Strain-based conflict occurs when much energy and effort is exerted in carrying out the requirements of a role hindering effective demand in another role. It manifest when the demands in a role cause an intense exertion and as such intrude or interfere with the relationship with family members (Greenhaus & Beutell 1985). Hence the interference reduces the effectiveness of one's duty toward family members. Stress in communication, work requiring high concentration and participation in boundary spanning activities are bound to cause strain based conflict (Burke, Moodie, Dolan & Fiksenbaum 2012). Mehelic & Tekavcic (2014) is of the view that conflict is only a problem when there is a 'conflicting and simultaneous demand' between the work and family roles. Strain-based conflict is viewed as a form and factor that accelerates work-family conflict (Nanda 2015, Kahya & Kasen 2014, Carlson, Kacmar & Williams 2000) and is considered the most hazardous (Charkhabi, Sartori, & Ceschi 2016). Work-family conflict as defined by Greenhaus and Beutell (1985) in Blanc & Aluja (2012) as, "a form of interrole conflict which the role pressures from the work and family are mutually incompatible in some respect". That is to say one's active function in work (family) role hinders full function in family (work) role. Specifically job demands have been directly link with strain among nurses (Opie et al, 2010, Shimazu, Bakker, Demerouti, & Peeters, 2010 Greenhaus and Beutell 1985). Strain are psychological, physiological and behavioural outcomes that occur as a result to high demands in the workplace and is regarded as a work-related health problem affecting mental and physical health experienced by public health workers especially the nurses which are manifested as emotional exhaustion-burnout, depression, disengagement, fatigue, tension, anxiety, dissatisfaction (Charkhabi, Sartori & Ceschi, 2016, Trépanier, Fernet, & Austin 2013 and Edward & Rothbard 2000). Worthy to be noted is the findings from a very long past research by Brief, Schuler, & Van Sell (1981) who posited that employees working routine, non-challenging and irrelevant task experience more a high strain rates. Employee with type A pattern characterized by competitiveness, aggression, social status insecurity, time urgency, achievement driven and hostility are more vulnerable to strain while employees with hardy personality (such as the high level commitment, control, ability to cope with challenges) and self-reliant cope better with stress (King 2009). Greenhaus & Beutell (1985), Mihelic & Tekavcic 2014, Biggart, Corr, O'Brien, & Cooper 2010 and Malik, Ghafoor & Iqbal (2013), noted that the extensive use of overtime, overload, work schedules, and work hour can result to strain symptoms/ conflict. Charkhabi, Sartori & Ceschi, (2016) is of the view that strain-based conflict ensues due to depletion in resources in terms of energy and time resulting to physical and psychological strain. Edward and Rothbard (2000) emphasized that strain-based conflict do not directly insinuate competing demands but rather involvement in a role result to strain both physical and psychological thereby inhibiting one from participating in another role. Psychological strain is prevalent when there are low levels of control and high demands (Thirapatsakun, Kuntonbutr, Mechinda (2014).

- **Theoretical Framework**

A theory which has undergone many studies overtime is the job resources-control-support model which examines the demand work elements and the resources available. It explains how job and personal characteristics affect the wellbeing of employees, health and motivation. The theory proposed that although increase in work demands may lead to stress, the level and state of psychological strain experienced is determined on the measure of control an employee and the support (co-worker and supervisor) received. (Philip, Micheal & Cary 2012). It is found that work demands can be reduced by availability of resources as proposed by the conservation of resource theory. 'A resource is anything of substance that contributes positively to their well-being and enables them to adjust' (Philip, Micheal & Cary 2012) and these resources includes personal resources (personal traits, values, positive effect) and environmental resource (autonomy, rewards and feedback). The theory that has gained much support is the spillover theory which proposed that behaviours, emotions, attitudes, values, of a person in a given situation influence another situation (Lavassani & Movahedi 2014). Spill over theory explains the effect of work outcomes/experience from the employee to members of the family which could either be positive or negative. Negative spillover occurs when pressures encountered at work affects negatively family roles while Positive spillover occurs when positive experience is of benefits to another role.

