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

## Halimatus Sadiyah, Zaki Nur Fahmawati

Department of Psychology, Faculty of Education and Psychology, Universitas Muhammadiyah Sidoarjo, Sidoarjo.

Email: [zakinurfahmawati@umsida.ac.id](mailto:zakinurfahmawati@umsida.ac.id)

## ABSTRACT

According to the facts on the ground, women can work in various sectors including in hospitals. They have a burden where their role is needed in the family and are responsible for their work, making them vulnerable to experiencing *work-family conflict*.This study aims to explore the relationship between *Psychological Well-Being* (PWB), *Self-Compassion* (SC), and *Work-Family Conflict* (WFC) in female employees of RS Aisyiyah SitiFatimah, Tulangan, Indonesia. This research is quantitative research. The design in this study is correlation between three variables. Respondents in this study were 133 female employees. The sampling technique used is a saturated sample (*total sampling*) where all members of the population who are willing to become respondents are used as samples. The data collection technique in this study is to use measuring instruments in the form of *psychological* scales, namely the *psychological well-being scale*, the *self compassion scale*,and the *work-family conflict scale.* The results showed that there is a significant negative relationship between work family conflict and psychological well-being.

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

## Introduction

This era of globalisation has brought huge changes where now women also have the same rights and opportunities to work in the world of work. In accordance with these developments, working women can earn income and develop the potential that exists within themselves. But on the other hand, working women are housewives who find it difficult to give up their role in the family. Currently, the concept of family is an important concept that continues to develop and is inherent in the lives of every individual, including employees, especially female employees. To achieve a good quality of life, family life needs to be maintained because family conflicts can affect quality of life.

According to the facts on the ground, women can work in various sectors including in hospitals. Most workers in hospitals are women, including at Siti Fatimah Tulangan 'Aisyiyah Hospital, where most of the workers/employees are women. This makes women have a dual role between family and work. They have a burden where their role is needed in the family and are responsible for their work, making them vulnerable to experiencing *work-family conflict*.

According to Greenhaus & Beutell, *work-family conflict* is a form of *inter-role conflict*, namely the pressure or role imbalance between roles at work and roles in the family (Putri & Rositawati, 2022). High working hours and heavy workload are direct signs of *work-family conflict* because it takes excessive time and energy to work. This results in a lack of time and energy that can be used for family activities.

Cascio stated that *work-family conflict* becomes a burden when individuals are in the middle of a family, so that individuals cannot function properly as workers as well as family members (Darmawati, 2019).*Work-family conflict* occurs when individuals must carry out dual roles, namely as employees, as spouses (husband/wife) and as parents. This situation can cause anxiety and tension in individuals. Hamid and Amin stated that *work-family conflict* can lead to poor performance which can have a negative impact on the organisation (Rahmat et al., 2021). *Work-family conflict* is a form of inter-role conflict in which role pressures from work and family domains conflict with each other (Jr et al., 2019).

Everyone has their own way of balancing the demands of work and family demands (Kadria, 2019). Individuals need *self-compassion* to deal with conflicts in work and family. *Self-compassion* creates a condition where individuals provide self-compassion and accept the obstacles they face.

*Self-compassion* is sensitivity and self-awareness to the problems being experienced and dealing with them with unconditional acceptance, caring, understanding, self-acceptance, and warmth (Sugianto et al., 2020). This response is a healthy attitude that can be given to oneself. However, self-acceptance can develop into the ability to understand other individuals (Dreisoerner et al., 2021). With self-experience comes the ability to feel feelings and put oneself in the shoes of other individuals, namely empathy.

The importance of *self-compassion* is the formation of an attitude of not giving up and blaming yourself when facing problems. Past mistakes will be learnt to face new challenges (Wardi & Ningsih, 2021). *Self-compassion is* defined as a feeling of care and kindness towards oneself, understanding, not judging one's shortcomings and failures, and realising that one's experience is part of the ordinary human experience (Nicklin et al., 2022).

With self-experience will come the ability to feel feelings and put oneself in the shoes of other individuals, namely empathy. There are components of *self-compassion* that can help employees in balancing these roles, namely self-kindness, humanity that is equal to others, and thinking carefully (Triana, 2019). This is the formation of 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 make them able to use these opportunities to develop. This is in line with the principle of *psychological well-being* which sees individuals striving to develop their potential, open and aware of their potential (Bakr, 2020).

Hospital services are an integral part of health services based on nursing science and tips, in the form of comprehensive biological, psychological, social and spiritual services aimed at individuals, families and communities (Kartikasari et al., 2020).Yana revealed that as health workers whose job is to meet the health needs of other individuals, ideally hospital employees first meet their own needs both physically and psychologically so that when working hospital employees feel comfortable and safe (Fatmawaty et al., 2021).

Employees who experience *work-family conflict* may be less able to control their emotions and rarely have positive feelings, making it difficult to achieve *psychological well- being*. Conversely, employees with low PWB will more easily experience this dual role conflict (Pamintaningtiyas & Soetjiningsih, 2020).

