

Psychological Well-Being, Self-Compassion & Work-Family Conflict in Hospital Employees

Halimatus Sadiyah¹, Zaki Nur Fahmawati^{2*}

^{1,2}Faculty of Education and Psychology, Universitas Muhammadiyah Sidoarjo
zakinurfahmawati@umsida.ac.id*

Abstract. At this time, women are actively involved in various sectors, including the healthcare industry, such as hospitals. These women bear heavy responsibilities within their families and workplaces, exposing them to work-family conflict challenges. The main objective of this study was to investigate the interaction between Psychological Well-Being (PWB), Self-Compassion (SC), and Work-Family Conflict (WFC) among female employees at Aisyiyah Siti Fatimah Hospital in Tulangan, Indonesia. This study used a quantitative approach with a correlational design. The sampling approach employed in this study is a saturated sample (total sampling), where all willing members of the population, totaling 133 respondents, were included as participants. Data collection involved psychological scales as measuring instruments, with the psychological well-being scale demonstrating a reliability coefficient of 0.780, the self-compassion scale yielding a Cronbach's Alpha value of 0.810, and the work-family conflict scale exhibiting a reliability of 0.87. The findings of this research reveal a significant negative correlation between work-family conflict and psychological well-being. The implications of this study are expected to be beneficial, making a positive contribution to various organizations, including private entities and government agencies, particularly those committed to women's empowerment.

Keywords: *Psychological Well-Being, Self-Compassion, Work-Family Conflict.*

1 Introduction

This era of globalization has brought massive changes where now women also have the same rights and opportunities to work. Following these developments, working women can earn income and develop the potential that exists within themselves. On the other hand, working women are housewives who find it challenging to give up their role in the family. Family is an important concept that continues to develop and is inherent in every individual's life, predominantly female employees. Family life needs to be maintained to achieve a good quality of life because family conflicts can affect the quality of life [1].

In reality, women are actively participating in various sectors, with the healthcare industry being no exception. A noteworthy observation is that a substantial proportion of hospital employees are women, which holds for Siti Fatimah Tulangan 'Aisyiyah Hospital, where most of the workforce comprises women. In this scenario, women are tasked with the challenging dual role of managing their family responsibilities alongside their professional commitments. This work-family conflict is exacerbated by the demands of extended working hours and heavy workloads,

as they consume significant time and energy, thereby limiting available resources for family-related activities [2].

Cascio underscores that work-family conflict becomes a significant burden when individuals find themselves caught between their familial responsibilities and work obligations, ultimately hindering their ability to fulfill their roles as both employees and family members effectively [3]. This conflict emerges when individuals are required to simultaneously navigate multiple roles, such as employees, spouses, and parents, leading to heightened anxiety and tension. Hamid and Amin's findings further support the detrimental impact of work-family conflict on individual performance, ultimately adversely affecting organizations [4]. Consequently, work-family conflict can be defined as inter-role conflict, characterized by the clash of role pressures originating from the domains of work and family [5].

Everyone has their way of balancing work and family demands [6]. Aarntzen and Shalsabilla revealed that higher work-family guilt is associated with more traditional gender behavior in mothers [7, 8]. In particular, mothers are more concerned about reducing their working hours, reducing the time they plan for themselves, and planning to provide time and energy for their future children even if there is no change in actual parenting behavior. Individuals need self-compassion to deal with conflicts in work and family. Self-compassion creates a condition where individuals provide self-compassion and accept their obstacles.

Self-compassion is sensitivity and self-awareness to the problems experienced and dealing with them with unconditional acceptance, caring, understanding, self-acceptance, and warmth [9]. This response is a healthy attitude that can be given to oneself. However, self-acceptance can develop into the ability to understand other individuals [10]. With self-experience comes the ability to feel feelings and put oneself in other individuals' shoes, namely empathy.

Thus, individuals can take past mistakes as valuable lessons in facing new challenges. Self-compassion, in this context, involves developing feelings of care and kindness towards oneself, supported by a deep understanding and absence of harsh self-judgment when facing personal shortcomings and failures. Moreover, self-compassion recognizes that one's experiences are part and parcel of the universal human journey.