• **The Present Study**

The study examines the relationship among job demands (work hours, work schedule, work overload, overtime work) and strain-based conflict and the degree of influence of job demands on strain-based conflict. These study hypotheses are stated in the null form. That is to say that there is no relationship among the predictor (job demands) criterion (strain-based conflict). Stated specifically;

Hypothesis 1: There is no significant relationship between work hour and strain based conflict among nurses of public hospitals in Portharcourt Rivers State?

Hypothesis 2: There is no significant relationship between work schedule and strain based conflict among nurses of public hospitals in Portharcourt Rivers State?

Hypothesis 3: There is no significant relationship between work overload and strain based conflict among nurses of public hospitals in Portharcourt Rivers State?

Hypothesis 4: There is no significant relationship between overtime work and strain based conflict among nurses of public hospitals in Portharcourt Rivers State?

Fig 1: Conceptual Framework of the study

The conceptual framework operationalized the study variables

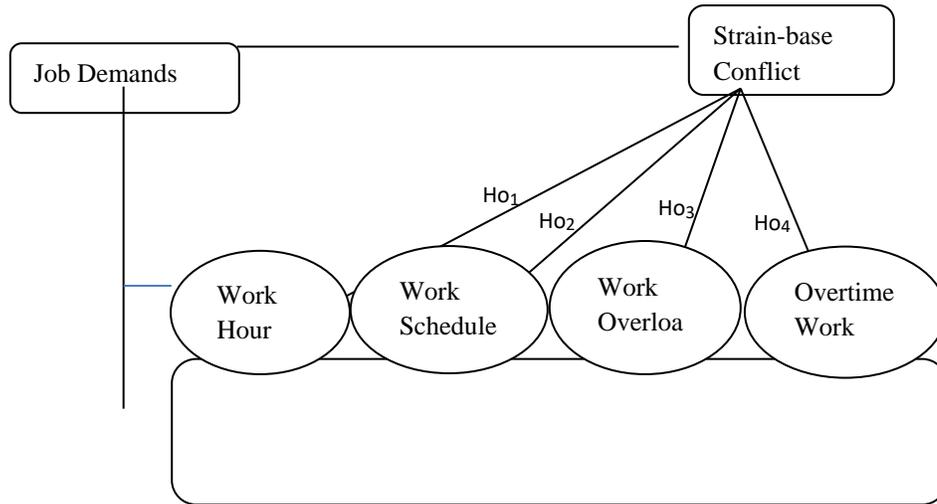


Fig: Illustrate the conceptual frame work of the study

3. Methodology

The research study design used in this study is the cross sectional research design, a part of quasi-experimental design which is commonly used in behavioural sciences. It is suitable for this study since it is targeted at finding a solution to a problem by taking across at one time a part of the population. The population in this study consists of registered nurses in public hospitals in Port Harcourt. Specifically the public hospitals used were University of Port Harcourt Teaching Hospital, Kelsey Harrison Hospital, Rivers State Neuropsychiatric Hospital and Braithwaite Memorial Hospital. The purposive sample which is based on the researcher’s subjective judgment was used to select the sampling units that are representative of the population. The sample size was obtained by Taro Yamane’s formula and the distribution of the research instrument – a structured questionnaire- to each hospital was obtained through the use of Bowley’s (1964) formula. Data used were obtained from a sample of 291 registered female nurses working both full time and pat time and analyzed with Statistical Package for Social Science (SPSS) version 21.0. the study were tested using spearman rank order correlation.

• **Measures**

Job demands: Job demand dimensions consist of 5 items for work hour, referring to hours employee work developed by Susan & Julia (2014). Sample item is: “I can decide how many hours I work each week within certain limits” Cronbach’s alpha was .77. Five items for work overload developed by Reilly’s (1982) with Cronbach’s alpha .86 was assessed. Sample item is: “I have to do things that I do not really have the time and energy for”. For work schedule and overtime items were developed for this study. The measures were rated on a five point rating scale from 1-strongly to 5-disagree.