**Literature Review**

According to Ryff, *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, is able to control his external environment, has the meaning of life and is able to realise his potential in a sustainable manner (Isnaeni & Nashori, 2022). Psychological well-being is not just life satisfaction and a balance between positive and negative consequences (Ayuningtyas et al., 2018).

Meanwhile, according to Aspinwall, *psychological well-being* describes a person's psychological condition that functions properly and positively. When someone does not get their psychological well-being, then indirectly the quality of life they get will not be optimal and 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 (Chandra, 2021).

Keyes explained that well-being itself also includes social life which, among other things, reflects the feeling that the dimensions of an individual's personal and social life are in harmony or balance. If applied to working mothers, this means that mothers can optimise 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 it is possible that there will be an imbalance or role conflict that has an impact on 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, when at home, a working mother may think about her unfinished work, resulting in anxiety and arguments in the family (Nona & Sumargi, 2022).

This is in accordance with research conducted by Rafique, et al entitled *Role of Self- Compassion in Work-Family Conflict and Psychological Well-Being Among Working Men and Women*. The results showed that *work-family conflict* has a significant negative relationship with psychological well-being and *self-compassion*. The results of this study also show that psychological well-being is positively related to self-compassion (Rafique et al., 2018).

Another study conducted by Mumtaza explained the relationship between dual role conflict and psychological well-being in mothers who work as kowad (Army Women's Corps), getting the results that female soldiers stated that mothers who work as kowad have high psychological well- being then the dual role conflict experienced is low (Mumtaza, 2020).

Based on the description above, it can be formulated whether there is an influence of *psychological well-being, self-compassion*, and *work family conflict* on employees of RS 'Aisyiyah Siti Fatimah. The main 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 relation to *work-family conflict.*

and psychological well-being. *Self-compassion* is considered as a buffer to reduce employee stress and conflict at 'Aisyiyah Siti Fatimah hospital in Tulangan.

**Research Design**

This research is quantitative research. The design in this study is correlation between three variables, namely *work-family conflict*, *psychological well-being*, and *self-compassion*. The *work-family conflict* variable is the dependent variable, while the *psychological well-being* and *self-compassion variables are* the independent variables.

## Research subject

Respondents in this study were 133 female employees of Siti Fatimah 'Aisyiyah Hospital Tulangan, Sidoarjo. The target population in this study were all female hospital employees who were permanent and contract employees who were willing to become respondents. The sampling technique used is a saturated sample (*total sampling*) where all members of the population who are willing to become respondents are used as samples (Saputra & Rudiartha, 2020).

## Data collection method

The data collection technique in this study is to use measuring instruments in the form of *psychological* scales, namely the *psychological well-being scale*, the *self compassion scale*, and the *work-family conflict scale.*

The psychological *well-being* scale was adapted from Ryff & Singer's *Psychological Well-being Scale*. This scale has six dimensions, namely: *self-acceptance*, *personal growth, life* goals, *environmental mastery*, independence and *positive relationships* with others. Thisscale is a Likert scale consisting of 18 statement items. The reliability coefficient of the scale is 0.780 (Eva et al., 2020).

*Self-Compassion* in this study was measured using the *self-compassion* scale which was adopted from previous research conducted by (Sugianto et al., 2020). 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* six factors which are divided into two groups, namely *favourable* and *unfavourable*. The *favourable* factors are *self- kindness, common humanity*, and *mindfulness*. Meanwhile, the unfavourable factors are *self- judgement, isolation*, and over-identification (Sugianto et al., 2020).

*Self-compassion* in the study was measured using the *self-compassion* scale by Neff which has been adapted into Indonesian by Salsabila and has a Cronbach's Alpha value of .810. This scale consists of 26 items that measure the six factors of *self*-compassion (Salsabila, 2021).

## Method

*Work-family conflict* in this study was measured using the *work-family conflict scale* which was adopted from previous research conducted by Chandra in 2021. The scale has 18 items and is a Likert scale with four answer choices, namely strongly disagree (STS), disagree (TS), agree (S) and strongly agree (SS). This scale has a reliability of 0.87 (Chandra, 2021).

## Data analysis method

Before hypothesis testing, 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 analysed form a normal distribution. At this stage, research data processing is carried out using simple regression analysis to determine how much *psychological well-being, self-compassion* on *work-family conflict*. Data analysis was conducted using SPSS software version 16.0 for Windows and multiple regression analysis is used to see the effect of variable X (independent) on variable Y (dependent). Isnaeni & Nashori suggested 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. (Isnaeni & Nashori, 2022).

## Result

**Description of research data**

The reliability test was carried out with the aim of seeing the consistency of the respondents' answers. The reliability test in this research was carried out using the *Cronbach Alpha* test*,* which can be declared reliable if it gets a value> 0.5 (Rosyada, 2020). The results of the reliability test on the *self-compassion* scale of 26 items obtained a *Cronbach alpha* value of 0.866> 0.5 with an r-table value of 0.3297. The *work-family conflict* scale of 18 items is 0.925> 0.5 with an r-table value of 0.4000, and the *psychological well-being* scale of 18 items is 0.937> 0.5 with an r-table value of 0.4000.