With self-experience will come the ability to feel feelings and put oneself in other individuals' shoes, namely empathy. There are components of self-compassion that can help employees balance these roles, namely self-kindness, humanity equal to others, and thinking carefully [11]. This is forming an individual's mindset in looking at a problem so that problems do not occur in other roles. Self-compassion can compensate and help individuals in difficult situations and enable them to use these opportunities to develop. This aligns with the principle of psychological well-being, which sees individuals striving to develop their potential, open and aware of their potential [12].

Based on the description above, it can be formulated whether psychological well-being, self-compassion, and work-family conflict influence RS 'Aisyiyah Siti Fatimah employees. The primary purpose of this study is to explore the relationship between Psychological Well-Being

(PWB), Self-Compassion (SC), and Work-Family Conflict (WFC). In addition, it also aims to study the role of self-compassion in work-family conflict and psychological well-being. Self-compassion is considered a buffer to reduce employee stress and conflict at 'Aisyiyah Siti Fatimah Hospital in Tulangan.

2 Literature Review

From the other researcher argue that psychological well-being (PWB) is a condition in which a person accepts himself as he is, can establish warm relationships with others, has independence under social pressure, can control his external environment, has meaning in life, and can realize his potential sustainably. Psychological well-being is not just life satisfaction and a balance between positive and negative consequences [13].

Meanwhile, according to Aspinwall, psychological well-being describes a person's psychological condition that functions appropriately and positively [14]. When someone does not get their psychological well-being, then indirectly, the quality of life they get will not be optimal, and they will experience a decrease in quality of life. Psychological well-being is an individual's evaluation of the events/situations they experience. Human well-being is not only related to aspects of pleasure but is more complexly related to overall individual functioning, and psychological well-being is a condition where human psychological aspects can function properly and positively.

Keyes explained that well-being also includes social life, which, among other things, reflects that the dimensions of an individual's personal and social life are in harmony or balance [15]. If applied to working mothers, this means that mothers can optimize their internal functions in a balanced manner. If the mother feels that the demands of work are too high, or on the contrary, household life is too consuming, then there may be an imbalance or role conflict that impacts the mother's well-being. For example, a working mother is burdened with thoughts about the condition of her children at home, which results in neglecting the work being done. Similarly, at home, a working mother may think about her unfinished work, resulting in anxiety and arguments in the family. This study's results showing that work-family conflict has a significant negative relationship with psychological well-being and self-compassion.

3 Method

This research is correlational quantitative research. The work-family conflict variable is the dependent variable, while the psychological well-being and self-compassion variables are the independent variables.

The target population in this study is all female hospital employees, totaling 133 employees. The sampling technique is a saturated sample (total sampling) where all members of the population willing to be respondents are sampled [16].

Data collection techniques used psychological well-being, self-compassion, and work-family conflict scales. The psychological well-being scale was adapted from Ryff adapted into Indonesian by Voci et al., 2019. This scale has six dimensions: self-acceptance, personal growth, life goals, environmental mastery, independence, and positive relationships with others. This scale is a Likert scale consisting of 18 statement items. The reliability coefficient of the scale is 0.780 [17].

Self-compassion in the study was measured using Neff's self-compassion scale, adapted into Indonesian by Salsabila, 2021 and has a Cronbach's Alpha value of .810. This scale consists of 26 items that measure the six factors of self-compassion [8]. The scale used in this study is a Likert scale type with four answer options, namely strongly disagree (STS), disagree (TS), agree (S), and strongly agree (SS). The main factors of self-compassion are divided into favorable and unfavorable. The favorable factors are self-kindness, common humanity, and mindfulness. Meanwhile, the unfavorable factors are self-judgment, isolation, and over-identification [9].

In this study, we assessed work-family conflict using the 18-item Likert scale adapted from Kusumawati et al.'s (2018) research, demonstrating a high reliability of 0.87. The scale provides participants with four response options: strongly disagree (SD), disagree (D), agree (A), and strongly agree (SA).