Strain-based conflict: Strain based conflict measured with 5 items developed by Carlson, Kacmar & Williams (1998) rated on a 5 point likert scale (1=strongly agree, 2=disagree, 3=Undecided, 4=very satisfied to 5=strongly disagree). Cronbach’s alpha was .85. Sample item is: “When i get home from work i am often too frazzled to participate on family activities/responsibilities”.

4. Result

Data on the demographic information was investigated on four characteristics: age, marital status, educational qualification and length of service. Respondent’s age shows a greater percentage of the population (76.6%) is between the ages of 36-51. Nurse between 20-35 years occupy 17.2% (50 respondents), while the least is age bracket 52-60 (6.2%). One can conclude that, most nurses in public hospitals are within 36-51 years. A greater percentage of respondents totaled 262 (90%) were married while 245 (84.2%) respondents have Bachelor’s Degree. The length of service of the respondents indicated that 87 (29.9%) younger nurses had worked between 1-10 years, 129 (44.3%) nurses had worked between 11-20 years while departmental heads (25.8%) had work for 21 years and above.

Hypothesis Testing Result

Hypothesis One

Table 1: Relationship between work hour and Strain-Based Conflict

		Work Hour	Strain-Based Conflict
Work Hour	Correlation Coefficient	1.000	-.138*
	Sig. (2-tailed)	.	.018
	N	291	291
Spearman's rho	Correlation Coefficient	-.138*	1.000
	Sig. (2-tailed)	.018	.
	N	291	291

*. Correlation is significant at the 0.05 level (2-tailed).

The analysis revealed a significant relationship between work hour and strain-based conflict { $p < 0.05$ ($0.018 < 0.05$), $\rho = -0.138$ }. There is however a negative relationship which is displayed by a negative sign is found to exist between the two variables. The null hypothesis, there is no relationship between work hour and strain based conflict among nurses in Port Harcourt public hospitals, is rejected.

Hypothesis Two

Table 2: Relationship between work schedule and Strain-Based Conflict

		Work Schedule	Strain-Based Conflict
Spearman's rho	Work Schedule	Correlation Coefficient	1.000
		Sig. (2-tailed)	.000
		N	291
	Strain-Based Conflict	Correlation Coefficient	-.649**
		Sig. (2-tailed)	.000
		N	291

** . Correlation is significant at the 0.01 level (2-tailed).

The analysis indicated a significant relationship between work schedule and strain-based conflict showing a significant level $p < 0.05$ ($0.000 < 0.05$), $\rho = -0.649$. However there is a negative relationship which exists between the two variables. The null hypothesis, there is no relationship between work schedule and strain based conflict among nurses in Port Harcourt public hospitals, is rejected.

Hypothesis Three

Table 3: Relationship between work overload and Strain-Based Conflict

		Work Overload	Strain-Based Conflict
Spearman's rho	Work Overload	Correlation Coefficient	1.000
		Sig. (2-tailed)	.007
		N	291
	Strain-Based Conflict	Correlation Coefficient	.158**
		Sig. (2-tailed)	.007
		N	291

** . Correlation is significant at the 0.01 level (2-tailed).

The analysis revealed a significant relationship between work overload and strain-based conflict. The result of the analysis shows a significant level $p < 0.05$ ($0.007 < 0.05$), $\rho = 0.158$. Thus the null hypothesis 3 is rejected.

Hypothesis Four:

Table 4: Relationship between overtime work and Strain-Based Conflict

		Overtime Work	Strain-Based Conflict
Spearman's rho	Overtime Work	Correlation Coefficient	1.000
		Sig. (2-tailed)	.000
		N	291
	Strain-Based Conflict	Correlation Coefficient	-.362**
		Sig. (2-tailed)	.000
		N	291

** . Correlation is significant at the 0.01 level (2-tailed).

The analysis revealed a significant relationship between overtime work and strain-based conflict The result of the analysis shows a significant level $p < 0.05$ ($0.000 < 0.05$), $\rho = -0.362$. However a negative relationship exists between the two variables. The null hypothesis 4 is rejected.