## Description of empirical data

Empirical data is everything that is based solely on experiments or experiences to determine the results of an investigation process that is relevant to the formulation of relevant questions and objectives. The amount of data used is 133 data. The following are the results of testing the empirical data description of the research variables.

## Table.1

### Empirical data description of research variables

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| *Work family* | | | *Self* |  | *Psychological* | |
| Category | *conflict* |  | *compassion* |  | *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 |

*Notes. N = 133*

The table above shows that the largest number in *work family conflict* is in the moderate category at 47.4%, *self-compassion* is in the moderate category at 39.8% and *psychological well-being* is in the moderate category at 60.2%.

## Classical Assumption Test Results

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. There are several tests carried out, namely normality test, multicollinearity test, autocorrelation test, heteroscedastic test, and linearity test (Ghozali, 2018). The normality test in this study used the *Kolomogorov-Smirnov* test. Data is said to be normally distributed in the *Kolmogorov-Smirnov* test if the significance value is greater than .05 then the data is normally distributed, otherwise if the significance value is smaller than .05 then the data is distributed abnormally. The analysis results show that the residual values in this study are normally distributed because the significance value is .099 (p> .05). Which can then use *multicollinearity* test analysis with the results of the analysis showing that there are no symptoms of *multicollinearity* because the *tolerance* value is 1,000> 0.1 and the VIF value on the *work family conflict, self-compassion & psychological well-being* variables is 1,000 < 10.

*The heteroscedasticity* test in this study uses Scatterplot. Based on the results of data analysis, it is known that the data is homogeneous, the points spread above and below the number 0 on the Y axis and are safe from heteroscedasticity.

The results of data analysis show that the Durbin-Watson (d) value is 1.820 which is greater than the upper limit (dU) of 1.747 and less than (4-du) 4-1.820 = 2.180. So as the 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 Test Results

Hypothesis testing in this study used *Pearson product moment* analysis*. The* following are the results of data analysis in this study:

## Table.2

### Product moment correlation test result

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

## Table. 3

**Effective Contribution Results**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Component | B | Cross | Regression | Total |
| product | effective sum |
| Sc | -0.153 | -395.083 | 74.494 | 1.9% |
| pwb | -0.092 | -154.932 |

Based on the results of research using *analysis of variance* (ANOVA), the results obtained an effective contribution of 0.019. *Self-compassion* and *psychological well-being* provide an effective contribution of 1.9% to *work family conflict*, while 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%, 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 greater influence on reducing *work family conflict*.

## Discussion

Based on the results of data analysis, it was found that *work family conflict* has a negative relationship with *self-compassion* and *psychological well-being of* employees of Siti Fatimah Tulangan 'Aisyiyah Hospital. This means that the higher the *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. This is strongly supported by the considerable contribution by *self-compassion* and *psychological well-being* to *work family conflict*. Individuals who experience conflict cannot carry out their duties and

responsibilities in family life, so that they can trigger negative feelings such as regret, failure, unable to accept shortcomings and being hard on themselves (Sitanggang, 2020).

Likewise, the influence between *self-compassion* and *psychological well-being* on *work family conflict* with a significant value smaller than 0.05. *Self-compassion* and *psychological well- being* provide an effective contribution of 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 greater influence on *work family conflict*. *Self-compassion* is needed for every individual because *self- compassion* makes individuals able to place themselves as humans, like other individuals in general. When individuals face the fact that family members, especially spouses, are unable to balance the demands of work and family, individuals who have high *self-compassion* will be able to forgive, empathise and accept the situation well. Individuals will perceive that the imbalance that occurs because the partner is unable to carry out the demands of the role at work and family at the same time, is not a serious problem (Hidayati, 2015).

If a person is able to 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 have a tendency 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 fulfil the role of a good woman, wife, and mother in their personal life (Utami et al., 2021).

The results of this analysis are reinforced by research conducted by Sajedeh Fakhrabadi and Azade Abooei. Which is entitled *Predicting Work-family Conflict based on Job Stress, Self- Compassion, and Marital Adjustment among Female Teachers during the News of Covid-19*. The results showed that marital adjustment is a negative and significant predictor of *work-family conflict*, and with an increase in marital adjustment, *work-family conflict* decreases. And the need for teachers' self-awareness in forming good emotion regulation strategies to prevent harmful behaviour into positive situations (Fakhrabadi & Abooei, 2021).

## Conclusion

Based on the results of data analysis, it can be concluded that *psychological well-being* and *self-compassion* have a negative influence on *work family conflict* in employees of Siti Fatimah Tulangan 'Aisyiyah Hospital. These results indicate 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* in 'Aisyiyah Siti Fatimah Hospital employees. In addition, it is strengthened by other studies, including research conducted by Audri Almira Salsabila entitled The Effect of *Self-Compassion* on Work *Family Conflict* in Employees Working from Home, with significant results, then the influence given by *self-compassion* is a negative influence on *work-family conflict.*

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