Before hypothesis testing, an assumption test is needed before multiple regression analysis. The normality test is used to test the assumption that the data on each variable to be analyzed form a normal distribution. At this stage, research data processing uses simple regression analysis to determine how much psychological well-being and self-compassion affect work-family conflict. Data analysis was conducted using SPSS software version 21.0 for Windows, and multiple regression analysis was used to see the effect of variable X (independent) on variable Y (dependent). That multiple regression analysis is an association analysis carried out simultaneously to examine the effect of two or more independent variables on one dependent variable with an interval scale.

4 Result

The research included a reliability test to assess the consistency of respondents' responses, employing the Cronbach Alpha test, which is considered reliable if it yields a value greater than 0.5. The reliability test results for the 26-item self-compassion scale yielded a Cronbach alpha value of 0.866, surpassing the 0.5 threshold and exceeding the r-table value of 0.3297. Similarly, the 18-item work-family conflict scale achieved a high-reliability score of 0.925, well above the 0.5 benchmarks, with an r-table value of 0.4000. Furthermore, the 18-item psychological well-being scale exhibited strong reliability, recording a Cronbach alpha value of 0.937, surpassing the 0.5 threshold and exceeding the r-table value of 0.400. The descriptive data is shown in **Table 1**.

Table 1. Empirical data description of research variables

Category	Work-family conflict		Self-compassion		Psychological Well-being	
	N	%	N	%	N	%
Low	17	12.8	50	37.6	27	20.3
Medium	63	47.4	53	39.8	80	60.2
High	53	39.8	30	22.6	26	19.5

The classical assumption test is an analysis that must be done before hypothesis testing using multiple regression analysis so that the conclusions from the regression are not biased. Several tests are carried out: normality test, multicollinearity test, autocorrelation test, heteroscedastic test, and linearity test. The normality test in this study used the Kolmogorov-Smirnov test. The analysis results showed that the residual values in this study were normally distributed with a significance value of 0.099 ($p > 0.05$), indicating that the data were generally distributed in the Kolmogorov-Smirnov test. Multicollinearity test analysis was conducted, and the results indicated an absence of multicollinearity symptoms, as evidenced by the tolerance value of 1.000, which exceeds the typical threshold of 0.1. Additionally, the VIF values for the variables related to work-family conflict, self-compassion, and psychological well-being were all below 10, with a value of 1.000, further confirming the absence of multicollinearity. In this study, a heteroscedasticity test was conducted using a Scatterplot. The data analysis results indicate homogeneity, as the data points are evenly distributed above and below the Y-axis at the zero point, suggesting the absence of heteroscedasticity.

The results of autocorrelation analysis show that the Durbin-Watson value (d) is 1.820, which is greater than the upper limit (d_U) of 1.747 and less than $(4-d_U) 4-1.820 = 2.180$. So, as a basis for decision-making in the Durbin-Watson test above, it can be concluded that there are no problems or symptoms of autocorrelation. Based on the results of the classical assumption test that has been carried out, it is concluded that all linear regression requirements have been met.

Hypothesis testing in this study used multiple regression analysis. **Table 2** is the result of data analysis in this study:

Table 2. Correlation test result

		SC	PWB	WFC
SC	Pearson Correlation	1	-.155*	-.125*
	Sig. (2-tailed)		.002	.002
	N	133	133	133
PWB	Pearson Correlation	-.548*	1	-.604*
	Sig. (2-tailed)	.002		.004
	N	133	133	133
WFC	Pearson Correlation	-.125*	-.604*	1
	Sig. (2-tailed)	.002	.004	
	N	133	133	133

Based on the calculation table above, it is known that the correlation value between self-compassion and work-family conflict is 0.125 with a sign (-), which means that there is a negative relationship between self-compassion and work-family conflict, while the result of the correlation value of psychological well-being with work-family conflict is 0.604 with a sign (-) which means that there is a negative relationship between psychological well-being and work-family conflict. The significance value of 0.002 <0.05 indicates a significant relationship between self-compassion and work-family conflict, and the significance value of 0.004 <0.05 indicates a significant relationship between psychological well-being and work-family conflict.