Discussion of Findings

Findings obtained from the data analysis which consider all the variables under study shall be discussed below:

Hypothesis one: Work Hour and Strain-based Conflict

With $p < 0.05$ ($0.018 < 0.05$) and $\rho = -0.138$, work hour is regarded as been negatively related to strain-based conflict. Contrarily to expectation, when work hour increases, there is also a subsequent decrease in strain-based conflict. This is in contrast with the analysis carried out by Lingard, Valeria, & Turner (2015), Virtanen, Ferrie, Singh-Manoux, Shipley, and Virtanen (2012) which indicated a positive relationship of work hour to strain-based conflict. The negative relationship could be attributed to the fact that nurses especially the older nurses with a high level of commitment and control are not dissuaded from working long hours. Hence they cope better and experience less strain-based conflict.

Hypothesis two: Work Schedule and Strain-based Conflict

Work schedule and strain-based conflict is found to be negatively related ($p < 0.05$ ($0.000 < 0.05$), $\rho = -0.649$) which conflicts to the findings of Malik, Ghafoor & Iqbal (2013) showing a positive relationship. That is to say when work schedule increases, strain-based conflict decreases. The creation of flexible work schedules enable nurses to carry on with their work without any undue strain on them as they make use of their time off to recuperate and regain back energy lost. However in addition to creating a flexible work schedules, a measurable control is imperative in eliminating the effects of strain-based conflict.

Hypothesis three: Work Overload and Strain-based Conflict

Work overload and strain based conflict is positively related ($p < 0.05$ ($0.007 < 0.05$), $\rho = 0.158$), as reported previously by Demerouti, Bakker, Nachreiner, & Schaufeli (2001) Ilies, R., Schwind, Wagner, Johnson, DeRue & Ilgen (2007). This shows that whether as perceived by the employee or the inadequate provision of resources in executing role expectations, work overload is a strong predictor of strain-based conflict. Work overload is considered to lead to burnout, anxiety, depression which is a basic component of strain hence provoking frustration that interferes with roles.

Hypothesis four: Overtime Work and Strain-based Conflict

Overtime and strain-based conflict is negatively related ($p < 0.05$ ($0.000 < 0.05$), $\rho = -0.362$). This is to say as overtime work increases, strain-based conflict decreases. Nurses engage in overtime work in order to meet up with certain task requirements. Hence it is expected that taking extra hours should result to strain-based conflict, however the negative relationship may be linked to special conditions and circumstances or variations in overtime work as suggested by Beckers, van der Linden, Smulders, Kompier, van Veldhoven, & van Yperen, (2004).

From the findings obtained, a great percentage of the population (76.6%) is between the ages of 36-51 while 44.3% nurses had worked between 11-20 years. Hence the negative relationship found between work hour and overtime work contrarily to expectation implies that nurses who are older, and had worked for a reasonable number of years cope better than their counterparts in handling strain-based conflict.

5. Recommendations

From the findings, a few recommendations are proffered. This are enumerated as follows:

- Management of the health care organizations should create standard work hour so as to enable the nurses have sufficient time to carry out with other roles. Nurses are to be given full control over their hours allotted for work so as to enable them to be at ease with carrying out their work duties. This is can be helpful in reducing strain-based conflict.

- A flexible work schedule and a high schedule control should be structured and well utilized. The irregularities and inflexibility of work schedules should be eradicated completely so as to consequently reduce

strain-based conflict. Management should intimate the nurses on the essence of time and impact into them various skills such as organizational skills and time management skills.

- Managers should reduce and monitor work overload each day. Efforts should be directed to eliminate irrelevant and unnecessary task. Excess work overload which leads to strain based conflict affects the physical well-being of the employee overtime.
- The extent at which nursesin carrying out overtime work should be taken into cognizance. Overtime is not wrong in itself but should not be undermined. Nurses should be given a measure of liberty to devise when to work overtime and should not be on compulsion to work overtime.

Implications for Practice

The findings obtain revealed that there are jobs which consistently are highly demanding and which could lead to the inability of employees to meet expected roles. The study findings implicated the need for hospital management to carry out a job redesign programme where job duties, responsibilities and task of every employee will be intently reviewed and if there are any edges, re-allocated among the employee so as to improve a well excellent health patient care and reduce strain. This will possibly result to satisfaction in both life and job. Conflict is not only an outcome of interpersonal relationship but also among job demands and strain-based conflict. Hence efforts to eliminate or reduce conflict so as to avoid any negative consequences on employees and organization are to be carried out.

Contributions to Knowledge

The study contributes to knowledge through its empirical evidence the existence of a relationship between job demands and strain-based conflict. The result reveals a significant relationship between the variables indicating work hour, work schedule, and overtime work to be negatively related and work overload to be positively related implying a strong predictor of strain-based conflict. The negative relationship among time demands (work hour, work schedule, overtime work) may be associated to individual characteristics such as commitment level, self-reliance, level of control, special conditions and circumstance.

Limitation of the study

The study is restricted to nurses who are mostly dominated by women in public health sector. It does not include doctors usually dominated by men and other workers. Hence it is part representation in view of other employees-doctors and peripheral workers, working in the public hospitals. Secondly, the data gathered will be only from public hospitals in Nigeria which cannot be generalized effectively to private hospitals. Thirdly the study is limited to only the hospital under study and would assess at a specific time, response of nursing staff including those that had both work for years and those who were recently employed on the demands of their job and conflict encountered. The research covers a particular unit context which is nurses in a specified geographical population. Generalization can be carried out to include doctors in other geographical locations.

Conclusion

In conclusion, this study help in our understanding of influence of job demand on strain-based conflict. The findings suggested that though there is the existence of job demands in resulting to strain-based conflict, chances of nurses to better handle strain-based conflict is dependent on special individual characteristics.

References

- Adisa T.A., Mordi C., &Mordi T. (2014).The Challenges and Realities of Work-family Balance among Nigeria Female Doctors and Nurses.Economic Insights – Trends and Challenges.Vol. 3 (3), 23-27.
- Ahmad, A. (2008). Job, family and individual factors as predictors of work-family conflict. The Journal of Human Resource and Adult Learning, 4(1), 57-65.