Based on the research results using analysis of variance (ANOVA), the results obtained an adequate contribution of 0.019. Self-compassion and psychological well-being effectively contribute 1.9% to work-family conflict. In comparison, 98.1% is influenced by other factors besides self-compassion and psychological well-being that are not revealed in this study. In addition, the results of the influence of each independent variable on the dependent variable were obtained. Based on the results of data analysis, it is known that the effect of self-compassion on work-family conflict is 1.54%. In comparison, the effect of psychological well-being on work-family conflict is 0.36%. Thus, it can be concluded that the self-compassion variable significantly influences the reduction of work-family conflict.

5 Discussion

The results of data analysis found that work-family conflicts were negatively related to the self-pity and psychological well-being of Siti Fatimah Tulangan 'Aisyiyah Hospital employees, meaning that the higher self-compassion and psychological well-being, the lower the work-family conflict experienced and vice versa. If self-compassion and psychological well-being, the higher the work-family conflict experienced. Individuals who experience conflict cannot

carry out their duties and responsibilities in family life, triggering negative feelings such as regret, failure, inability to accept shortcomings, and being themselves [18].

Likewise, the relationship score between self-compassion and psychological well-being in work-family conflict had a significance score smaller than 0.05. Self-compassion and psychological well-being effectively contribute 1.9% to work-family conflict. The effect of self-compassion on work-family conflict is 1.54%, while the effect of psychological well-being on work-family conflict is 0.36%. Thus, it can be concluded that the self-compassion variable has a more significant influence on work-family conflict. Self-compassion is essential for everyone as it enables individuals to recognize their humanity, just like others. When individuals confront situations where family members, particularly spouses, struggle to balance work and family demands, those with solid self-compassion are better equipped to offer forgiveness, empathy, and acceptance. These individuals tend to view the imbalance caused by their partner's inability to simultaneously fulfill work and family roles as manageable rather than severe problems [19].

If a person can love himself and his psychological well-being is controlled, then when experiencing conflict in the imbalance of his role as a female employee at Siti Fatimah 'Aisyiyah Hospital, he will tend to think positively and be more rational in solving his problems, then when individuals are more able to love themselves, the tendency to forgive and forgive themselves for any mistakes or failures, in this case is the employee's resolution of the employee's inability to fulfill the role of a good woman, wife, and mother in their personal life [20].

The results of this analysis are reinforced by research conducted by [21], that marital adjustment is a negative and significant predictor of work-family conflict. With an increase in marital adjustment, work-family conflict decreases. This research aligns with the findings of Fridayanti and Yulinar (2021), which indicated a significant inverse relationship between work-family conflict and psychological well-being among female factory employees. Their study revealed that as work-family conflict increased, the psychological well-being of these employees decreased, and conversely, when work-family conflict decreased, psychological well-being improved.

Self-compassion has a significant negative or opposite relationship with work-family conflict, meaning that the higher the self-compassion, the lower the work-family conflict experienced, and conversely, if self-compassion is low, the higher the level of work-family conflict experienced. Self-compassion made a compelling contribution of 19.2% to work-family conflict [19].

The study results show that work-family conflict negatively impacts the psychological well-being of tour leaders and that planning leisure coping styles has a positive effect on psychological well-being. In addition, planned leisure coping styles can buffer the negative relationship between work-family conflict and psychological well-being, and avoidant leisure coping styles can strengthen the negative relationship between work-family conflict and psychological well-being. Research conducted obtained empirical results showing a significant relationship between work-family conflict and psychological well-being in working mothers. In

this study, work-family conflict is included in the medium category, while psychological well-being is included in the high category.

6 Conclusion

Based on the results of the data analysis, it can be concluded that psychological well-being and self-compassion negatively influence work-family conflict among employees of Siti Fatimah Tulangan 'Aisyiyah Hospital. These results obtained an adequate contribution of 0.019. Self-compassion and psychological well-being provide an effective contribution of 1.9% to work-family conflict, while 98.1% with an F value of 74.494, indicating that the higher the psychological well-being and self-compassion, the lower the work-family conflict in employees of Siti Fatimah 'Aisyiyah Hospital. Conversely, the lower the psychological well-being and self-compassion, the higher the work-family conflict among 'Aisyiyah Siti Fatimah Hospital employees.

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