- Akintayo, D. I. (2010). Work-family role conflict and organizational commitment among industrial workers in Nigeria. *International Journal of Psychology and Counseling*, 2(1), 1-8.
- Bacharach, S.B., Bamberger, P. and Conley, S. (1991). Work-home conflict among nurses and engineers: mediating the impact of role stress and burnout and satisfaction at work. *Journal of Organizational Behaviour*, 12 (39-53)
- Baghban, I., Malekiha, M., & Fatehizadeh, M. (2010).The relationship between work-family conflict and the level of self-efficacy in female nurses in Alzahra Hospital.Iranian Journal of Nursing and Midwifery Research, 15(4), 190.
- Bakker, A. B., Demerouti, E., & Verbeke, W. (2004).Using the job demands-resources model to predict burnout and performance. *Human resource management*, 43(1), 83-104.
- Beckers, D. G., van der Linden, D., Smulders, P. G., Kompier, M. A., van Veldhoven, M. J., & van Yperen, N. W. (2004). Working overtime hours: relations with fatigue, work motivation, and the quality of work. *Journal of Occupational and Environmental Medicine*, 46(12), 1282-1289.
- Beutell, N. J. (2010). Work schedule, work schedule control and satisfaction in relation to work-family conflict, work-family synergy, and domain satisfaction. *Career Development International*, 15(5), 501-518.
- Biggart, L., Corr, P., O'Brien, M., & Cooper N. (2010).Trait emotional intelligence and work-family conflict in fathers. *Personality and Individual Differences*, 48(8), 911-916
- Blanc, A. &Aluja, A. (2012).Social support (family and supervisor), work-family conflict and burnout: sex differences. *Human Relations*, 65(7), 811-833
- Brief, A.P., Schuler, R.S., & Van Sell, M. (1981). *Managing Job Stress*. Boston: Little Brown.
- Burke, R. J., Moodie, S., Dolan, S. L., &Fiksenbaum, L. (2012). Job demands, social support, work satisfaction and psychological well-being among nurses in Spain. *Work satisfaction and psychological well-being among nurses in spain*.ESADE Business School Research Paper, (233).
- Carlson, D. S., Grzywacz, J.G., Ferguson, M. Hunter, E.M., Clinch, C.R., &Arcury, T.A., (2011). Health and Turnover of Working Mothers after Childbirth via the work-family interface: An analysis across time. *Journal of Applied Psychology*, 96(5), 1045-1054.
- Carlson, D.S., Kacmar, K.M., & Williams, L.J. (2000).Construction and Initial Validation of a Multidimensional Measure of Work-family Conflict. *Journal of Vocational Behaviour*, 56, 249-276
- Charkhabi, M., Sartori, R., &Ceschi, A. (2016). Work-family conflict based on strain: The most hazardous type of conflict in Iranian hospitals nurses. *SA Journal of Industrial Psychology*, 42(1), 1-10.
- Colombo L. &Ghislieri C. (2008). The Work-Family Conflict: Theories and Measures. *TPM*, 15(1), 35-55
- Demerouti, E., Bakker, A.B., Nachreiner, F., & Schaufeli, W.B (2001). The job demands resources model of burnout. *Journal of Applied Psychology*, Vol. 86(3), 499-512,
- Edwards, J, &Rothbard, N (2000). Mechanisms linking work and family: clarifying the relationship between work and family constructs. *Academy of Management Review*, 25(1), 179-199.
- Eisenberger, R., Huntington, R. Hutchinson, S. & Sowa D. (1986). Perceived organizational support. *Journal of Applied Psychology*, 71:3(71), 500-507
- Eisenberger, R., Armeli, S., Rexwinkel, B., Lynch, P. D., & Rhoades, L. (2001). Reciprocation of perceived organizational support. *Journal of applied psychology*, 86(1), 42.
- Fagan, C., Lyonette, C., Smith, M., & Saldaña-Tejeda, A. (2012). The influence of working time arrangements on work-life integration or'balance': a review of the international evidence (No. 32). Geneva: ILO.
- Greenhaus, J. H., &Beutell, N., (1985). Sources of conflict between work and family roles. *Academy of Management review*, 10, 76-88

- Greenhaus, J. H., and Parasuraman, S. (1986). A work-family interaction perspective of stress and its consequences. *Journal of Organizational Behaviour* 8(37-60)
- Griffin, M. A., & Clarke, S. (2011). Stress and Well-Being at Work. In S. Zedeck (Ed.), *APA Handbook of Industrial and Organizational Psychology: Vol. 3. Maintaining, Expanding, and Contracting the Organization* (pp. 359-397). Washington DC: American Psychological Association. <http://dx.doi.org/10.1037/12171-010>
- Hatam, N., Jalali, M. T., Askarian, M., & Kharazmi, E. (2016). Relationship between Family-Work and Work-Family Conflict with Organizational Commitment and Desertion Intention among Nurses and Paramedical Staff at Hospitals. *International journal of community based nursing and midwifery*, 4(2), 107.
- Idris M. K. (2011), Overtime Effects of Role Stress on Psychological Strain among Malaysian Public University Academics. *International Journal of Business and Social Science*.2 (9), 154-161
- Ilies, R., Schwind, K. M., Wagner, D. T., Johnson, M. D., DeRue, D. S., & Ilgen, D. R. (2007). When can employees have a family life? The effects of daily workload and effect on work-family conflict and social behaviors at home. *Journal of Applied Psychology*, 92(5), 1368.
- Kahya, C., & Kesen, M. (2014). The effect of perceived organizational support on work to family conflict: a Turkish case. *Research Journal of Business and Management*, 1(2), 139-148.
- King H. (2009). Stress and Well-Being at Work. <http://wweb.uta.edu>
- Kossek, E. E., Pichler, S., Bodner, T., & Hammer, L. B. (2011). Workplace social support and work-family conflict: A meta-analysis clarifying the influence of general and work-family-specific supervisor and organizational support. *Personnel psychology*, 64(2), 289-313.
- Kuschel, K. (2015). Quantitative and qualitative work overload and its double effect on the work-family Interface. *Serie working paper UDD 27*
- Lavassani, K. M., & Movahedi, B. (2014). Developments in theories and measures of work-family relationships: from conflict to balance. *Contemporary Research on Organization and Administration*, 2(1), 6-19.
- Lenthall, S., Wakerman, J., Dollard, M.F., Daun, S., Knight, S., Opie, K., Rickard, G., and MacLeod (2017). Reducing occupational stress among registered nurses in very remote Australia: A participatory action research approach. *Australian College of Nursing Ltd. Published by Elsevier Ltd.*
- Lingard, H., Valeria, F. & Turner, M (2015). *Work-Family Balance Summary Support*. WHS Research. Retrieved from www.rmit.edu.au.
- Malik, M. E., Ghafoor, M. M., & Iqbal, H. K. (2013). Impact of Job Overload and Work Schedule Flexibility on Job Satisfaction: An Insight in Education and Banking Sector of Pakistan. *International Review of Social Sciences and Humanities*, 5(1), 38-47.
- Magnini, V. P. (2009). Understanding and reducing work-family conflict in the hospitality industry. *Journal of Human Resources in Hospitality & Tourism*, 8(2), 119-136.
- Michel, J.S., Kotrba, L.M., Mitchelson, J.K., Clark, M.A., & Baltes, B.B. (2011). Antecedents of Work-family Conflict: A meta-analytic review. *Journal of Organisational Behaviour*, 32(5), 689-725
- Mihelic, K. K., & Tekavcic, M. (2014). Work Family Conflict: a review of antecedents and outcomes. *International Journal of Management & Information System*, 18(1), 15.
- Mojoyinola J.K (2008). Effects of Job Stress on Health, Personal and Work Behaviour of Nurses in Public Hospitals in Ibadan, Nigeria. *Ethno-Med.*, 2(2), 143-148.

- Montgomery, A., Spânu, F., Băban, A. Panagopoulou, E. (2015): Job demands, burnout, and engagement among nurses: A multi-level analysis of ORCAB data investigating the moderating effect of teamwork. *Burnout research*. 2 (3) 71-79.
- Moradi, S., Farahnaki, Z., Akbarzadeh, A., Gharagozlou, F., Pournajaf, A., Abbasi, A. M., & Karchani, M. (2014). Relationship between shift work and Job satisfaction among nurses: a Cross-sectional study. *International Journal of Hospital Research*, 3(2), 63-68.
- Nnada A. (2015). Work-Life Conflict: the Spillover Effect. *International Journal of Research in Management & Business Studies*. 2 (1).
- Opie, T., Dollard, M., Lenthall, S., Wakerman, J., Dun, S., Knight, S., Macleod M. (2010). Levels of occupational stress in the remote area nursing workforce. *The Australian Journal of Rural Health*, 18, 235-241.
- Philip J. Dewe, Micheal P. O'Driscoll & Cary L. Cooper (2012). Theories of Psychological stress. *Handbook of Occupational Health and Wellness, Handbooks in health Work and Disability*, Doi 10.1007/978-1-4614-4839-6_2, @Springer Science + Business Media New York.
- Possenriede, D. S., & Plantenga, J. (2011). Access to flexible work arrangements, working-time fit and job satisfaction. *Discussion Paper Series/Tjalling C. Koopmans Research Institute*, 11(22).
- Proto, E., & Rustichini, A. (2015). Life satisfaction, income and personality. *Journal of Economic Psychology*, 48, 17-32.
- Ramadoss, K. (2012). Job demand, family supportive organizational culture and positive spillover from work-to-family among employees in the information technology enabled services in India. *International Journal of Business and Social Science*, 3(22).
- Rozanti, Mohd Amin, H, & Mohd Amin, S, (2014). Work-Family conflict enrichment and their consequences in Malaysia. *Middle East Journal of Scientific Research*.
- Sabil, S., & Marican, S. (2011). Working hours, work-family conflict and work-family enrichment among professional women: A Malaysian case. In *International Conference on Social Science and Humanity IPEDR (Vol. 5)*.
- Schaufeli, W. (2013). What is engagement? In C. Truss, K. Alfes, R. Debridge, A. Shantz, & E. Soane (Eds) *Employee engagement in theory and practice*. London: Routledge. 15, 321.
- Selvarajan, T. T., Cloninger, P. A., & Singh, B. (2013). Social support and work-family conflict: A test of an indirect effects model. *Journal of Vocational Behavior*, 83(3), 486-499.
- Shelly J Correll, Erin L. Kelly, Lindsey Trimble O'Connor and Joan C. Williams (2014). *Work and Occupations*. Sage Publications, Vol. 41 (1) 3-17
- Shimazu, A., Bakker, A. B., Demerouti, E., & Peeters, M. C. (2010). Work-family conflict in Japan: how job and home demands affect psychological distress. *Industrial health*, 48(6), 766-774.
- Tausig, M., & Fenwick, R. (2001). Unbinding time: Alternate work schedules and work-life balance. *Journal of Family and Economic Issues*, 22(2), 101-119.
- Thakur, A., & Kumar, N (2015). The Effect of Perceived Organizational Support, Role Related Aspects and Work Involvement on Work-Life Balance: Self Efficacy as a Moderator. *International Journal of Scientific and Research Publication*, 5(1).
- Thirapatsakun T., Kuntonbutr C., Mechinda P. (2014), The Relationship among Job Demands, Work Engagement and Turnover Intentions in the Multiple Groups of Different Levels of Perceived Organizational Support. *Universal Journal of Management* 2 (7):272-285.
- Trépanier, S. G., Fernet, C., & Austin, S. (2013). The moderating role of autonomous motivation in the job demands-strain relation: A two sample study. *Motivation and Emotion*, 37(1), 93-105.

- Virtanen, M., Ferrie, J. E., Singh-Manoux, A., Shipley, M. J., Stansfeld, S. A., Marmot, M.G. & Kivimäki, M. (2011). Long working hours and symptoms of anxiety and depression: a 5-year follow-up of the Whitehall II study. *Psychological medicine*, 41(12), 2485-2494.
- Virtanen, M. (2012). Long working hours and health in office workers: a cohort study of coronary heart disease, diabetes, depression and sleep disturbances (Doctoral dissertation, UCL (University College London))
- vonBonsdorff, M. B., Cooper, R., & Kuh, D. (2014). Job demand and control in mid-life and physical and mental functioning in early old age: do childhood factors explain these associations in a British birth cohort?. *BMJ open*, 4(10), e005578.
- Williams, J. C., & Boushey, H. (2010). The three faces of work-family conflict: The poor, the professionals, and the missing middle. Retrieved from: www.americanprogress.org
- Yildirim D., Aycan Z. (2008). Nurses Work Demand and Work-Family Conflict: A questionnaire survey. *International Journal of Nursing Studies*. doi:10.1016/j.ijnurstu.2007.10.010.